

Breast Reduction Surgery for the Patients of Dr. Morris

Halifax Infirmary

Please bring this booklet with you to the hospital on the day of your surgery.

Breast Reduction Surgery for the Patients of Dr. Morris

What will happen during breast reduction surgery?

- During breast reduction surgery, a plastic surgeon will remove breast tissue. This will reshape the breasts and make them smaller.
- The nipple and areola (area around the nipple that is a different or darker colour than the rest of your skin) are usually moved higher on the breast.
- The areola is usually made smaller.

Why is breast reduction surgery done?

A person with large breasts may:

- › have back, neck, and/or shoulder pain.
- › have itchy or painful skin under the breasts.
- › have headaches.
- › have painful bra strap grooves.
- › find it hard to play sports or exercise.
- › have trouble finding clothes that fit.

Surgery can help with some of these problems.

Will breast reduction surgery help with my pain?

- There are many things that can cause back pain. It is often hard to find the exact cause of this pain.
- Breast reduction surgery can help with back, neck, and shoulder pain caused by heavy breasts.
- Most people who have breast reduction surgery have some relief from their back pain, but there is **no guarantee** that it will work for you.

Should I have this surgery?

If you are thinking about having breast reduction surgery, you should consider:

Breast maturity

- It is recommended that you wait until your breasts are fully developed (**usually by age 18 to 20**) before having breast reduction surgery.
- You may choose to have surgery before maturity if your symptoms are severe (very bad).

Pregnancy and breastfeeding

- Pregnancy and breastfeeding can change the size and shape of the breasts.
- **Breastfeeding may not be possible after breast reduction surgery.**
- You may choose to have surgery **after** you have had children.

Smoking

- Smoking can increase the risk of complications. Your surgeon may ask you to stop or cut down on smoking before surgery.

Body weight

- Your weight may affect your chances of complications. Your surgeon may talk to you about your weight or ask you to lose weight before surgery.

Expectations

It is important that you understand the surgery and its possible complications. It is also important to have realistic expectations before deciding to have the surgery.

Is breast reduction surgery covered by the provincial health care program (MSI)?

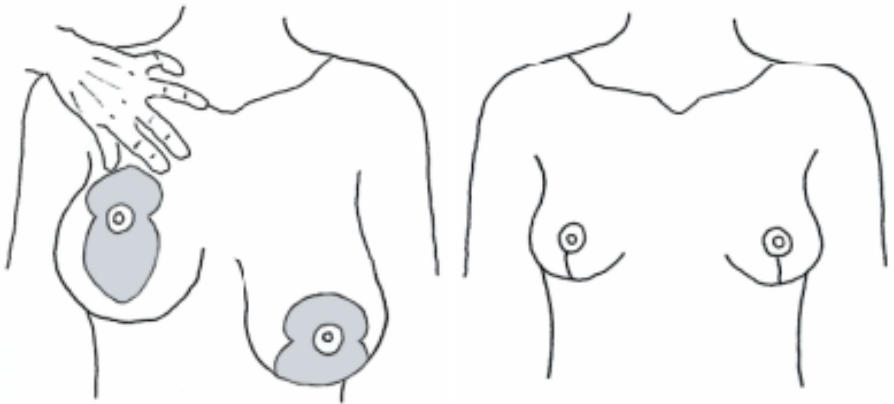
- **Yes.** MSI will often cover breast reduction surgery if you are having physical symptoms because of your breasts.
- To get MSI coverage for the surgery, your surgeon needs to write a letter to MSI requesting the coverage.
- **In Nova Scotia, you must be approved by MSI** to have breast reduction surgery.
- You must have a body mass index (BMI) of 27 or less to be approved. BMI is a measurement related to your height and weight. You can calculate your BMI by visiting:
 - › www.mayoclinic.org/bmi-calculator/itt-20084938

If my surgery is not covered by MSI, can I pay for it myself?

Yes. Talk to your surgeon to get a quote for the cost of the surgery.

How is breast reduction surgery done?

- Breast reduction surgery is usually a day surgery (you can go home from the hospital on the same day you had surgery).
- The surgery is done under general anesthetic (medication to put you to sleep during surgery).
- The surgery usually takes about 2 hours.
- There are many ways to do breast reduction surgery. Most often, the vertical technique is used.



- During surgery, skin and tissue within the shaded areas (see image above) are removed.
- The nipple is moved higher on the breast.
- The incisions (cuts) are then stitched together. This leaves a scar around the areola and a scar that goes from the areola to the breast crease.

- You may need another incision along the breast crease. This will depend on your breast size and shape.

How much tissue is removed and who will decide this?

- Your surgeon will ask you what size you would like your breasts to be after surgery.
- **You must clearly explain your expectations to your surgeon.**
- The size of your breasts is an important decision for you and your surgeon to make together.
- Photos are good way to help show your surgeon the breast size you would like.

Will I have scars after surgery?

- **Yes.** The shape of the scar will be different depending on the technique used during surgery. At first, the scars will be red and elevated (raised up a bit).
- The scars will usually fade over time, and get thin and flat. Sometimes the scars stay visible or get thicker.

- Scars will look different for each person. Some scars become pale and thin. Some get thicker and/or darker coloured.
- The chance of having more visible or thicker scars goes up:
 - › if you smoke.
 - › if the scars are exposed to a lot of sunlight while they are healing.
 - › if you have had heavy scarring before.
 - › with some types of skin that form thicker scars.
- Abnormal scarring of the skin or tissue can cause breast pain.

What are the risks of this surgery?

Complications from breast reduction surgery do not happen often, but they are possible, like with any surgical procedure. Possible complications include:

Bleeding

- Although rare, some people have excessive (a lot of) bleeding during or after surgery. If this happens, you may need a blood transfusion and/or other procedures.

- Avoid taking Aspirin® or anti-inflammatory drugs (like Advil®, ibuprofen, Motrin®, naproxen) for one month before surgery. This will help to lower the risk of excessive bleeding.

Infection

It is possible for the breast tissue to get infected. Infection can usually be treated with antibiotic medication. You may also need more surgery.

Changes in nipple and breast sensation

- Surgery can cause changes in how sensitive your breasts and nipples are.
- You may have permanent loss of feeling in one or both nipples. This is rare.
- Sometimes, one or both nipples can become hypersensitive (you experience more feeling than usual) for several months after surgery. This will go away over time.

Delayed (slow) healing and skin or nipple loss

- Sometimes the the incisions take longer to heal than normal.
- Poor wound healing may cause necrosis (tissue death). This can lead to the loss of one or both nipples. If this happens, you may need more surgery.

- Necrosis can also happen in the deeper fatty tissue of the breasts. This can cause the breasts to feel firm or lumpy.
- You may need to have a biopsy of the necrotic areas of the breasts and/or more surgery. A biopsy is where a small sample of breast tissue is taken and sent to the lab to be checked for breast cancer.
- **The risk of delayed healing and tissue death is higher if you smoke anything.** This is because smoking lowers the amount of oxygen delivered to the healing tissue.

Breastfeeding

You may not be able to breastfeed after breast reduction surgery.

Breasts are not equal in size and/or shape

- Most peoples' breasts are naturally a different size and/or shape.
- It is almost impossible for a surgeon to make the breasts exactly the same.
- You may need more surgery if the breasts are very different in shape, size, or nipple position after surgery.

Pain

- You will feel some discomfort for several days up to weeks after the surgery.

- Your surgeon will prescribe medication to help you manage the pain.
- You may still have back, neck, and shoulder pain after having a breast reduction.

Firmness

Fat necrosis or scarring of the deeper tissue of the breast can make the breast feel abnormally firm or lumpy.

Allergic reaction

- It is possible have a local (happens only in one part of your body) allergic reaction to medical supplies like tape, stitches, or cream. This is not common.
- More serious reactions to the medicines used during surgery or to the prescription medicines can also happen. Make sure to tell your health care team if you have any allergies, including allergies to medication(s).

You may not be happy with the results

You may not be happy with the size and shape of your breasts after surgery. MSI may not cover the costs of more surgery.

Anesthesia

There is always a risk of complications, injury, or even death with a general anesthesia. This is very rare.

Risk of breast cancer

- A breast reduction **does not** increase the chances of having breast cancer.
- Sometimes breast cancer is found in the tissue removed from the breasts. If this happens, you may need to have a mastectomy (removal of part or all of the breast). Your health care team will talk with you about next steps, if needed.

Other complications may happen, but they are not common. It is not possible to predict if you will have complications.

How should I get ready for surgery?

- **Do not use or eat these products for 30 days before your surgery:**
 - › Aspirin® (or any products that contain Aspirin®)
 - › Anti-inflammatory medication (like Advil®, ibuprofen, Motrin®, naproxen)
 - › Vitamin E
 - › Garlic
- These products can increase your risk of bleeding.

Smoking

- Smoking will increase your risk of wound healing complication, tissue death, and heavy scarring.
- It is strongly recommended that you **do not smoke for 4 weeks before and 4 weeks after surgery.**

Food and drink

- **Do not eat or drink after midnight the day before your surgery.**
- If you do, the anesthesiologist may ask to have the surgery postponed or canceled for safety reasons.

Things you will need:

Postoperative compression garment or bra

- You will need to buy a postoperative compression garment (a piece of clothing that fits tightly around the skin and helps with healing after surgery) or a supportive sports bra. You will wear this after your surgery to help with your recovery.
- These are available at the Shoppers Drug Mart at the Halifax Infirmary, part of the QEII. They may also be available at other drugstores that sell medical equipment.

- You do not need a prescription for the garment/sports bra, but your surgeon or another health care provider can write a prescription if you need it for insurance coverage.
- The garment or bra should be the size that you expect to be after surgery.

Pain medication

- You will get a prescription for pain medication when you visit the surgeon before surgery.
- Fill this prescription before your surgery.

Arrangements

- You must arrange to have someone take you home from the hospital. You cannot take a taxi by yourself.
- The person must stay with you for the first **24 hours** (1 day) after your surgery.
- If you have young children, you should arrange for child care or extra help from family or friends for at least 24 hours after your surgery.

What will happen on the day of my surgery?

- You will be asked to arrive at the Halifax Infirmary 3 hours before your scheduled surgery. Use the Robie street entrance, then take the elevator by the entrance to the 5th floor.
- You will meet with your plastic surgeon to talk about any of your questions. At this time, your surgeon will make some markings on your breasts to plan the surgery.
- You will then be taken to the Operating Room (OR). The anesthesiologist will give you medication to put you to sleep during the surgery.
- The surgery will take about 2 hours.
- In some surgeries, a small tube will be placed in each breast to drain blood and fluid. Your chest will be wrapped in gauze dressing and elastic bandages.
- After surgery, you will be taken to the recovery area and monitored closely.
- When you have recovered from the anesthetic, you will be able to go home. **Someone must take you home.**

What will happen after my surgery?

Managing pain and taking medication

- Rest and take pain medication as needed.
- Your surgeon will prescribe a narcotic pain medication. Side effects may include:
 - › Nausea (upset stomach)
 - › Stomach pain
 - › Constipation (not being able to poop)
- Use this medication as needed. **Do not** take it more often or at a higher dose than the instructions say to do.
- Tylenol® and Advil® also work well for pain relief. They can be used with the prescription pain medication. Follow the instructions on the package.

Recovery

- Over time you will feel stronger and be able to do light activities.
- It is important during the first few days after surgery to rest and not do too much.
- You will need some time to recover from both the surgery and the anesthesia. Stretching your legs and doing some short walks outdoors is fine. You can start doing this anytime after your surgery.

- **Do not** lift anything heavier than 10 pounds for 3 to 4 weeks.
- If you have drains in your breasts, you will need to empty the container every 4 to 6 hours. A nurse will show you and/or your support person(s) how to do this, if needed.
- The drains are usually taken out 1 to 3 days after the surgery. Your surgeon will let you know when they will be taken out.
- For the **first 3 days, do not** shower. You may have a sponge bath.
- After **3 days**, you can take the wrap off your breasts and shower. Leave the Steri-Strips™ (tape) on the skin. **Do not** have a tub bath or soak in a hot tub.
- Gently pat your breasts dry after you shower.
- At this time, you can start to wear your postoperative compression garment/sports bra **24 hours a day, for 7 days**. This protects your breasts.
- After 7 days of wearing a sports bra at all times, you can start sleeping without it. Wear a sports bra whenever you are awake for **one month**.
- **Do not wear an underwire bra until 3 months after your surgery.**

- Your surgeon will see you in a follow-up appointment in the first 1 to 2 weeks. The stitches and tape will be removed at this time.
- After the steri strip tapes come off of the incisions at about 3 to 4 weeks following surgery, start to massage all of the incisions with Vaseline daily, usually before you shower. This will help healing and lower scarring. You should massage daily for 1 year.

When can I go back to my usual activities and work?

- You should be up and out of bed the day after surgery.
- Most people will be able to return to most of their usual activities within a few days of the surgery.
- Your breasts will be very tender for the first few days. They may ache for several weeks after surgery.
- You should avoid any strenuous (hard) upper body activity for 4 to 6 weeks.
- Depending on your job, you will probably be able to go back to work within 1 to 4 weeks.

How long does it take to heal?

- Bruising of the breasts usually goes away within **1 to 2 weeks** of the surgery.
- The skin incision will heal in **10 to 14 days**.
- The swelling will go down within a few months. It usually takes **between 6 months and 1 year** for the breasts to settle and reach their final shape.

Will my breast size change after surgery?

- Your breast size should stay about the same if you do not gain or lose any weight or get pregnant.
- Breast size will still fluctuate (go up and down) as your weight changes. It is recommended that you be at a stable, lean weight when you have the surgery.
- Pregnancy and breastfeeding can cause breasts to get bigger, but they usually return to their pre-pregnancy size after breastfeeding is stopped.
- Breast reduction surgery will not prevent changes to the shape of your breasts as you age. The shape of your breasts will change over time.

Contact your surgeon after surgery if:

- › You have a fever and/or chills
- › Your incisions become very red and/or swollen, or start to leak discharge (fluid), especially if the discharge has a smell or is green or yellow
- › Your incisions separate (come apart)
- › Your pain is not helped by your pain medication
- › You get small sores on the breast(s)
- › You get a skin rash or have trouble breathing

If you are not able to contact your surgeon, go to the nearest Emergency Department right away.

If I need more than one surgery, will the cost be covered by MSI?

- **Yes**, depending on the reason for the surgery:
- Most people will only need **one** breast reduction surgery.
- Further surgery may be needed if complications (like bleeding, infection, or poor wound healing) take place.
- If you need more surgery to treat complications, there is a good chance it can be covered by MSI just like your first surgery was.
- If you are not happy with the look of your breasts, you can choose to have more surgeries to correct them. This type of surgery would be considered “cosmetic” and is usually **NOT covered by MSI**.

What are your questions?

Please ask. We are here to help you.

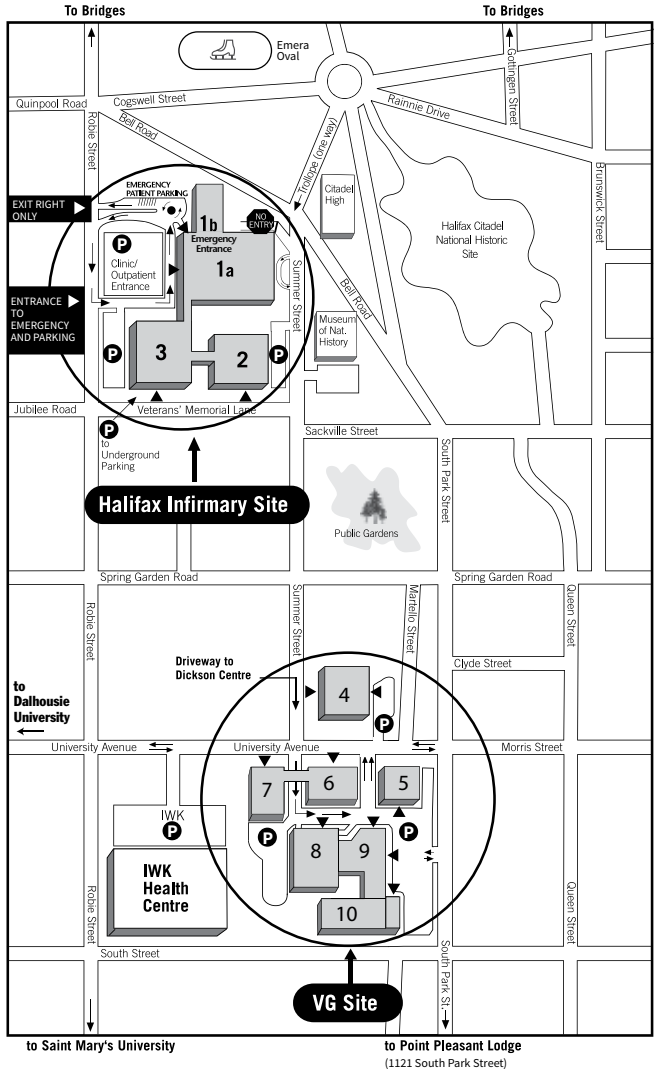
QEII Health Sciences Centre

is made up of 10 buildings located on two sites

- | Halifax Infirmary Site | |
|------------------------|---------------------------------------|
| 1a. | Halifax Infirmary |
| 1b. | Emergency Dept. |
| 2. | Abbie J. Lane Memorial Building |
| 3. | Camp Hill Veterans' Memorial Building |
| VG Site | |
| 4. | Nova Scotia Rehabilitation Centre |
| 5. | Bethune Building |
| 6. | Mackenzie Building Laboratories |
| 7. | Centre for Clinical Research |
| 8. | Dickson Building |
| 9. | Victoria Building |
| 10. | Centennial Building |

- P** Patient Parking
- ▶** Entrance Doors

Please do not wear scented products when you come to the QEII.



Notes:

Looking for more health information?

Find this pamphlet and all our patient resources here: <https://library.nshealth.ca/PatientEducation>
Contact your local public library for books, videos, magazines, and other resources.

For more information, go to <http://library.novascotia.ca>

Connect with a registered nurse in Nova Scotia any time: call 811 or visit <https://811.novascotia.ca>

Learn about other programs and services in your community: call 211 or visit <http://ns.211.ca>

Nova Scotia Health promotes a smoke-free, vape-free, and scent-free environment.

Please do not use perfumed products. Thank you!

www.nshealth.ca

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The information in this pamphlet is to be updated every 3 years or as needed.