

Breast Reduction

General

- Breast reduction surgery is intended to reduce the volume and weight of a patient's breasts by removing breast tissue.
- The majority of patients seek breast reduction due to symptoms such as neck pain, back pain, shoulder pain, or rashes underneath the breasts. Other patients seek out breast reduction for purely cosmetic concerns.
- The procedure is very common, and the information below is meant to help you along in the process.

Before Surgery

If you are looking into breast reduction to help alleviate symptoms, your insurance company may cover the procedure.

Every insurance company has their own criteria that need to be met in order to cover the procedure.

One goal of your initial consultation is to make sure breast reduction surgery is the right procedure to address your concerns. In addition to this, we use this appointment to gather information about you that your insurance company will look for in order to cover the cost of the procedure. Finally, and most importantly, we are looking to see if it would be **safe** to proceed with surgery.

History

These are health questions we ask our patients, it is helpful for you to come prepared with answers to these questions:

- What symptoms have you been having?
 - Breast pain?
 - Back pain?
 - Shoulder pain?
 - Rashes under the breasts?
- How long have you had these symptoms?

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2 Medical Center Dr. #206
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Aparajit Naram, MD
Plastic and Reconstructive Surgery
Hand and Wrist Surgery

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- Have you received any other treatment for these symptoms? ¹
 - Physical therapy
 - Massage
 - Chiropractor
 - Acupuncturist
 - Treatment by another physician
 - Prescription or over the counter treatment for rashes
- What is your current cup size, what cup size are you hoping to achieve? ²
- When did your breasts first develop?
- Have you had or do you intend to have any pregnancies?
- Have you or do you plan to breast feed?
- Do you smoke or use nicotine products (vaping, chew tobacco, gum)?
- Have you had any surgery on your breast before?
- When was your last mammogram?

¹ Some insurances require documentation of other forms of treatment before approving surgery.

² Bra cup sizes are not standard across manufacturers and designers. We like to have this discussion to get a sense of how “big” or “small” you would prefer to end up.

Physical Exam

We will check your weight and height as well as perform an examination of your breasts. This will include taking measurements of your breasts that help plan surgery. Photographs will also be taken for the purpose of surgical planning and because some insurances require this documentation.

Decision to Proceed

During your visit, we make an estimate on how much breast tissue we would be able to safely remove. This estimate is based on clinical experience as well as your proportions and desired breast size. We can't guarantee a cup size largely because bra cups vary considerably between brands. The conversation is important, however, to get a general sense of what you are looking for.

Breast reduction is considered *elective* surgery. This means that we can wait until you are in the safest medical condition before proceeding with surgery. We use your history and physical exam to determine if you are safe for surgery. Some major factors that can make you unsafe for surgery include:

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- Body Mass Index >35
- Recent use of nicotine
- Poorly managed blood sugars (HbA1c >7)
- Poorly managed other medical conditions

Body Mass Index (BMI) is a number based on your weight and height. What we know is that patients with BMI's classifying them in the **Obese (BMI ≥ 30)** category or higher have an increased risk of complications. In our practice, we do not feel that it is safe to proceed if your BMI is >35.

Nicotine is the addictive chemical found in tobacco and many products used for vaping. Nicotine carries a number of risks to your health. From a wound healing perspective, nicotine acts to decrease the blood supply to the tissues significantly (1 puff of a cigarette can reduce blood flow to the healing tissues for 90 minutes). It is for this reason that we require our patients to quit nicotine and nicotine containing products for at least 4-6 weeks *before* and *after* surgery. This will help significantly reduce the risks of complications from surgery.

Uncontrolled diabetes can place you at risk for wound healing complications as well as severe infections that can be life threatening. In our diabetic patients, or patients who are at high risk for diabetes, we will check for a recent hemoglobin A1c (HbA1c) to ensure that your blood sugars have been well controlled leading into surgery.

Other medical conditions can also complicate recovery from surgery. Please be sure to inform us of any and all medical conditions you have and medications (over the counter included) that you take.

Before Surgery

Breast reduction surgery is done under general anesthesia. It will be important to follow the instructions provided by our anesthesia team to ensure that anesthesia is delivered safely to you.

You may want to purchase a front fastening sports bra that is comfortable at your current bra size. This may be used after surgery to support your breasts while you recover.

Day of Surgery

When you arrive, the staff at the surgical center will go through your medical history and prepare you for the procedure. Dr. Naram will then see you and confirm the procedure with you and proceed to perform the markings for breast reduction surgery. The markings will take 10-15 minutes to perform and are the most important part of the surgery. Dr. Naram will be

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accompanied by a chaperone and/or his surgical assistant (a physician-assistant, nurse practitioner, resident physician, or certified first-assistant).

Surgery

The length of your surgery depends on a number of factors in the operating room such as the size of your breasts and the quality of your breast tissue. On average, the surgery takes about 2 hours to perform. There is added time at before the procedure starts and after the procedure ends for the anesthesia portions of the procedure.

After Care

- **Day 0:**
 - Leave your dressing and bra/ace-wrap alone.
 - Have someone look after you for the next 24 hrs.
 - Walk around for 5 minutes every hour until you go to sleep at night.
 - Take slow deep breaths throughout the day (inhale counting to 10, exhale counting to 10).
 - For **pain** follow our instructions on safe and effective use of medication for **pain control**.
 - Lifting should be limited to objects weighing equal to a gallon of milk or lighter.
- **Day 2:**
 - Remove your bra/ace-wrap other dressings **except for the paper tape**. You may then take a **shower** (no baths or standing water). The tape over your incision typically falls on its own after ~3 weeks.
 - Continue to support your breasts with either a front fastening sports bra or the surgical bra/ace we placed on you at the end of surgery.
 - Continue to walk and breath as you did on day 0.
- **Day 7-14:**
 - You will have your follow up appointment to evaluate your breasts for infection, blood or fluid collections, or any other issues.
 - You will notice your breasts are still swollen, this is expected for a number of weeks.
 - You can increase your activity level to long walks (around the block outside).
- **Day 14:**
 - You can lift heavier objects as long as you are not straining to do so.

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- **Day 21:**
 - You can enjoy aerobic exercise that is low impact (bicycle, elliptical, even gentle treadmill with a supportive sports bra).
 - **Sexual activity** can begin during this time. Avoid direct pressure onto your breasts.
 - You may lift heavier objects, but avoid activity that will place direct pressure on to your breast (avoid lifting large boxes that require you to press the object against your chest to lift).
 - Any remaining paper tape on your incisions can be removed gently.
 - You may begin **Scar Care** on your incisions.
 - If you do not have any open wounds, you may bathe in standing water or swim.
- **Day 42 (week 6)**
 - Assuming no wound complications, you have no restrictions in activity at this point.
 - Your breasts may still be tender or mildly swollen.
- **Week 12 (month 3):**
 - Any significant amount of swelling in your breast has now resolved.
 - Scars and tender areas on the breast can still benefit from **Scar Care** and massage up to a year from surgery.
 - You may be formally refitted for a new bra at this time.

Common issues

Recovery from breast reduction surgery is often straight forward. There are some common issues that patients experience:

Spitting sutures: we use dissolving stitches underneath the skin to minimize the appearance of scars. These stitches take a number of weeks to months to dissolve. If you feel a rough spot along your scar that feels like the end of a fishing line sticking through the skin, this is likely a spitting suture and can be trimmed down in the office.

Scar tenderness: scars take a year to settle. Follow our **Scar Care** instructions to help improve the appearance and feel of your scars.

Open areas: some portions of the incision may not heal together neatly early on. This can be due to a variety of factors. Small areas are often managed easily with soap and water washes daily (or showers) followed by a small amount of petroleum jelly and dressing with dry gauze. The areas will heal in a 2-3 weeks with diligent care.

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Infection: this is uncommon. Signs of infection include sudden redness, pain, and drainage that is cloudy and thick. Fevers may or may not be present. If you are concerned about infection, call our office and we can guide you further. If there is an open area with a small amount of clear or yellow fluid draining, this is usually a normal part of healing and not concerning.

Hematoma/Seroma: at the end of surgery, our goal is to reduce your breast size in a way that makes them as symmetric as possible. All women have some asymmetry between breasts before surgery, and it is normal and expected to have some asymmetry between breasts after surgery as well. If you notice a gradual or sudden change in size of one breast compared to the other, this can be a sign of a fluid collection. If you are having no other symptoms beyond this, call our office during normal hours to set up an evaluation. If you are having additional symptoms such as increased pain, dizziness, or light headedness, you should call us immediately. You may need to have urgent drainage of the fluid which would be done at our Springfield, MA campus.

If you have any further questions or have an issue not addressed in this hand-out, please call our office.

Springfield: (413) 370-8134

Wing: Monday 8AM – 5PM and Wednesday 7:30AM – 4PM call **(413) 370-8134**

Outside of these hours call **(413) 370-5796**

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