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Breast Reduction – Patient Information

Breast reduction is a major operation that can help make your breasts feel smaller, lighter and give them a better shape. This is often carried out when the size of your breast is causing problems such as backaches.

If you plan to have breast reduction surgery before having children (or more children), bear in mind that breasts can get larger again during pregnancy, which may affect the results of the operation.

There's also a chance you will not be able to breastfeed after the operation.

What does Breast Reduction involve?

Breast reduction surgery is carried out under general anaesthetic. This means you'll be asleep during the operation.

The surgeon will need to know if you are taking any medication that thin the blood such as aspirin, clopidogrel, warfarin or rivaroxaban or medicines that reduce your immunity or ability to heal.

Generally, the operation involves:

- Moving your nipple to its new position – usually while it's still attached to the blood supply
- Removing excess fat, glandular tissue and skin from your breasts
- Reshaping the remaining breast tissue

The operation takes 3 to 4 hours, depending on the extent of the breast reduction.

You'll usually need to stay in hospital for 1 or 2 nights.

What can I expect after Breast Reduction?

When you wake up after surgery, you'll have dressings on your breasts and plastic tubes may be attached to them to drain blood away.

After 1 to 2 days, the tubes will be removed and you'll usually be able to go home. You may also go home with the drains, as advised by your surgeon.

You may have some pain for a few days, which can be relieved with painkillers.

It's likely your breasts will be swollen and may feel tender and lumpy after surgery. The swelling may last for around 3 months.

You will not see what your breasts look like until the swelling has gone down.

It can take 2 to 6 weeks to fully recover from breast reduction surgery.

You may need to take 2 to 3 weeks off work, and need help with housework, childcare and shopping.

You should not drive until it's no longer painful to wear a seatbelt. This may be several weeks.

Avoid stretching, strenuous exercise and heavy lifting for up to 6 weeks after the operation.

Some surgeons suggest wearing a compression garment 24 hours a day for up to 3 months after breast surgery. Check with your surgeon.

The length of time you need to keep the dressings on depends on how quickly your wounds heal.

Stitches will need to be removed after a week or 2 unless they're dissolvable.

Will I have Scars?

You'll probably have scars around your nipples.

You may also have a vertical scar running down your breast and a horizontal scar across the crease or slightly above.



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Or you may only have a vertical scar running down your breast.

It depends on the type of surgery you have. Discuss this with your surgeon.

Scars are usually red for the first 6 months, but most fade over time and should be invisible under normal clothes, bras and bikini tops.

What can happen following Breast Reduction?

Breast reduction surgery can sometimes result in certain issues, including:

- Thick, obvious scarring
- Unevenly shaped breasts or nipples
- Wound healing problems
- Loss of nipple sensation
- Nipple necrosis (particularly in large reductions or in smokers)
- Being permanently unable to breastfeed
- Red or lumpy breasts if the fat dies (fat necrosis)
- Excess skin around the scars, which may need to be surgically removed
- Bleeding inside the breast tissue (haematoma) – this generally happens within the first 24 hours after the operation
- Interference with Sentinel Lymph Node Mapping Procedures - Breast surgery procedures that involve cutting through breast tissue, similar to a breast biopsy, can potentially interfere with diagnostic procedures to determine the lymph node drainage of the breast tissue in the staging of breast cancer.

Also, any type of operation carries a small risk of:

- Excessive bleeding
- Infection
- An allergic reaction to the anaesthetic
- A blood clot forming in the deep veins

Your surgeon should explain how likely these risks and complications are, and how they'd be treated if you have them.

Smoking and Surgical Risks

Smoking increases the risk of complications both during and after cosmetic surgery.

Chemicals in cigarettes restrict blood vessels and reduce the amount of oxygen carried in your blood. This can affect your safety during the operation and your healing afterwards.

Risks During Surgery

Smoking can lead to:

- **Reduced oxygen delivery to tissues**, making the procedure riskier
- **Higher risk of anaesthetic complications**, including breathing difficulties
- **Poor blood flow**, which can affect the body's ability to tolerate the surgery
- **Increased risk of skin and tissue damage** during procedures that rely on good circulation

Risks After Surgery

Smoking also significantly increases the risk of:

- **Delayed wound healing**
- **Infection at the surgical site**
- **Poor scarring or widened scars**



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- **Skin or tissue loss (necrosis)**, especially in procedures involving skin flaps

To reduce these risks, **patients are strongly advised to stop smoking (including e-cigarettes and nicotine-containing products) for at least 6 weeks before and after surgery.** Quitting allows your circulation and oxygen levels to improve, supporting safer surgery and better healing.

What if I have concerns?

You should contact the ER or the ward, as instructed prior to discharge if you have severe pain or unexpected symptoms.

Cosmetic surgery results may not always meet your expectations. If you are not satisfied with the outcome, you can discuss this with your surgeon.