



PLASTIC &
RECONSTRUCTIVE
SURGEON

Dr. Johan van Heerden

MBChB, MMED, FC Plast Surg (SA)

Pr Nr: 036 0000 386 502

Pretoria East Hospital

Suite M12

c/o Garsfontein Drive & Netcare Street

Moreletapark

0044

INFORMATION LEAFLET BREAST REDUCTION

ADVANTAGES:

- Surgical reduction of breast volume.
- Repositioning of the nipple and areola.
- Reduced breast volume and therefore the reduction of the breast size.
- Reducing neck- & back ache, if big breast are the cause.

DISADVANTAGES:

- Circular scar around the areola, vertical scar in the middle of the breast under the areola, and a horizontal scar in the fold under the breast.
- Pain and discomfort for the first few days after the operation.
- To prevent "dog ears" it may be necessary to lengthen the incision underneath the breast to get rid of the excess skin and fat.

RISKS AND POSSIBLE COMPLICATIONS:

- Hematoma (blood collection that needs to be drained in theatre, which will mean additional theatre costs).
- Seroma (fluid collection that needs to be drained in the rooms).
- Sensation loss of the nipple (normally sensation returns within 12 months).
- Skin necrosis and wound breakdown at the suture lines and of the nipple and areola.
- Nipple numbness.
- Hypertrophic scars.
- Infection (rare).
- Nodularity due to calcification and fat necrosis.
- Breastfeeding will not be possible.
- Minor asymmetry: no woman's breasts are perfectly symmetric before the operation, though we aim to get a symmetrical result, it can't be guaranteed 100%.

ADDITIONAL INFORMATION:

- You have to be fasting for 8 hours before the procedure.
- Wash the body with Hibiscrub Soap twice in the 24 hours before surgery.
- You should not be smoking cigarettes for 4 weeks before and for 4 weeks after the operation.
- You should stop taking vitamin pills, herbs and any non-prescribed drugs 2 weeks before and 2 weeks after the procedure to prevent excessive bleeding.
- You have to arrive 2 hours before the procedure at admissions.
- The excised breast tissue will be sent for histological examination to exclude the presence of malignancy and therefore additional costs will be involved.
- The suture material used is absorbable. It is only necessary to follow-up after 10 – 14 days for the removal of a few external suture knots.

POST-OPERATIVE CARE:

- Please complete the course of antibiotics.
- Empty the drains daily on exactly the same time in a disposable container. Measure the volume in each drain by using the 20 ml syringe, received on discharge. Contact the rooms, when the volume is < 25 ml/24 hours in each drain and make an appointment for the drains to be removed.
- Do not remove the dressings.
- Do not wear tight clothing.
- A soft sport-type bra will be given to you after 2 weeks, once all the wounds have healed.
- If wound care is necessary this will be arranged with the follow-up appointments.
- Do not apply "tissue-oil" or "Bio-oil" on the scars before all the raw areas have healed completely and the scabs has fallen off. Scarscience or Kelocote may be applied as directed, once wound healing is complete, in a massaging fashion on the scar lines.
- Wash the suture line with Hibiscrub soap and keep suture lines dry, until scabs have fallen off.
- Wound healing and the final result of the scars can only be judged after 12 – 18 months.
- The shape of the breast will change over the following 12 months from a pyramidal to a teardrop shape.
- The nipple height may also drop in the following years and with aging. This may need future adjustment with secondary surgery.
- If your body mass increase, the breast volume may also increase due to increased fat content.
- Please follow-up with removal of the drains, after 2 weeks, 6 weeks and 1 year.