

# Top Surgery (Mastectomy) Potential Risks and Complications

KP SCAL Gender Affirming Surgery Program

November 2019

Top surgery is permanent and irreversible. The following information about top surgery (bilateral mastectomy) has been discussed with you. They include but are not limited to:

## Chest procedure types:

- Partial mastectomy through curved lower nipple scar
- "Purse string," "donut," or "key hole" nipple/areola reduction
- Double incision mastectomy (from crease under breast and free nipple grafting)
- Sometimes any of these in combination with breast lift (mastopexy) and/or liposuction (suction or ultrasonic fat removal)

Possible risks and complications of chest recontouring surgeries (**seen in about 12% of these surgeries**) include but are not limited to:

- Bleeding (**4-10 % chance of emergency return to operating room**)
- Infection
- Unsatisfactory permanent scarring, possible keloid formation
- Hypopigmentation of the nipple areola area graft, especially in patients with darker skin
- Chest unevenness/asymmetry, puckering of incisions, excess skin
- Wound separation/delayed wound healing
- Partial or complete loss of nipple and areola, nipple flattening
- Loss of nipple sensation, loss of erectile function, erotic sensation (permanent with free nipple grafting)
- Hypersensitivity and or pain of chest skin, nipple and areola, which could be permanent
- Blood clots in your legs or lungs (deep venous thrombosis/DVT, pulmonary embolus/PE)
- Complications from anesthesia or medications
- Difficult psychological adjustment
- Negative impact on relationships with a significant other or sexual partner
- No assurance of achieving the desired breast size /shape
- Poor cosmetic outcome
- Damage or partially remove tattoos in the surgical zone
- Breast size fluctuation with future weight gain or loss
- Need for revision or further surgery, tattooing (**1 out of 3 patients require additional procedures**)

# Top Surgery (Mastectomy) Surgery Preparation Checklist

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## Employment

- Notify employer 30-60 days before surgery date
- Apply for FMLA with employer
- Apply for SDI Online  
*Submit online application 0-49 days after surgery*
- Obtain documentation from surgeon. *Surgeon will document "medically necessary surgery"*

## Cost

- Confirm share of cost with Member Services at **1-800-464-4000**
- Plan for covering cost of living while out of work

## Transportation

- Prepare a ride home from hospital after surgery with an adult. You will not be permitted to drive.
- Prepare rides to/from follow-up appointments until your surgeon tells you when you can safely drive

## Supplies

- Purchase all necessary supplies from surgeon list
- Consider purchasing an extra front-open compression garment so the one provided by the hospital can be washed
- Obtain prescriptions from surgeon at pre-op visit
- Fill prescriptions at your Kaiser Pharmacy

## Caregivers

- Identify your post-operative caregiver. They will need to stay with you at least 24 hours after anesthesia
- Arrange for the care of your pets and children for several days

## Prepare Recovery Space

- Prepare recovery space
- Set up a bedside table for prescriptions, remote control, water, etc.
- You may want to put a mattress protector or "Chux" to protect the mattress and sheets
- Move needed items on lower shelves for access

## Meal and Chore Planning

- Have simple, light foods for the first day like crackers, Jell-O, clear broth in case you are nauseated
- Meal/hydration planning (groceries, freeze foods)
- Plan who can do laundry, garbage, light housekeeping, errands, etc.

## Advanced Directive

- Complete advanced directive
- Bring advanced directive to hospital on day of surgery

## Smoking and Surgery

Smoking severely decreases the blood flow and the delivery of oxygen to the skin. **This includes all nicotine containing products such as e-cigarettes, chew, snuff, lozenges, patches and gums.** People who smoke have an increased risk of many complications including pneumonia, bleeding, infection, skin necrosis (loss of skin from inadequate blood supply), poor or delayed healing and prominent scarring. I recommend you stop smoking for at least 4-12 WEEKS BEFORE and AFTER surgery to reduce, but not eliminate, the smoking-related risks.

Assistance with smoking cessation is available at 888-883-7867 or at [www.kp.org/healthylifestyles](http://www.kp.org/healthylifestyles). Follow the link to personalized plans to quit smoking. Alternatively go to [www.kaiserpermanente.org](http://www.kaiserpermanente.org) and search QUIT SMOKING

# Top Surgery (Mastectomy) Before Surgery Instructions

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- **You will be called directly by the surgical scheduler within one week** to set up a surgery date and another for your pre-operative visit back in this office where we will take photographs, review and sign consent, give you prescriptions, after surgery care information and restrictions.
- If advised to, please lose the discussed amount of weight prior to surgery. The weight loss will optimize your health and surgery outcome.

## **BEFORE SURGERY**

- **You may continue testosterone through surgery**
- Please avoid binding tightly for 4-6 weeks before surgery. A simple spandex vest or shirt which does not chafe the skin or leave marks when you remove it is fine. Binding very tightly (particularly with tape or ace bandages) irritates the skin and can increase the risk of infection as well as dark, thick scars.
- **IMPORTANT:** Unless specifically instructed otherwise by your surgeon, you should not use Coumadin (warfarin), Plavix (clopidogrel), Aggrenox (aspirin/dipyridamole), aspirin or aspirin-containing products for **TWO WEEKS** before surgery and about one week after surgery. These products can ***thin the blood and increase the risk of bleeding and bruising***. Also many other over-the-counter supplements, herbs and alternative or traditional remedies should be discontinued two weeks before surgery. Do not restart post-operatively until cleared by your doctor. **If in doubt, check with your pharmacist or doctor.**
- Shave all the areas of your body that you normally shave (e.g. armpits) up to **3 DAYS** before your surgery and then do not shave until after surgery.
- Fill prescription pain medications before surgery. **These medications are to be used only AFTER the surgery for post-operative pain.**

## **DAY OF SURGERY**

- Shower right before surgery. You will only be able to do sponge baths until your one week after surgery visit.
- Wear clothes that are loose fitting and comfortable. A button-down shirt works best. Wear something old or inexpensive as it may become stained with blood, iodine or ointments.
- Leave jewelry, watches, earrings/body piercings at home.
- **STOP EATING SOLID FOOD AFTER \_\_\_\_\_** the night before surgery including candy, gum, mints, Jell-O, orange juice, grapefruit juice, juice with pulp, red colored drinks, and milk-based products. You may have **CLEAR LIQUIDS** (water, Gatorade, apple juice, 7-up) up to 2 hours before arrival to the hospital. Most medications, **MAY BE** taken with a sip of water.
- **If you are diabetic, STOP EATING SOLID FOOD AFTER \_\_\_\_\_.** You may continue to drink **WATER** until 2 hours before arrival to the hospital. check with your doctor about the dose of your medications or insulin before surgery. **DO NOT** take METFORMIN on the day of your procedure. If you feel like your blood sugar is low or glucose check <70mg/dl, drink apple juice, Gatorade (not red) or 7-up.
- If you have **HIGH BLOOD PRESSURE** make sure to take any medication for high blood pressure as usually scheduled.
- You will not be permitted to drive home afterward so arrange to be driven home by an adult. You also need to arrange having a responsible adult/caregiver stay with you for the first 24 hours after anesthesia
- Make arrangement to be seen for an after surgery visit 5-7 days after your day of surgery.

# Top Surgery (Mastectomy) After Surgery Instructions

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## MEDICATIONS

- Take all newly prescribed medications and your usual medications upon your return home unless your surgeon specifically instructs you otherwise. Do not take drugs containing aspirin or ibuprofen or any herbs or supplements until advised by your surgeon.
- Use prescription pain relievers, e.g. Norco (hydrocodone/acetaminophen), Percocet (oxycodone/acetaminophen), or Ultram (tramadol) after surgery as needed for severe pain. Frequently only Tylenol (acetaminophen) is needed. Do not overlap doses with Tylenol and prescribed narcotic-acetaminophen or you may receive a dangerous overdose of acetaminophen. Take pain medication after eating a small amount of food (e.g. cracker)
- No driving until off sedating pain medication and able to move arms safely; usually 1-2 weeks after surgery.

## DIET

- For the first 4-6 hours after surgery start with a clear liquid diet (Jell-O, Gatorade). If not nauseated you may add easily digested foods like crackers, toast, soups. Avoid fatty, spicy foods. The day after surgery, you can eat whatever you can tolerate. If you experience prolonged nausea or vomiting, ask for anti-nausea medication.

## ACTIVITY

- Rest is important for healing. Sleep on your back with your head elevated for one week after surgery. A recliner for the first 2 nights is best. Do not sleep on your side
- You may be on work restrictions depending on the physical activity of your job
- Avoid bending over from the waist as this can increase swelling
- Avoid lifting more than 10 pounds for one week, 20 pounds the second week, then 30 pounds the third week.
- No contact sports, high impact exercise (running/aerobics), or weight lifting for 4-6 weeks after surgery

## WOUND CARE

- You will need to keep your surgical dressings on until your 1 week after surgery visit unless otherwise instructed by the surgeon.
- You may sponge bathe after 24 hours and shower after 1 week but do not submerge the wound in a bath, pool or hot tub until your surgeon instructs you.
- Call the office immediately if you have heavy bleeding, redness, pus, fever or a sudden increase in pain, bruising or swelling (particularly if worse in one breast).

## HEALING

- The initial appearance of the chest can be quite irregular and puckered around the incisions. This generally smooths out with time as it settles and matures. This process takes about 9-12 months. There may be some mild puckering that remains after it is settled down. After healing, we will review scar-care products that can help the scars fade and flatten more quickly, especially around the areolas.
- Wear the compression vest I put on you (except when showering) for 2 weeks. This will help shape your chest while healing. Your chest shape will change for up to a year as the swelling improves.
- Protect the wound from prolonged sunlight. No tanning beds. UV light can cause pigmentation, irregularities and scar thickening. Protect the surgical sites from the sun and use sunscreen (SPF 15 or greater) daily for 6 months after surgery

# Top Surgery (Mastectomy)

## How to do self-exam after surgery

After you have healed from mastectomy, you should perform regular chest wall and axillary (arm pit area) exams to learn how your chest normally looks and feels.

Some people set a time each month to do a step-by-step self-exam. Other people like a less formal system. They might self-examine these areas once in a while in the shower.

### How do you do a self-exam?

- To examine your chest/axillary area:
  - Remove all your clothes above the waist and lie down.
  - Use the pads—not the fingertips—of the 3 middle fingers of your left hand to check the right side of your chest. Move your fingers slowly in small coin-sized circles that overlap.
  - Use three levels of pressure to feel of all your tissue. Use light pressure to feel the tissue close to the skin surface. Use medium pressure to feel a little deeper. Use firm pressure to feel your tissue close to your breastbone and ribs. Use each pressure level to feel your tissue before moving on to the next spot.
  - Check your entire chest, moving up and down as if following a strip from the collarbone to your lower ribs, and from the armpit to the sternum. Repeat until you have covered the entire chest.
  - Repeat this procedure for the left side of your chest, using the pads of the 3 middle fingers of your right hand.
- To examine your chest/axillary area while in the shower:
  - Place one arm over your head and lightly soap your chest on that side.
  - Using the pads of your fingers, gently move your hand over your chest (in the strip pattern described above), feeling carefully for any lumps or changes.
  - Repeat for the other side of the chest.

### Follow-up care is a key part of your treatment and safety.

- Have your doctor inspect anything you notice to see if you need further testing.