



Patient Information Guide

Breast Augmentation

Breast Augmentation

Topics to be discussed with your Surgeon - Things you need to know

1. SURGICAL CONSULTATION

How the operation is performed:

This is usually performed as a general anaesthetic as a day case procedure i.e. coming in and out of the hospital the same day. On occasion the Surgeon, or you yourself, may feel it is appropriate to keep you overnight.

The site of the Incision:

There are various places where the incision (scar) can be placed. The most common and safest is the inferior mammary fold or IMF. This is where the wire from the underwired bra sits. Alternative incisions are the peri-areolar (around the nipple) or axillary (armpit). The size of the scar will range from approximately 5-6cm depending on the increasing size of implant.

The types of Stitches/Sutures:

All sutures are placed below the skin and are dissolved by the body over the course of a few weeks. Nothing needs to be pulled out/removed. Often surgeons will seal the wound with tissue glue, to limit the risk of superficial wound infection from the normal bugs we have on our skin. This glue peels off over 1-2 weeks.

Shapes of implants:

There are two shapes available, round and anatomical (tear drop). Both come in a range of increasing sizes of base diameters i.e. how broad an implant is.

Profiles of implants:

For each base of an implant there are 4 different profiles. These are low, medium, high and extra high profile. This is simply a term used to describe the edge or "take off" of the implant. Low profile being a softer subtler edge (a more "Natural look") to the other opposite end of the spectrum where an extra high profile has a steeper edge to the implant resulting in lots of cleavage ("False look")

Breast Augmentation

Continued

Volume of implant versus cup size:

You choose a volume of implant with your Surgeon. You do not choose a cup size. The reason for this is that there is no standard cup size and if you went shopping you would find a wide range of bra shapes, cuts, and cup sizes for each classical "Cup".

Asymmetry:

Most women have some form of minor breast asymmetry. One side may differ from the other in volume, position of the nipple or shape of the chest wall. This is entirely normal. Your surgeon will try to adjust this as best he/she can during the procedure, but if minor differences still remain after the operation we accept that it is within normal limits.

Where the implant is positioned:

There are two basic areas where implants are placed, above or below the Pectoralis major muscle. Where they are placed depends on your preference, your anatomy and what the surgeon feels is best for you.

A brief summary of the two sites is summarized below.

	Sub-mamary ("Overs")	Sub-muscular ("Unders")
Positives	Less pain Quicker recovery No drains Day-case surgery More predictable control of shape, cleavage and upper pole.	Good for the very thin/little to no breast tissue
Positives	Implant visibility (size dependent) Rippling (depends on volume and cohesiveness gel of implant, and breast volume)	More painful Longer recovery Widens gap between breast Overnight stay/Drain? Movement
Changes over time	Ptosis (drooping) of breast tissue) with aging	Ptosis (drooping) of breast tissue) with aging Implant rotation Double bubble effect.

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Breast Augmentation

Continued

Potential risks of the operation:

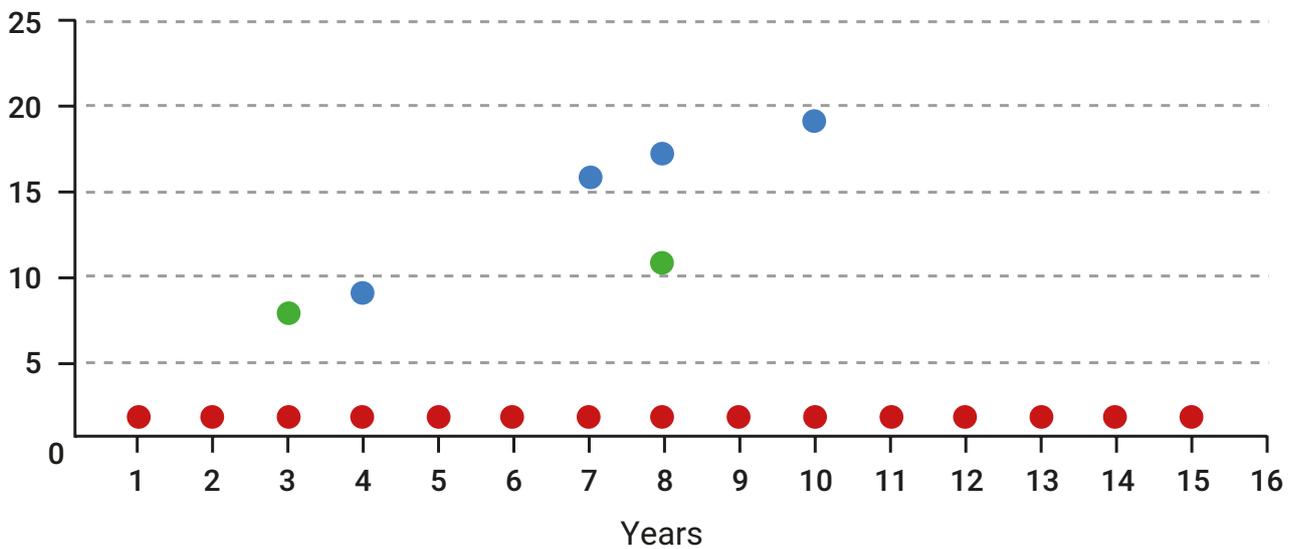
- 1) **Bleeding** – this occurs in less than 1% of patients. If it occurs the breast will swell significantly, be 2-3times bigger than the other side and be painful. Unfortunately we need to see you and take you back to theatre, remove the implant, search for the vessel that is bleeding/has bled, cauterize it and replace the implant.
- 2) **Infection** –this occurs in less than 1% of patients. What usually happens is that you make an uneventful post-operative recovery and some time later you get sick with a high temperature, fever and the rigors (shakes). This means that there are bacteria “bugs” in the blood stream and they can settle around an implant and create an infected swelling around the implant. Unfortunately, this means the implant needs to be removed. It needs to stay out for 3-4months until the swelling and infection clears from your breast tissue before we can safely go back and replace the implant.
- 3) **Alteration in sensation**- it is not uncommon to have altered sensation over the lower half of the breast, specifically the nipple. The nipple may be numb or hypersensitive after the operation. It may take some time (months to years) to recover, but occasionally some numbness may be permanent. “Pins and needles” type pains can occur across the breast in the first few months as nerves that are stretched or traumatized by the surgery slowly recover. This will improve over time.
- 4) **Capsular contraction** – this occurs when scar tissue forms around the implant creating distortion of the implant resulting in a shape change to the breast and is associated with pain. This needs a release of the scar tissue and a new implant.

Various brands of implant are available with a wide range of capsular contracture rates. See table below, showing capsular contraction rates as a percentage of patients undergoing primary breast augmentation for various implants over time

Breast Augmentation

Continued

This table will be explained in more detail by your doctor in the consultation.



Implant type:

● Pure ● Mentor ● Allergan Naturelle

- 5) **Breast screening** – if you have implants, breast mammography is possible, but the radiologist needs to be aware and will take the x-ray from a different angle. Having implants does not affect the pick up rate of breast cancer.
- 6) **Revision surgery over time** – this may occur due to capsular contraction (as mentioned above), weight changes (increase or weight loss), post-pregnancy or breast feeding involution, natural changes with thinning of the tissues that occurs with ageing. Further surgery may include removing/replacing the implant or a Mastopexy, called an uplift procedure.

Breast Augmentation

Continued

Post-operative dressings/support:

You will wake up in 3 supportive garments, a specialized post-operative bra, and two binders all holding the breast up and against your chest. The outer 2 binders come off one a time in 24 and 48hours respectively. The specialized bra you wear day and night for 6 weeks. A nursing appointment will be made for 1 week after your surgery, and a follow up appointment with your surgeon in approximately 3-6months.

How will the breasts feel after the Operation?

The breasts will be supported in the bra they will be swollen, firm, lumpy. You may feel crackles across the chest (air) or hear sloshing (fluid), both are entirely normal. Your body will naturally absorb this air or fluid in the first few post operative weeks. The breasts start to soften around 6 weeks, and by 3months the swelling should have gone leaving you with your new shape.

What about pain relief and antibiotics:

You will not be allowed home until you are comfortable and pain free. We send you home with three different types of painkillers and a course of oral antibiotics.

Pre-assessment:

You may require an assessment with the nursing team approximately 1-2 weeks before surgery. This may on occasion be done telephonically, and during this period you will have an opportunity to discuss any aspect of your surgery at that time.

2. PREPARATION BEFORE SURGERY

It is advised that you undertake all of the household duties prior to your admission to hospital, as you will not be able to perform these for a while afterwards. This includes vacuuming, dusting, and clothes washing, ironing and shopping i.e. no pushing, pulling, lifting

DO NOT take any Aspirin or medication containing Aspirin for at least 7 days prior to surgery. (Aspirin may be re commenced after 48hrs post op.) If you take Aspirin or any other form of blood thinning medication for a medical condition, please discuss with your surgeon.

I prefer if you do not take Arnica during the period prior to surgery. If you do want to take it please start it at least 24hours post surgery.

Breast Augmentation

Continued

Food and drink

NO FOOD IS ALLOWED 6 HOURS PRIOR TO ANY SURGERY, THIS INCLUDES ANY SWEET/CHEWING GUM. YOU MAY HAVE SMALL SIPS OF CLEAR FLUID (STILL WATER/BLACK TEA/BLACK COFFEE) UP TO 2 HOURS PRIOR TO ADMISSION TO HOSPITAL

3. WHAT HAPPENS ON THE DAY OF THE OPERATION

On arrival you will have routine observations performed and a check of all the relevant paperwork carried out by the nursing staff. Then you will be asked to change into a gown. All your jewellery must be removed, including ALL metal body piercings. It is recommended that you do not bring anything of value into hospital. All makeup must be removed as it can damage your eyes if left on while you are asleep. You must also remove all nail varnish and acrylic nails.

What will happen when I wake up?

You will find yourself sitting upright, supported with pillows. It is important that you remain in this position to help reduce the swelling unless indicated otherwise. **Do not try to move yourself up the bed using your arms/ pushing in the hands, as this action moves the muscle on your chest and could potentially move the implants or cause bleeding.** You should use your stomach muscles and bottom to move up the bed. Do not allow anyone to assist you up the bed by lifting you up from under the armpits.

You will be allowed out of bed to pass urine (water) with the assistance of the nursing staff the first time, in case you feel lightheaded. A surgical bra, stabiliser band and binder will be in place. The implants on your chest may feel heavy and your breast skin tight, more so when you take a deep breathe in.

Because you are lying / sitting on your bottom for quite a while, it is quite common for the small of your back to be uncomfortable. It helps if you move slightly from one buttock to the other to relieve the pressure.

4. AFTER YOUR OPERATION

Travelling – home and afterwards

When you travel home you may want to put some padding or a small towel under the car seat belt, as it could rub and be uncomfortable across your breasts. It is recommended that you do not drive for 14 days following surgery.

Follow up care

You will need to return to the medical centre after one week. This appointment will be made at the time of your pre-assessment. You may be asked to remove your binder after 48-72 hours. To remove your binder,

Breast Augmentation

Continued

rest back in a chair or bed so you are semi reclined; undo the Velcro fastening slowly and take a few deep breaths before continuing. It is not unusual to feel slightly light headed when you do this. Lie quietly for a few minutes and the feeling will pass.

At Home

It is important that you have total rest. This means do nothing that will raise your blood pressure, including physical activities, sexual activities and housework during the first 2 weeks. This could induce a bleed, and add to the swelling. You can potter about and undertake activities that do not involve pulling, pushing and lifting. For 2 weeks avoid anything that involves raising your elbows above shoulder level, including washing your hair, in first week. (Ask someone to help you)

5. AFTER THE FIRST TWO WEEKS

Start returning to your normal activities of living. Be sensitive to your body and try not to do too much too soon. Therefore, if you experience any pain, stop and try again another day. You can drive and start lifting light objects.

Gym activities, aerobics or sports that involve using your arms should be avoided for six weeks.

You may start lower leg exercise after 4 weeks. You can start lifting your elbows above your shoulders, washing your hair, getting the washing off the line, etc.

Massage/moisturise; Treat the whole breast, including scar. Use the palm of your hand in a gentle circular movement, using a moisturising cream for dry skin, e.g. E45. This helps to soften your skin, adjacent tissue, and adjust to its new contour. Experience how your breasts feel before letting anyone else touch them. Capsular formation (not to be confused with complication 'capsular contracture') occurs during the natural healing process, the body forms a capsule around the implant. This helps to keep the implant in place and will maintain the shape of your breast.

6. GENERAL INFO /FAQ'S

Am I at risk of infection:

Infection is very uncommon. If you feel unwell, hot, or your breasts appear red, with sensations of burning or there is any discharge, **DO NOT HESITATE TO CONTACT US.**

Breast Augmentation

Continued

What type of Bra should I wear?

Wear your supportive bra for 24 hours a day during the first week, for the next 5 weeks it may be removed for showering only. It is important that you do not wear any bras with wire, as they rub on the scars and push your breasts up, which will delay them from softening and dropping into the natural breast shape.

What is the best position for me to sleep in?

Sleep on your back with one or two extra pillows during the first 2 weeks, as this will help to reduce swelling. If you want to lie on your side after the second week, use a pillow, hugged at the front and one between the knees, this helps to stop you rolling and aids comfort.

Will I be in much pain?

It will be uncomfortable over the first few days; this varies from person to person. Analgesia (painkillers) will be prescribed to take home.

What about my Skin care?

After the first week you can apply moisturising cream, to keep the skin supple, best performed straight after showering, to avoid removing your bra too frequently.

Will my new implants feel heavy?

Over time you will adjust to the weight, and your skin will become soft and supple as you progress through your recovery. (This could take 6-12 weeks)

What about Work / Sport / Leisure?

It is recommended that you take 2 to 3 weeks off work. If you have an active hobby / leisure interest, please ask the surgeon or nurse for advice. It is also advisable to avoid bending forward too much at first.

Can I lift my Children?

If you have young children or babies, please do not lift them from a low level, and avoid knocking your breasts. However you may still maintain your bond with a cuddle, but protect your breasts with a pillow or towel. It is recommended that you get help with care for your children during the first 2 weeks of recovery.

Breast Augmentation

Continued

Should I take special precautions when bathing?

Please keep the wounds dry for the first week. You may take a shallow bath. Keep your bra on and do not have the water too hot, as heat can cause swelling. After your first post-operative check with the nurse at 1 week, you will be advised if you can then shower.

How soon after my procedure can I sun bathe?

Do not sit out in strong sun for the first 2 weeks after surgery. Once fully recovered and the scars are matured you may go topless. (In cold and hot environments you may experience strange sensations in both breasts.)

Should I adjust my diet?

Maintain a healthy nutritious diet with plenty of fruit and vegetables, as this is important for wound healing and bowels.

Will my procedure affect my bowel movements?

As you are inactive and due to use of painkillers, you may become constipated. For your own comfort and wellbeing, prevent this from happening. Purchase an aperient such as Senokot® or what ever has suited you in the past.

Will my procedure affect my ability to breast feed?

Breast implants do not interfere with breastfeeding as the implant pushes forward your existing breast tissue.

How soon after my procedure can I fly?

If possible avoid flying for the first six weeks, wear flight socks and take low dose aspirin before flying