



Patient Information sheet

Breast reduction

WHAT IS THE RECOVERY PERIOD?

Stiffness and tiredness are experienced for the first week to 10 days. Most of the swelling is gone by ten days although some bruising may last for around three weeks or so. It is recommended that three weeks be taken off work although some people like to ease themselves back into work with light duties in the third week. It is recommended that aerobic work outs and the like for the energetic be left for around 6 weeks and for weight lifters and body builders upper arm weights for about two months.

WHAT ARE THE COMPLICATIONS?

The operation is not performed on smokers unless they have been smoke free for at least 6 months.

The reason for this is that smoking active or passive causes an intense constriction of blood vessels which in the post operative period is enough to cause major tissue loss and severe complications.

In people who carry excess weight some areas of the retained fatty tissue within the breast may suffer from vascular insufficiency and die off. This can cause a collection and discharge for a couple of weeks or may just become a firm area within the breast that slowly settles down. Rarely these areas may need to be excised.

Scars take about a year to settle fully but are well on the way by 6 months. Scars are hidden beneath the breast fold and around the nipple, the only visible ones are the short scars that extend vertically down from the nipple, and will fade in time along with the others.

There are some patients who as a result of their condition have severely stretched breast skin which does not hold the new shape well enough and an adjustment is made after one year. Further costs are involved but the whole operation does not have to be repeated in its entirety.

BREAST FEEDING

Generally speaking patients are unable to breast feed after this operation although a very small proportion are still able to do so.

It is generally better to delay having the operation until your family is complete.

However breast feeding is often unsuccessful for women with very large breast size and in this case there is no sense in delaying the operation which is done for physical comfort.

In many instances the children of people with over large breasts will need to be bottle fed because of withdrawn nipples and related difficulties.

HOW IS IT DONE?

The volume of the breast is estimated by measurement and an optimum size is determined by discussion and examination. The operation is done under general anaesthetic with the patient in a sitting position to allow accurate tailoring of the breast which is matched to the rest of the body. The breast is remodelled to re-establish the normal nipple height. Amounts ranging from 300grams to 2kgs is the range of tissue removal prior to modelling with 600 grams to 1.5kgs being the average.

The operation takes around 4 hours to perform and is done at Kensington Hospital-Whangarei usually with just an overnight stay.

YOUR RESPONSIBILITIES

- To reveal all medications, conditions, history, allergies and recreational drug use.
- To understand all aspects of the information discussed at consultation and all written information given and to seek clarification if needed.
- To understand that you are entering a process where your surgeon is dedicated to the best possible outcome. This requires engaging in the complexities of biology, healing and individual differences.
- That additional stages or further surgeries are occasionally required and that the surgeons best efforts are the basis of the charges. Further surgeries will incur additional charges in pursuit of a particular result.
- To understand that the initial consultation is charged for but all subsequent pre operative consultations pertaining to this surgery are at no charge.
- To understand and accept the above conditions.



The skin is measured and marked before operation to establish landmarks in the sitting position

The nipple is transferred on a pedicle of tissue or as a free graft depending on the initial breast size

The breast is shaped after removing a measured amount of tissue established before operation. If there are pre existing differences between the sides then this is allowed for



The breast is then reassembled to give the best projection and shape the skin will allow.

The finished breast points downward slightly to allow for skin stretch after the operation for correct nipple position

