

## BREAST RECONSTRUCTION

### WHAT IS BREAST RECONSTRUCTION?

Breast reconstruction surgery is performed to reform or reshape one or both breasts following a mastectomy (removal of the entire breast) or a lumpectomy (the removal of a part of the breast that contains a tumour.)

The two main techniques used in breast reconstruction are implant reconstruction and autologous (skin flap) surgery that uses tissue from another part of the body.

Some reconstructions use a combination of both techniques for best results. Today, most traditional mastectomies are skin sparing, a procedure in which the surgeon removes all breast tissue and glands but preserves the skin, which can result in a more natural-looking reconstruction and less scarring.

A breast reconstruction can be done as soon as the mastectomy is performed, or it can be delayed until after the mastectomy has healed and other cancer treatments are completed.

### WHAT CAN YOU EXPECT?

After the surgery, you will initially have some numbness but this may recover over time, and although your scars will never completely disappear, they will fade. As you recover, you can look forward to feeling better about your appearance and this can make a big difference to your recovery.

Remember that while good results are common, it is not always possible to get a perfect outcome with the first reconstructive procedure, and you may need additional procedures.

## SOME FREQUENTLY ASKED QUESTIONS ABOUT BREAST RECONSTRUCTION

### How do I plan for my Breast Reconstruction?

Before you make the decision to have a breast reconstruction your surgeon will discuss all the options and recommend the best procedure, as well as when to have it, and whether you should have the procedure on both breasts in order to achieve symmetry.

Some other factors to consider are your body type, the type of cancer and the other cancer treatments you may have had, your general health and how soon you expect to recover.

### What anaesthetic will be used for my Breast Reconstruction?

Breast reconstruction surgery is usually performed under general anaesthetic, depending on the complexity of the procedure. Your surgeon may prefer a specific method, and will discuss all options with you.

### What is the procedure for a Breast Reconstruction?

The two main breast reconstruction techniques are implant reconstruction and skin flap surgery.

In an implant reconstruction, the surgeon inserts a tissue expander under the skin or muscle, which gradually stretches the remaining tissue.

After this has healed, the surgeon injects saline or salt water into the expander over several weeks until the breast is the size you're happy with, and then replaces the expanders with a silicone or saline implant. In some cases, the tissue expander may not be necessary and a surgeon will insert the implant at the time of the mastectomy. In skin flap surgery, the surgeon will rebuild the breast by transferring tissue from the abdomen or other parts of the body.

The two skin flap surgery techniques are free flap surgery, in which the surgeon will completely remove the tissue and the blood vessels and transfer them to the breast, and pedicle flap surgery, where the tissue being transferred stays attached to the body, and is rotated onto the chest.

### How should I prepare for a Breast Reconstruction?

Before your surgery you may be asked to stop smoking for 2 – 4 weeks prior to the procedure. Nicotine retards the healing process, and quitting for as long as possible before surgery helps improve blood flow.

You will also have to have a blood test before surgery is performed.

You should stop taking certain medication, like aspirin and some anti-inflammatory drugs. Avoid recreational drugs, and disclose to your surgeon any other medication you're taking, since you may need to adjust these.

Be sure to arrange for transport to and from the clinic, since you will not be able to drive yourself after the procedure.

### Where will my Breast Reconstruction be performed?

The surgery will be performed in one of our fully equipped operating theatres.

### How do I recover from my Breast Reconstruction?

Your recovery time after breast reconstruction will depend on the type of reconstruction you have, but in most cases, patients are unable to perform many daily activities for 6 to 8 weeks. There will be some restrictions on your movement, such as lifting your arms above your head. In order to recover well, you should avoid any vigorous activity or exercise, and take care not to put any excessive force or pressure on the incision area.

### What can I expect after my Breast Reconstruction?

After a breast reconstruction surgery, you will have gauze or bandages over the incision areas. You should wear an elastic bandage or support bra to help reduce the swelling and support the area. There may also be a small drainage tube under the skin.

You may feel some pain and discomfort but this will be relieved with the help of prescribed pain medication. You may also experience fatigue and bruising. Apart from soreness in the breasts, if you have had skin flap surgery, you may experience some abdominal pain, or pain at the site from which the tissue was removed.

Your surgeon will advise you on how to look after yourself while healing, how to take medications following surgery, and what to look out for at the surgical site and in your general health.

### When can I return to normal activities?

The time period differs from patient to patient, but you will probably be able to return to work a few days after the surgery, and you should be able to resume your regular activities within about 2 weeks.

### What are the risks involved in Breast Reconstruction?

As with any major surgery, there are some risks, which include bleeding, infection, as well as the general risks associated with anaesthesia. Extreme fatigue is often an adverse effect of breast reconstruction.

Other complications and risks may include fluid buildup in the breast or at the donor site (after skin flap surgery) and slow wound healing. After a skin flap reconstruction, there may be tissue death (necrosis) or a loss of muscle strength at the donor site. With implant surgery there is a risk of implants moving or rupturing, and they may need to be removed. There can be changes in breast or nipple sensation, and asymmetry. In some cases, further surgery may be necessary after the first reconstruction.

## QUESTIONS OR CONCERNS?

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