

BREAST REDUCTION / BREAST LIFT (MASTOPEXY)

AFTER CARE INSTRUCTIONS

GENERAL INFORMATION:

A breast reduction or breast lift (Mastopexy) involves repositioning the nipple to a higher position, making the areola or colored part of the nipple smaller, and re-shaping the breast with a removal of varying amount of skin and breast tissue. This can be considered a cosmetic and reconstructive breast procedure to help relieve the effects of heavy, sagging breasts, which can cause neck and back pain, skin rashes, and difficulty fitting into bras.

PREPARING FOR SURGERY

One Week Prior to Surgery:

- Stop all Aspirin, NSAIDs (Motrin™ (Ibuprofen), Alieve™ (Naprosyn), etc.) and Vitamin supplements containing fish oil and Vitamin E, 1 week prior to surgery, as they can all promote bleeding.
- Purchase a sports bra that has a zipper or clasp in the front.
- Have requested study results (labs, mammogram, medical clearance, etc.) forwarded to the office.
- Pick up 4 x 4 gauze, triple anti-biotic ointment (Neosporin™ or generic), Hibiclens™ Skin Cleanser, and paper tape at the pharmacy.

Three Days Prior to Surgery:

- Start Hibiclens™ Skin Cleanser (available at pharmacy) as a body wash for all body and breast cases, especially for breast surgery with breast implants.
- Start Bromelain 3 days ahead of surgery (2 pills 3 times per day on an empty stomach).
- Arnica is provided and should be started after surgery (3 tabs sublingual 3xday).

THE DAY OF SURGERY

- Wear something loose and comfortable that has a zipper in the front.
- Nothing to eat or drink after midnight.
- If you take routine medications, it is appropriate to skip your morning dose of medications. Please discuss taking thyroid medication, cardiac and/or blood pressure medications prior to surgery.
- Bring your prescribed post-surgical medications with you, for use immediately after surgery, if needed.
- Arrive at the surgery center at least one hour prior to the surgery start time.

POST-OP CARE:

Have someone drive you home and stay with you for 1-2 days.

Medications will be called to your preferred pharmacy prior to surgery.

- Take pain medication and muscle relaxers as prescribed. Do not drink alcohol with these medications. Over the counter stool softeners and/or laxatives should be taken with the pain medication to prevent constipation. Colace, Biscodyl, Milk of Magnesia are all available at your pharmacy and can be taken as directed.
- Ibuprofen (Motrin) can be started the day after surgery. **Take one to two tablets every 6 hours for 2 days and then as needed.**

Do not smoke or be around smokers as smoking even second hand smoke delays healing and increase risk of complications.

Get plenty of rest. The general anesthesia, and/or pain medication can all promote insomnia; therefore a sleep aid may be taken if needed.

Follow a well balanced diet to include protein and limit the amount salt intake. Protein supplementation can be started one to two weeks before surgery and should include over 30 grams of additional protein. This should be continued for three weeks after surgery. A high salt diet or meal, can lead to increased swelling and prolonged recovery.

Oral hydration should include the use of electrolyte containing fluids such as Gatorade or a low calorie substitute. Limit the amount of caffeinated beverages as they can promote dehydration; however Dr. Trussler recommends you maintain your daily average of caffeine to avoid headaches.

ACTIVITIES:

Walking is encouraged the day of the operation and can be increased over the first 2 weeks. Cardiovascular exercise can be resumed after 2 weeks with all activities to be resumed at 4 to 6 weeks.

For the first 48 hours keep your arm movements to a minimum. Your arms should not be used to support your body or to lift heavy things, raising your arms to 90 degrees is okay.

Do not lift anything heavier than 20 pounds for 3 weeks.

Do not drive for approximately one week and/or when you are no longer taking oral pain medications.

You may wear a camisole, sport bra but no underwire bra for 4-6 weeks.

INCISION CARE:

You will have clear skin glue dressing on all incisions except for the areola incision that will have black nylon sutures.

- The skin glue will protect the incision for 3 weeks.
- If you have stitches, they will be removed in 7-14 days.

You may shower the day after the operation. Make sure someone is with you at your first shower.

Bra should be removed for showering. Any gauze or tape can be discarded and do not need to be replaced after the first shower.

You may gently begin washing your incisions with mild soap and water but do not submerge the incisions for at least one month.

On the day after surgery (if the clear tape is non-adherent), or after your first post-op visit, apply Polysporin (Neosporin™) ointment to the incision around the areola. This can be done 2 times per day for 2 days only. Apply just enough to keep crusts from forming on the stitches and to keep the area from feeling tight. Do this for 2 days only as it can cause skin irritation.

Scar Care with SkinCeuticals® Body Firming Cream, SkinMedica® Scar Recovery Gel or Silicone (NewGel®) Sheets are available in our office. Topical scar care and scar massage will be initiated at the 3 to 4 week point depending on healing.

WHAT TO EXPECT AFTER:

It is common to have discomfort at the outside of the breast and mild burning around the areola incision after breast surgery – this is normal, and will improve shortly after surgery.

Discomfort at the outer area of the breast may worsen with increased activity and relates to internal sutures that Dr. Trussler places to shape this area of the breast.

You can expect some slight oozing (bloody) from the stitch lines and swelling of the incisions. Gauze can be reapplied if it is bothersome. However, you should call the office at 512.450.1077 if you have a continuous bleeding, significantly more swelling on one side than the other, or any severe pain and associated swelling.

Tightness of the breasts is a normal feeling after surgery. This may worsen over the first 2 days. This will relax with time.

There may be a feeling of numbness of the breasts that will subside with time.

Red discoloration of the incisions may occur if there is significant swelling, especially in the areas of permanent black sutures. This will resolve when the glue falls off and the stitches are removed.

Constipation is common after any operation, and is secondary to the anesthetic, pain medication and dehydration. Please stay well hydrated and pick-up a stool softener and/or laxative with your prescription medications.

Recommendations include:

- Docusate (Colace™) 100mg orally twice daily when taking pain medication
- Milk of Magnesia 30cc/1 tbsp. twice daily when taking pain medication
- Prune juice or Sorbitol orally
- Biscodyl or Magnesium Citrate as needed for constipation

WHEN TO CALL THE OFFICE:

- If you have increased swelling and bruising of one breast significantly more than the other: remove the bra to make this determination if it is concerning as this may represent a breast hematoma (collection of blood).
- If you have increasing redness or swelling around the incision.

- If you have severe pain not relieved by pain medication.
- If you have any side effects from medication: rash, nausea, headache, vomiting.
- If you have fever over 101.
- If you have yellow or greenish drainage from incision or notice a foul odor.
- If you notice some vaginal burning and itching as a result of the antibiotics used during and after surgery.

For medical questions, please call the office at 512.450.1077. Dr. Trussler should be paged/called on his cell phone for any urgent or emergent medical issues.

FOLLOW-UP CARE:

It is important to be seen by Dr. Trussler within 1 week after your surgery and follow-up appointments for suture removal and scar care at 2 to 3 weeks.

Dr. Trussler would like to see you at 1 month, 3 months, 6 months, and 1 year after your operation.