

Breast reduction

Introduction

Heavy or sagging breasts can be a heavy burden both psychologically and physically. Women who have breast reduction operation, usually do so because of the complaints. The weight of the breasts can cause pain in the shoulders, back and neck and straps bra straps deep into the skin of the shoulder. **The breasts can be sensitive or even painful.** Heavy breasts are also often in the way of sports and many women have problems finding suitable clothing. In case of smearing of the skin under the breasts, a shrinking operation can also offer a solution.

Possibilities and expectations

Of course, with a breast reduction operation, the desired cup size will be taken into account within certain limits. The plastic surgeon will also have an idea about the most suitable size from his or her vision and experience. This advice usually corresponds to the wish of the woman who wants to undergo the operation. No guarantee is given that the operation will lead to the desired cup size. After the operation, the breasts are smaller and firmer, but there are permanent scars. What these scars look like differs per person. Sometimes the breasts are not quite the same size. The shape and sensitivity of the nipples can also be different than before the operation. After operations in which the glandular tissue under the nipple is also removed, breastfeeding is not always possible. Breast reduction or breast strengthening surgery does not correct the excess tissue that runs from the armpit to the back in some women. Research into nodules or other abnormalities remains feasible after a breast reduction. If you are overweight for the operation (BMI higher than 30) you should first lose weight. The surgical result is then better and the risk of infection is reduced.

Preparation

If you are overweight, it is wise to lose weight before breast reduction surgery to get a better result. When you do this after the operation, the breasts will slacken again.

If you are taking blood-thinning medications (e.g. marcoumar, aspirin, sintrom(itis), ascal, clopidogrel) you should report this during the conversation. The use of these medications should be discontinued 1 week before breast reduction. You will receive instructions about this from the attending physician. Nicotine increases the risk of problems with wound healing. Your doctor therefore urgently advises you to stop smoking a few weeks before the operation.

If you are under treatment elsewhere or are allergic to a certain substance or medicine, you must also report this.

You should shave your armpits 1 day before the procedure. You should not apply body lotion to your upper body on the day of surgery. On the day of the procedure, the surgeon will draw the surgical pattern on the breasts.

Procedure

A breast reduction takes an average of 1 to 2 hours and takes place under general anesthesia. There are various surgical techniques for breast reduction. Your plastic surgeon will inform you about the technique of his or her choice before the operation. In the most commonly used technique, the breast is reduced in size by removing skin and glandular tissue at the bottom. This creates the first scar.

To get a natural breast shape, a 'figure seam' is applied, from the nipple straight down. This becomes a second scar. Then the nipple is moved, and sometimes the areola is reduced in size. Eventually, an anchor-shaped scar is

created. Support plasters are stuck over the scars. In the wound area, two drains (thin tubes) are sometimes left behind, which are connected to two vacuum bottles. They ensure that the wound fluid can be drained.

After the operation

After a breast reduction operation, the breasts are bandaged and support plasters have been applied to the scars. Any drains that drain the wound fluid can remain in place for several days. If there is little production of wound fluid, they are quickly removed. The first 24 hours after the operation you have some pain, after that the breasts can feel tight and tense. You may shower the day after the procedure. Leave the support patches in place.

From the day of the operation, you should start wearing a supportive sports bra or sports top. You must wear this bra for 2 weeks for 22 hours, then 2 weeks for 12 hours. After these 4 weeks you can start wearing what you want again. Upon discharge, you will receive an appointment for the check-up at the outpatient clinic. During this visit to the outpatient clinic, the sutures are removed.

After the operation, a strong tension develops in the tissues. It therefore sometimes takes 9 to 12 months before the breasts have their final shape. It is wise to arrange help for the first week after returning home. The more rest you give the surgical wound, the more beautifully the scar heals. You may not exercise, swim, bathe and lift heavily for 6 weeks. After about 2 weeks you can do most of the light daily work yourself again. Massage with a cream or lotion can make the scars more quickly supple, but you should only do this after the stitches have been removed and when the wounds have completely healed. As long as the scars are red, it is advisable to protect them with a sunblock. The total recovery takes approximately 1 year.

Risks and possible complications

Breast reduction surgery has the same risks as any other surgery. A wound can bleed or a (wound) infection can occur. The breasts may also differ in swelling. Also, a complete symmetry of the breasts can rarely be achieved during breast surgery.

After surgery, the sensation in the nipples may be reduced or more sensitive, just as the sensation at the bottom of your breasts is often reduced. This usually recovers in the course of the healing process. With very large breasts, there is also a chance that part of the nipple has insufficient blood flow after the operation, as a result of which part of the nipple can die.

Excessive scarring can often not be prevented, especially in those who have a predisposition to it (keloid).

Compensation

Breast reduction surgery is generally only reimbursed when you have at least a D-cup, or when the breasts are decidedly uneven in size. The BMI will also have to be 30 or lower.

The decision on this is taken by the medical advisor of the health insurer. It is possible that this advisor will call you for his consultation hour.

Justification text

This text is intended to complement the conversation with your doctor. The general information cannot always do justice to each individual situation. If you have any questions after reading this information, the plastic surgeon will be happy to discuss them with you during the consultation hour. It can be useful to put your questions on paper in advance.

