After Breast Augmentation, Reduction or Mastopexy Surgeries

For patients preparing to recover after breast surgery for:

☐ Breast augmentation
☐ Breast reduction
☐ Mastopexy (lift)

Read this pamphlet to know about:

• What you need to know when you leave the hospital
• What symptoms to watch for
• Who to call if you have questions
What is breast augmentation?
Breast augmentation is a procedure where a breast implant is placed underneath the breast tissue. The most common breast implant is made out of a silicone cohesive gel.

What is breast reduction?
Breast reduction is a procedure where breast tissue is removed to decrease the size of the breasts.

What is breast mastopexy (lift)?
Breast mastopexy (lift) is a procedure where breast tissue is raised and some breast skin is removed to reshape the breast.

What can you eat and drink after surgery?
- You can go back to eating and drinking what you normally would right away.
- If you feel nauseated (sick to your stomach), you can buy anti-nausea medicine at the pharmacy.
- Take anti-nausea medicine as directed and continue drinking fluids until the nausea passes. Then gradually return to your normal diet.

How do I manage my pain?
Your health care team will give you a prescription for pain medicine before you leave the hospital. Please take it as directed.

As the pain gets better, you can stop taking the prescribed pain medicine and start taking acetaminophen (Tylenol Extra Strength) as directed on the bottle.
Some pain medicine can make you constipated. If you do not have a bowel movement (poo) for 3 days, ask your pharmacist about taking stool softeners or laxatives. You don’t need a prescription.

To prevent constipation:

• Drink 3 to 5 glasses of water every day.

• Eat foods that are high in fibre, such as whole grains, bran, fruits and vegetables.

**How much activity is safe?**

Go home and rest today. You can do light activities 24 hours after your surgery, such as getting dressed or taking a walk. It is important that you move your fingers and arms as you would normally.

For the first 2 weeks after surgery:

• only move your arms as high as your shoulders.

  Ask your health care team for the “Functional Rehab after Breast Reconstruction” pamphlet for more information.

For the first 4 to 6 weeks after surgery:

• do NOT lift anything more than 10 pounds (5 kilograms), such as groceries, young children or small pets

• avoid strenuous activities such as aerobics, jogging, swimming or weight lifting

• no heavy pushing or pulling

Your surgeon will tell you when you can go back to work and sports.
When can I shower or bathe?

• You can shower 48 hours or 2 days after your surgery.
• After you shower, pat the area dry with a clean towel.
• Do not take a baths or swim for at least 4 weeks and until the wounds have healed.

How do I take care of my dressing (bandage) and wound?

Patients may leave the hospital with either a clear dressing (bandage) or a gauze dressing over their wound.

If you have a clear dressing over your wound, keep it on until your follow-up appointment. You do not need to change your dressing.

If you have a gauze dressing over your wound, you can remove it 48 hours or 2 days after your surgery.

• Leave your steri-strips on your incisions. Do not remove them. The steri-strips will stay on until your follow-up appointment. They may start peeling and falling off on their own. This is OK. All your stitches will dissolve.
• Don’t put any oils or lotions on your incisions for at least 3 weeks to prevent infection. Speak to your surgeon at your follow-up appointment about when to start self-massage on your scars.

Wearing a bra

• If your surgeon asked you to wear a bra after your surgery, wear it during the daytime until your follow-up appointment. You can remove it at night when sleeping.
• Wear only soft, clean bras with no underwire or pads for support.
What about my drains?

Some patients leave the hospital with a Jackson Pratt (JP) drain that helps remove extra fluid from the body.

Your health care team will work with the Local Health Integration Network (LHIN) to send a nurse to help you at home.

• We will show you how to take care of your drain before you leave the hospital. Your surgeon will let the nurse know when to remove your drain.

• Keep the wounds clean and dry at all times.

How to take care of the drain

• Empty the drain at least 2 times a day (in the morning and evening), or more often if needed.

• Remove the fluid from the tube attached to the JP drain every 4 hours when you’re awake. This prevents the tube from getting blocked. We will show you how to “milk” or “strip” the tube in the hospital.

• Wash your hands before and after milking or striping and emptying the drain.

Important: Record the date, time and amount of fluid you remove from the drain every 24 hours. Keeping an exact record of the fluid helps us to remove the drains safely.
What problems should I watch for?

Call your surgeon, your family doctor or go to the nearest hospital emergency department if you notice:

• Abnormal bleeding:
  ▪ A lot of bleeding from the wound (which soaks the pads or dressings)
  ▪ One breast becoming larger, firmer, and more tender than the other

• Signs of infection:
  ▪ Redness, pain and swelling of the breast that is getting worse
  ▪ A fever of 38 degrees Celsius or higher that lasts longer than 24 hours
  ▪ Yellowish fluid coming from the incision that smells bad

• Severe pain or nausea:
  ▪ Severe pain that does not get better after taking pain medicine
  ▪ Nausea or vomiting that does not get better after taking anti-nausea medicine such as Gravol

When is my follow-up appointment?

Call your surgeon’s office to schedule a follow-up appointment 2 weeks from your surgery date.

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