

Mammoplasty / Gender-Affirming Breast Surgery Surgical Overview

Mammoplasty or breast surgery is a procedure to change the contour and size of a person's breasts so that they are more closely aligned with their sense of self.

Surgery Considerations

There are many things to consider when thinking about breast surgery.

The surgical team will discuss:

- Which surgery techniques and implant options are available and recommended based on a person's chest anatomy, breast size and shape, and goals.
- Timing of surgery and recovery. It is important that a caregiver be available to assist with transportation and post-operative care. Most people need to take 1-2 weeks off work/school. If other surgeries are planned, it's important to talk with your surgeon about how long to wait between surgeries.

Reasons people have breast surgery

- Increase physical and emotional comfort.
- Reduce distress related to the body.
- Feel more affirmed in their gender.
- Feel a greater sense of ease and safety in public spaces.
- Increase sexual function or fulfillment.

Physical and Mental Health

It's recommended that people be in their best physical and emotional health before any surgery.

A medical team works with patients to stabilize any health conditions that would put a person at higher risk for complications during surgery.

Preparing for Surgery

Hormones

- To prepare for surgery, your surgeon will ask you to discontinue estrogen usually 1 month before surgery. This is to reduce the risk of developing clots during surgery and other complications.
- It may be helpful to discuss with your hormone prescriber what options are available to slowly taper you off estrogen. Others have said that slowly going off estrogen helps reduce symptoms like hot flashes.

Smoking

- Nicotine
 - Nicotine (either from smoking, vaping, or using nicotine gums or patches) causes blood vessels to constrict and limit blood supply, which is essential for wounds to heal.
 - Nicotine use also makes anesthesia more dangerous and increases your risk for blood clots, infection, and poor scar healing.
 - Surgeons will ask you to stop any nicotine use usually at least three months before surgery and to refrain from using nicotine products for at least 3 months after surgery.
 - If you need help in quitting, Kaiser has a smoking cessation program that may be able to help. The program is usually free. If you would like a referral to your local Kaiser's smoking cessation program, you can ask the MST clinic or your primary care provider.
- Marijuana
 - Marijuana is not contraindicated before surgery, however inhaling marijuana in the form of smoking or vaping can impact lung functioning while under anesthesia.
 - Surgeons recommend switching from vaping or smoking to edibles at least 1 month before surgery.

Breast Surgery Explained

- The most common breast surgery option is implants.
 - Implants are made of either saline or silicone. The surgeon will make recommendations for type of implant.
- Both saline and silicone breast implants are considered safe for mammoplasty.

Saline implants

- Saline breast implants are filled with sterile salt water.
- Saline breast implants provide a uniform shape, firmness and feel, and are FDA-approved for people age 18 or older.
- One benefit of this type of implant is that should the implant leak a saline implant will collapse and the saline will be absorbed and naturally expelled by the body.

Silicone implants

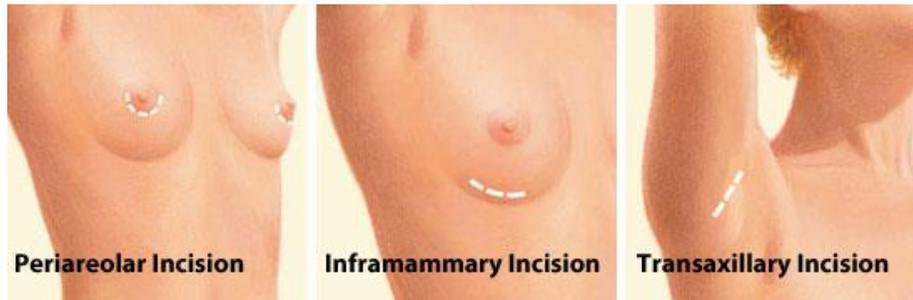
- Silicone breast implants are filled with silicone gel. Many people report that the gel feels a bit more like “natural” breast tissue than saline implants.
- Silicone breast implants are FDA-approved for augmentation in people age 22 or older.
- One consideration of this type of implant is that if the implant leaks, the gel may remain within the implant shell, or may escape into the breast implant pocket. A leaking implant filled with silicone gel will not collapse.

Identify Goals and Develop Surgical Plan

- At the consultation appointment, the surgeon will discuss a patient’s goals for breast surgery including the size, shape, profile and recommended technique.
- The surgeon may have sample implants to try out at a consultation visit to see what size and shape best fits with the patient’s goals. It can be helpful to bring a bra and clothing to try on with the implants.
- It may be helpful to try out sizers or inserts that are the same size as the breast size that is being considered and wear them throughout a typical day. This will help patients get a better sense of how it will feel to do daily activities after breast surgery.

Surgical steps

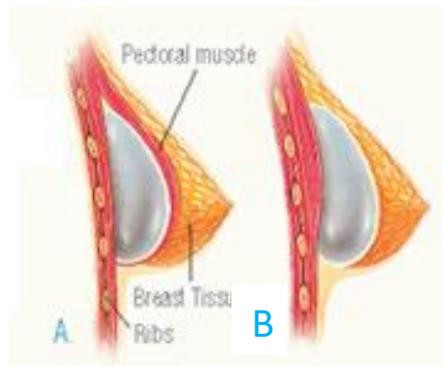
1. Incisions are made in less visible areas to minimize visible scarring. You and your plastic surgeon will discuss which incision options are appropriate for your desired outcome. Incision options include: along the areolar edge (peri-areolar incision), the fold under the breast (inframammary fold) and in the armpit (axillary incision).



Incisions vary based on the type of breast implant, degree of enlargement desired, your particular anatomy and patient-surgeon preference.

There is no surgical change to the nipple and areola during breast surgery. Implants may stretch the nipple and areola and give them a slightly larger shape.

2. After the incision is made, a breast implant is inserted into a pocket either:



A. Under the pectoral muscle (a submuscular placement)

B. Directly behind the breast tissue, over the pectoral muscle (a submammary/subglandular placement)

The method for inserting and positioning breast implants depends on the type of implant, degree of enlargement desired, your body type and your surgeon's recommendations.

3. Incisions are closed with layered sutures in the breast tissue and with skin adhesive, surgical tape, or sutures to close the skin.

Recovery

- Breast surgery is an outpatient surgery performed under general anesthesia, meaning that patients leave the hospital on the same day as their surgery.
- Immediately after surgery, patients will be taken into a recovery area for close monitoring. Patients may be permitted to go home when they are stable for discharge, typically after an hour or so.
- During mammoplasty recovery, a patient's breasts will be wrapped in gauze dressings and an elastic bandage or support bra to minimize swelling and support the breasts as they heal.
- Because it is possible to bleed into the pockets around the breast implants for the first several days, patients are advised to take it easy until they are cleared to increase activity level.
- Acute pain typically subsides after one to five days, but patients may experience soreness and swelling for a few weeks. Resume exercise and normal activity according to the plastic surgeon's directions.
- Most people require 1-2 weeks off work or school with reduced activity.
- A caregiver will need to be available to drive a patient home from the hospital and to assist when they get home from the hospital.
- It is recommended to have someone monitor patients at home for the first 48-72 hours after surgery to make sure that they are safe.
- The surgeon will have specific instructions about when it is safe to drive, shower, swim and return to moderate exercise after surgery.

Implant Considerations

- The average saline or silicone implants may last anywhere from 10 to 20 years. However, many are removed sooner due to complications or cosmetic concerns. Up to 20 percent of people have their implants removed or replaced within 8 to 10 years
- When implants are placed under the muscle it may be possible to feel them move within their pocket when patients do certain exercises involving the chest. It can be a little unnerving at first, but this is completely normal. Implants will not pop out of place and the shape will not change
- One possible outcome of mammoplasty with implants is capsular contracture. This is essentially a tightening – or contracting – of the scar tissue. Symptoms usually begin gradually and may be noticed first as a feeling of mild tightening. As contracture increases, the breast may appear to change shape and become very firm and painful, especially when lying on it. If this happens, patients are advised to consult the surgeon about treatment options.

Risks

There are risks with any surgery. Breast surgery has specific risks. They include:

- Bleeding
- Infection
- Hematoma
- Delayed wound healing
- Implant leakage or rupture
- The formation of tight scar tissue around the implant (capsular contracture)
- Changes in nipple or breast sensation
- Problems with anesthesia
- Fluid accumulation (seroma)
- Wrinkling of the skin over the implant
- Possible need for surgical revisions
- There may also be some scarring. Scars usually fade over time. Some people develop thick scars (keloids) that are permanent but may be treated with steroid injections.

Even people in the best physical health who follow all instructions can develop complications. Your surgical team will work closely with you if a complication develops and provide you with the appropriate aftercare and follow-up.