



**LUTON &
DUNSTABLE**
UNIVERSITY
HOSPITAL

CLINICAL EXCELLENCE, QUALITY & SAFETY

Mastectomy



MASTECTOMY

This information is for women who are having an operation for the removal of the breast. It explains the reason for the operation, the extent of it, what is involved, the after effects and any significant risks that there may be.

A mastectomy involves the removal of the whole breast including the nipple and the areola. This would leave you with a scar against the chest wall.

Reasons for this surgery

Your breast surgeon will have discussed with you the reasons for surgery and any other available treatment. The aim is to remove the cancerous tumour with the breast.

You will find information about bra fitting and a false breast fitting at the end of this leaflet.

You will also have the opportunity to discuss your **treatment plan** with the Breast Care nurse. The nurse can show you photographs of previous patients who have undergone similar operations and talk about the hospital stay and any further treatments that may be required.

Please contact the nurse with any worries or concerns that you or your family may have, on 01582 49 7103.

Preparation

You will be given a provisional date for the operation by the breast surgeon at your outpatient appointment. We will give you confirmation of this date as well as an appointment for your pre-operation health check, which will take place with a nurse a few days before your operation.

- The health check includes some or all of the following checks: your medical history, blood pressure, blood test, a chest x-ray, and an ECG (a heart tracing). Some checks may be done earlier.
- Please do not hesitate to ask the nurse any questions you may have about the procedure; the nurse will also discuss the consent issues with you and ask you to sign the consent form.
- Please tell the nurse if you have diabetes, or any allergies. Please bring in any medicines you are currently taking and tell the nurse if you are taking warfarin or any other blood thinning medication.
- If you do not attend this pre-operation check-up the operation cannot go ahead.

MASTECTOMY

On the day of your operation

- **You must not eat anything from 6 hours before your operation. You may drink water only up until 2 hours beforehand.**
- Unless told otherwise please go to the main reception of the hospital and report to the waiting list office. You will then be directed to the correct area. Staff will check your details.
- Personal effects: as well as the items mentioned in the separate booklet about coming into hospital, you should bring in pyjamas if possible, and a soft bra or crop top.
- You will be admitted on the day of your operation.
- Unless told otherwise, please go to the main reception of the hospital and you will be directed to the arrivals lounge. A member of staff will check your details.
- Remember to bring with you any medicines you take on a regular basis; and your next-of-kin phone number.
- Your surgeon will see you to confirm that you understand the operation and agree to go ahead with it; The area to be operated on will be marked with a special skin pen.
- The anaesthetist will also see you to discuss your anaesthetic.
- You will be given a gown to change into and an identity band – please check it.
- **Please ask any questions that you may have.**

The operation

- You will have a general anaesthetic and be asleep throughout the procedure.
- The surgeon will remove the affected breast and put some local anesthetic in to make it more comfortable.
- The wound is then closed with dissolving stitches and paper strips over the skin.
- You may leave the operating theatre with:
a drip (a needle in a vein with a tube attached) in your hand.
one or more drains (tubes to drain excess fluids from the operation site) which help the area to heal and lessen the bruising.

After your operation

- You will go first to a recovery ward and then return to the ward.
- You can have something to eat and drink as soon as you feel like it.
- If you have a drain it will remain in place for up to a week after the operation. The tube drains into a bag or bottle, which can be carried around in a small bag.
- Please take painkillers as soon as you are able as the local anaesthetic will wear off and it is important to have some pain relief in your system before this happens.
- You will be encouraged to get up and walk as soon as possible.
- There will be a light dressing over the wound site. The wound site will have dissolving and paper stitches. The

MASTECTOMY

only stitches that require removal are the ones which hold the drainage tube in place.

- You will normally be able to leave hospital between 1 and 2 days following the surgery.
- A supply of painkillers will be prescribed for you to take home.
- You will be looked after at home by a home nursing service, known as "Hospital at Home".

At home

- If your dressing is waterproof you may shower with your back to the water flow and dab dry. Whatever type of dressing you have you can have a shallow bath but do not soak the wound in water. The Hospital at Home Nurse or District Nurse will check the wound and look after any drainage tube.
- You may experience a number of differing sensations around the area of the operation they include:
Numbness, increased sensitivity and tightness around the wound;
Aching of the wound or shoulder.
- **Take the painkillers prescribed regularly** for the first 7-10 days. Your GP can prescribe more if you require them.
- When you come to the outpatient clinic your dressings and paperstitches will be removed and, if the ends of your sutures have been left long, they will be trimmed.
- To start with the wound will be red and slightly swollen with some bruising, this may last for a couple of weeks. After a few months your scar will start to fade into a thin pale line.

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- You may feel tired for the first couple of weeks or so, it is helpful to have some help with household jobs. Gradually increase your activities, but please use your commonsense and do not overdo it.
 - You can resume driving when the wound is completely healed and you have a good range of arm movements and can do an emergency stop.
 - You may return to work when you feel ready to do so and/or depending upon any further treatment that may be required. Most people having breast surgery will require 3-4 weeks off work.
 - An appointment will be sent for you to attend the outpatient clinic 1 – 2 weeks after your surgery to discuss the results of your operation and any further treatments that may be necessary.

MASTECTOMY

Risks and complications

Breast surgery is usually very safe and the most serious complications are very rare. These need to be weighed against the risks of not having the surgery when making your decision. There are some risks associated with most procedures. For breast surgery they may include the following:

Bleeding – this can occur early or late after the surgery but is generally drained away without problem by the ‘drains’ that are in place. Rarely, a collection of blood may need to be removed under anaesthetic.

Infection – this can be controlled by the use of antibiotics; occasionally intravenous (directly into the bloodstream) antibiotics may be needed; and more rarely surgery might be necessary

Bruising – some bruising around the site of the wound is quite common, this will settle down in a few weeks.

Deep Venous Thrombosis (DVT) you can reduce the risk of this by being as mobile as possible at home.

Fluid collection – this is very common after breast surgery, you may develop fluid collections which may need to be removed by needle aspiration.

Pain/discomfort – in the area of the operation should improve with time, but some pain/discomfort in this area may persist.

Recurrence – the cancer can sometimes recur, you will be kept under surveillance and told what to look out for.

Please speak to your breast surgeon before your operation if you have any concerns about these risks.

Emotional, social or personal adjustments

Learning of your cancer diagnosis and having an operation can happen in a short space of time and be a very stressful experience, which can often leave you feeling confused and upset. When you first go home you may find that you are able to cope some days better than others. It takes time to adjust and gradually you will be able to resume your normal activities and way of life.

Breast Prosthesis

A breast prosthesis is a false breast often called a breast form which replaces your normal breast after surgery. You wear it inside a cup of your bra.

After breast surgery, your normal breast will be replaced by a prosthesis (false breast) often called a breast form, which is worn externally inside the cup of a bra.

Temporary breast prosthesis

After surgery it will take several weeks for your body to heal completely. Soon after your operation you will be given a temporary lightweight fabric false breast, sometimes called a "softie" or "comfie" that you can wear while your scar is healing. This will help to maintain your outward shape and appearance without irritating sensitive scar tissues.

Permanent breast prosthesis

You will have a fitting for your permanent breast prosthesis 4 - 6 weeks after your surgery in the 'Orthotics Department'. It is made of silicone and aims to closely simulate the shape, size and softness of a woman's breast. They are weighted to provide the correct balance and warm easily to body temperature. Because the texture of silicone feels so natural, physical contact, even a hug, will not reveal any difference between your normal breast and your prosthesis and you may continue to enjoy the same activities you always have.

MASTECTOMY

Bras and swimwear

A softer old bra, sports bra or crop top may be more comfortable to start with. We advise you not to buy a mastectomy bra until your permanent prosthesis has been fitted. Once your permanent prosthesis has been fitted your bra must be well fitting, so it is important to pay special attention to cup size.

In order to support your prosthesis the bra should have a front divide of a minimum 5cm in depth

Here is a list of organisations providing bras, swimwear and prostheses:

Amena (mail order) 0800 378668

Eloise (mail order) 01284 828787

Nicola Jane (mail order) 0800 0182121

Your own bras and swimsuits can be adapted with a pocket to keep the prosthesis in place. Alternatively, bras and swimwear can be purchased with purpose made pockets. These are available to both try on and purchase when you come for your permanent breast prosthesis fitting, or at a later date. Many department stores and several mail order companies also offer an excellent selection of suitable bras. You may wish to adapt your own bra; please ask about this.

Advice and tips

1. Yours prosthesis should be washed daily in warm soapy water.
2. It is important to replace the prosthesis in its own box when not being used, to ensure it maintains shape and good condition.
3. Do not use any talc or cream around the prosthesis as this can damage it.
4. Beware of sharp objects that could pierce the prosthesis, i.e. brooches and animal claws.
5. If a split or puncture occurs, do not worry it will not deflate! Apply a piece of sticky tape or plaster and then contact the Orthotics Department.
6. Always wear a well fitting bra.
7. You can wear your prosthesis while swimming, but rinse it well afterwards.
8. If the prosthesis is too heavy for swimming, use your "softie" or "comfie" instead.

For further information

If you have any questions or feel any time you or your family would like to discuss any aspect of your treatment or your feelings further, no matter how trivial it may seem, please do not hesitate to contact your Breast Care Nurse on 01582 497103.

Support Groups/ useful contact numbers

Nurse Practitioner 01582 491122
Bleep 033 or 032

Hospital at Home

Cancer Bacup 0808 800 1234
www.cancerbacup.org.uk

Breast Cancer Care 0808 800 6000
www.breastcancercare.org.uk

Macmillan Information Line 0845 601 6161

L & D Breast Cancer Support Group 01582 497103