## Plastics Physiotherapy 0151 430 1237



# Physiotherapy Advice Following Breast Reduction

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如有需要,本传单可提供其他语言/版式 此單張的其他語言/格式版本可按要求提供 Na żądanie ta ulotka może zostać udostępniona w innych językach/formatach.

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## **Your Operation**

Breast reduction is usually performed because overly large breasts can cause long term problems with neck and back pain, poor posture, sores beneath the breasts and discomfort from bra straps chafing the skin.

The operation takes between 3 to 4 hours and removes excess glandular tissue, fat, skin and repositions the nipple.

Commonly, stitches are located around the nipple, in a vertical line below the nipple and along the crease beneath the breast.

## **Postoperative Advice**

The dressings will be intentionally firm and supportive but inform your nurse if they are excessively uncomfortable.

Your breasts will feel swollen, bruised and sore for the first few days but this should lessen each day.

A narrow tube might be placed in each breast near the armpit to drain any fluid collecting at the operation site into a small sealed bottle.

The drains normally stay in place for 1 to 2 days and are removed by your nurse on the ward.

You might be able to wear a soft sports bra over your dressings while in hospital - your nurse will advise you if this is possible.

Further advice on support bras is provided in your ward discharge leaflet.

## 3) Reaching behind your back

Gently reach behind your back as if aiming for your bra strap. Ensure you move slowly and stop when you feel any discomfort.



### **After Drains are Removed:**

## 1) Wall walking to the front

Stand facing a wall. Put your affected hand on the wall and slowly walk your hand up. When you feel a tightness or pulling stop and try to hold for 10 seconds. Then slide your hand slowly back down.



## 2) Wall walking to the side

Stand sideways to a wall. Put your affected hand on the wall and slowly walk your hand up. When you feel a tightness or pulling stop and try to hold for 10 seconds. Then slide your hand slowly back down.



## **Guidelines after Discharge**

First 2 weeks after your operation	Do not lift anything heavier than ½ filled kettle.	No housework, driving or work. Avoid crowds.
2–4 weeks after your operation	Can drive if arm strength and movement back to normal.	Start light housework e.g. dusting. No heavy lifting.
4-6 weeks after your operation	Gradually increase your activity levels.	No heavy lifting.
6 weeks onwards after you operation	Return to normal function.	Gradually return to gym, swimming etc.

Continue with the exercises shown in this leaflet for as long as you feel they help and you are moving your arms as well as, if not better than, before your operation.

## **Circulatory Exercises**

When you are in bed, pull your feet up towards you at the ankle then point your toes down. Repeat 10 to 15 times.

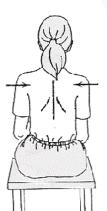
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## **Mobility**

Your nurse or physiotherapist will encourage you to sit out in your chair as soon as possible after your operation. You may be able to move about freely on the ward from the first day after your operation but wait for staff to advise and assist you the first time because it is common to feel a little light headed.

#### **Posture**

Heavy, large breasts can cause you to round your shoulders and stoop forwards. It is important to try to improve your posture after your operation.

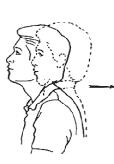


In a sitting or standing position, gently draw your shoulder blades together.

Do not shrug your shoulders up towards your ears.

Hold 5 seconds.

Repeat 5 times at 5 intervals during the day.



In a sitting or standing position, gently draw your head back so your ear is in line with your shoulder.

Keep your eyes and chin level. Do not look down.

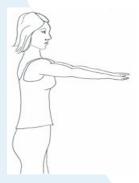
Hold 5 seconds.

Repeat 5 times at 5 intervals during the day.

#### **Before Drains are Removed:**

#### 1. Front arm raising

Start with your arm down by your side. Lead with your thumb and lift your arm up to the front. Stop when you can feel a pulling or tightness. Do not raise your arms above shoulder level.



### 2. Side arm raising

Start with your affected arm down by your side. Lead with your thumb and lift your arm out to the side. Stop when you feel any tightness or pulling. Do not go above shoulder height.

