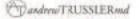
MALE GYNECOMASTIA

AFTER CARE INSTRUCTIONS

GENERAL INFORMATION:

Gynecomastia is the enlargement of breast tissue. It can be applied to both male and female breast tissue. Male gynecomastia is a very common condition which usually affects adolescent males and can be related to multiple different medical problems and medications, but is most commonly associated with an abnormal, but benign hormone balance which can relate to increasing peripheral hormones from adipose (fat) tissue. At the time of birth, the mother's hormones do circulate in the newborn, which commonly causes neonatal breast hypertrophy in males, which resolves over the first months of life. During puberty, there are increased amounts of circulating hormones, which can be affected by the peripheral fat and increase the balance of estrogen in the male, which can stimulate the formation of breast tissue. This breast tissue can be located just under the nipple causing an enlargement of the nipples or it can be more general, with the development of fairly large breasts. The male breast tissue is usually firm and nodular glandular tissue with peripheral fatty tissue. This breast enlargement is a source of social embarrassment and poor self-confidence, which alters the participation in athletics and clothing. The treatment of male gynecomastia, first involves identifying and correcting any reversible causes of the problem, which can involve medication changes, and hormone therapy. In cases where there are no identifiable causes, surgical removal of breast tissue is really the only effective modality of correction in combination with weight loss. Typically an endocrinology evaluation and ratio of the documentation of glandular tissue to fat is needed for identifying whether excision is medically necessary.

Surgical treatment can involve removal of the tissue under the nipple just with simple local anesthesia or chest contouring with liposuction combined with removal of the firm tissue under the nipple to a complete chest reconstruction with repositioning of the nipples. Recovery is variable depending on what is done, though some element of a compressive garment on the chest is recommended for approximately 3 weeks. Patient satisfaction is very high and the treatment of male gynecomastia is very rewarding for not only for the patient, the plastic surgeon as this can dramatically change the life of a young man.



Dr. Trussler will discuss the technique that will give the optimal result in each degree of male gynecomastia. The individualized treatment plan will factor into recovery and any cost incurred with the procedure.

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 tight sport garment for use after surgery.
- 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 chest cases.
- 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

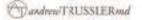
- Wear something loose and comfortable that has a zipper in the front.
- Nothing to eat or drink after midnight.
- If you take routine medications, it is appropriate to skip your morning dose of medications. Please discuss taking thyroid medication, cardiac and/or blood pressure medications prior to 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 weeks.

Wear your chest compression garment or ACE wrap continuously for the first 2 weeks. You may take it off to shower. Make sure someone is with you the first time you remove the compression garment, as some patients feel dizziness/light-headed. The white foam pads can be discarded after your first shower.

Many patients wear the garment for comfort for longer than 2 weeks and it is advisable to wear the garment for at least 12 hours a day during weeks 2 to 4 weeks after the procedure.

You may purchase a full-length Lycra or Spandex compression vest without zippers at a department store or sporting goods store for use after 2 weeks if you don't like the feel of the zippered garment.

You can put the chest vest in the washer and dryer while you are showering and then put it back on in 1-2 hours.

If an ACE wrap is utilized, a second ACE wrap with be provided.

Do not lift anything heavier than 10 pounds for 2 weeks. Limit lifting to under 30 pounds for weeks 2 to 4.

Do not drive for 5 to 7 days and/or when you are no longer taking oral pain medications.

Do not run, lift weights, play tennis or golf for 3-4 weeks after surgery (keep your heart rate under 100 beats over one minute for 3 weeks.

Cardiovascular exercises can be resumed gradually after 2 weeks

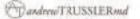
Heavy lifting/stretching (Yoga) can be resumed after 4 weeks.

MASSAGE THERAPY:

Massage therapy can be beneficial following gynecomastia surgery beginning in the first week after the procedure.

Suggested therapy is 2-3 times per week for 3-4 weeks. This allows for enhanced lymph drainage and for enhanced resolution of the swelling associated with liposuction.

We also recommend circular massages with a light fragrance free moisturizer and external ultrasound heat therapy as needed.



INCISION CARE:

Minimal drainage is to be expected from the incisions.

The incisions for liposuction are small (less than 1cm) and usually placed in inconspicuous areas.

Dr. Trussler does close the liposuction incisions with stitches under the skin and one simple absorbable stitch in the skin. The incision is then covered with a butterfly bandage or band-aid.

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

The liposuction garment or ACE can be removed for showering. Any white pads, gauze and tape can be discarded and do not need to be replaced after first shower.

You may gently begin washing your incisions with mild soap and water but do not submerge the incisions for at least 2 weeks.

If you have persistent sutures they will be removed in 7-14 days.

If you undergo an excisional procedure (Upper Body Lift) as part of your gynecomastia surgery, you will have clear skin glue dressing on all incisions except for the areola incision, which will have black nylon sutures and will be covered with a clear dressing that will be removed in your first post-op visit.

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

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

The ACE or vest can be removed before showering. Any gauze and 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.

Lymphatic Massage to the surgical sites will help increase circulation and alleviate the hardness felt underneath the skin.

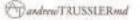
Scar Care with SkinCeuticals[®] Body Firming Cream, SkinMedica[®] Scar Recovery Gel or Silicone (NewGel[®]) Sheets are available in our office. Topical scar care and scar massage will be initiated at the 3 to 4 week point depending on healing.

WHAT TO EXPECT AFTER:

Moderate swelling in the areas is expected; this will subside in 6 to 12 weeks.

Bruising and swelling may spread to surrounding areas and regions of dependence, like knees, waist and genitals.

It is common to have discomfort and mild burning around the incisions after surgery – this is normal, and will improve shortly after surgery.



Discomfort in the areas may worsen with increased activity. As well, deep muscle tightness may worsen. Massage, anti-inflammatory, and continued activity will all help this subside.

You can expect some slight oozing (bloody) from 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 underlying muscles is a normal feeling after this surgery. This may worsen over the first 2 days. This will relax with time and can be relieved with light activity, keeping compression on the area and utilizing medication for muscle spasms (Xanax and/or Motrin).

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

Red discoloration of the incisions may occur if there is significant swelling, especially in the areas of sutures. This will resolve when the stitches dissolve or 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

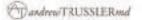
WHEN TO CALL THE OFFICE:

- If you have increased swelling and bruising of one side of the body significantly more than the other. Remove the garment to make this determination if it is concerning, as this may represent a hematoma (collection of blood) or a seroma (collection of clear fluid).
- If you have increasing redness or swelling around the incision.
- If you have sever pain not relived 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.

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.