

Breast Reduction (Reduction Mammoplasty)

Technically known as reduction mammoplasty, breast reduction surgery removes fat, glandular tissue and skin from the breasts, leaving them smaller, lighter, lifted and firmer.

About breast reduction

Having large, heavy breasts makes many women uncomfortable both physically and psychologically. The excess weight of large breasts may cause back and neck pain, skin irritation, skeletal deformities, even breathing difficulties. Many teenaged girls and women are also extremely self-conscious about the size of their breasts.

For women with these problems, breast reduction surgery can bring significant relief. Indeed, it is one of the most successful and immediately satisfying of aesthetic procedures because it allows patients to enjoy a more active life and greater self-esteem.

The breast reduction procedure removes fat, glandular tissue and skin to create smaller, better shaped lifted breasts. It can also reduce the size of the areola, the darker skin surrounding the nipple. The goal is attractive breasts that are in proportion to the rest of your body.

Your consultation

During your consultation, your surgeon will take a medical history and ask for details of any breast surgery you may have had. He will examine you and show you what you can expect post-operatively by defining the area of breast to be removed and the new position of the nipple.

Your surgeon will also explain the procedure itself and ask you about the results you hope to achieve. When neck and shoulder pain are significant preoperative complaints, women may wish for their breasts to be made "as small as possible". Most young women prefer that their breasts, while smaller, remain somewhat larger than average after surgery.

In addition, your surgeon discuss several factors you may wish to consider:

- He will explain that it is normal for breasts to be asymmetric that, while he will strive to make your breasts as symmetric as possible they will never be truly identical.
- He will discuss the fact that scarring will take place and that, whereas scars will eventually return to skin colour, they will remain visible.
- He will alert you to the fact that, after breast reduction surgery, breast-feeding is unpredictable. If this is of concern, you may wish to delay your procedure.

Your operation: what to expect

Breast reduction surgery is carried out under general anaesthesia and requires one or two nights' stay in hospital. The procedure takes approximately two hours.

- Having marked the incision site pre-operatively, the surgeon removes the excess skin and glandular tissue from the breast, leaving the nipple on a stalk. The nipple is then repositioned in a lifted position.
- The suture line is anchor-shaped and extends around the nipple in its new position, downwards to the under-breast crease and then outward toward the underarm area. In some cases, depending on the amount of tissue removed, it may be possible to leave a single vertical scar.



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- Dissolvable sutures, which will not have to be removed, are used. Dressings are then applied and you will receive intravenous fluids for several hours.

Drainage tubes, inserted at the end of the operation to remove fluid or blood post-operatively, are removed once any oozing has stopped. This relatively painless procedure usually takes place on the first day after your surgery. New dressings may then be applied and you will be allowed to go home.

Because blood clotting can sometimes be a problem with this procedure you will usually be asked to wear anti-embolism stockings (TEDs) as a precautionary measure. These should not be removed until you are advised to do so. You will also be expected to get out of bed and move around as soon as possible.

After your surgery

Immediately after surgery your new breast size will be apparent, but you should understand that the final shape of your breasts will take around six months to emerge.

During your recovery period there are several things you should expect:

- Following surgery your breasts will probably be uncomfortable, possibly painful. This is easily relieved, initially by injection and thereafter by taking two mild pain killing tablets such as Paracetamol or Co-dydramol as required. Aspirin must be avoided because it can promote bleeding.
- Your dressings should be kept clean and dry for one to two weeks after surgery to allow healing to occur. A comfortable, well-fitted bra is also necessary for the first six weeks.
- Bruising of the skin of your new breasts may occur and swelling of the breast tissue may cause them to appear larger than anticipated. However, this should improve markedly in two or three weeks and settle in two to three months. To help decrease swelling and bruising, you will be advised to take Arnica for one week prior to surgery and two weeks afterwards.
- You should expect to feel tired for up to two weeks after your surgery. You may drive after the first week but do not return to vigorous exercise for at least three to four weeks.
- Because you may need to continue to need dressings if healing is delayed it is best not to make any travel plans for a month or so.
- Delayed healing is more likely if you smoke tobacco or drink excess alcohol after surgery. The former, it uses the blood supply in the skin and the latter increases the risk of bruising and bleeding.
- Your scars may initially be hard, red, raised and lumpy and can take up to eighteen months to become pale and flat. This will depend on your individual healing qualities. Firm pressure on your scars from a well fitting bra will help if this is a problem.
- Numbness of the nipples and the surrounding skin is not uncommon in the early stages although many patients experience the return of sensation very quickly. The nipples are preserved on a stalk of breast tissue during your procedure and in the vast majority of cases they remain natural with normal contraction and relatively good sensitivity.

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- Very rarely the stalk of breast tissue will have inadequate blood vessels and part or even all of the nipple may die. This complication means that dressings over the nipple area may be required until natural healing occurs. After that it is possible to reconstruct the nipple in a secondary procedure should that be required.
- During your surgery your surgeon will take meticulous care to stop any bleeding points. Occasionally, however, a blood vessel will leak after the operation. If a significant collection of blood (haematoma) occurs it may be necessary to return to theatre. If a haematoma is minor, natural reabsorption will occur.
- As in any surgery, there is a possibility of infection, but this is readily treated with antibiotics and/or dressings as required.
- In some patients there is some minor loss of wound adhesion. This temporary complication results in a small scab which separates after a few weeks.

Our services

From your first visit to Aesthetic Plastic Surgery's handsome Harley Street offices, you'll work directly with Consultant Plastic, Aesthetic and Reconstructive Surgeon Mr. Lucian Ion, the practice's director.

Together, you'll explore the possibilities and discuss the results you can expect.

Imaging software will be used to show you how you might look after your procedure and every aspect of your treatment, from evaluation through surgery to post surgical care, will be carefully explained.

More Information

Naturally, there will be many questions you will want to ask before making any decisions about undergoing surgery. Also you will wish to meet your Surgeon - having trust and confidence in one's Surgeon is very important.

Surgery is unique to every patient and a detailed discussion and assessment between you and your Consulting Surgeon is essential in enabling you to make a decision based on correct personal information and advice.

Arranging a medical consultation does not obligate you to anything other than attending the appointment. There is no obligation to proceed with treatment. This is entirely a matter for your decision, after the surgeon has decided on the feasibility and accepted you as suitable.

If you would like to know more information we will be happy to answer any queries either by email, letter or telephone, so please do not hesitate to get in touch.

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