

Mastopexy (breast lift) Information Sheet

PROCEDURE

Mastopexy is a surgical procedure that lifts and re-shapes the breast. This surgery addresses breast ptosis (drooping), low nipple position on the breast mound, and breast asymmetry. Occasionally, it is performed in combination with, or prior to, breast augmentation.

With a mastopexy, excess skin and sometimes a small amount of breast gland/tissue are removed. The breast tissue that is removed will be sent to the lab to screen for breast cancer. The remaining breast tissue is re-positioned on the chest wall, elevating and reducing the size of the nipple areolar complex. Scarring is usually in the shape of a “lollipop” around the areola extending downward vertically into the breast fold. With larger breasts, the incision may be extended under the breast fold.

PRE OPERATIVE

Patients will visit the office prior to surgery, at which time they will meet with Dr. Robinson to discuss the procedure. Photographs may be taken during consultation and/or immediately prior to surgery.

Prior to booking surgery, you will need to decide who your support person will be. It is important that they are aware of the type of surgery you are having, that they are comfortable helping with incision care/are not “squeamish”, and that they are available solely to you during your immediate recovery period (they should not have any other commitments). At the minimum, you cannot be left alone for the first 24 hours after surgery; however, you will also need help with personal care/hygiene, meals, household chores, childcare, etc. for several days. We advise against driving until after you are seen in office postoperatively, as you cannot drive while taking pain medication and may be uncomfortable holding your arms up for long periods of time.

After a surgical date has been confirmed, you will receive more specific information and a review of what you are required to complete before surgery. If you live out of town, we strongly recommend making arrangements to stay in Victoria overnight after your procedure. There are a few nearby hotels that offer discounts to our patients; they are listed on our website.

Once you have booked your date, please ensure you have the following supplies on hand:

- Stool softener (i.e. Colace or Senokot), as pain medication may cause constipation
- Tylenol Extra Strength
- Ibuprofen 400mg

DAY OF SURGERY

Breast surgery is performed under a general anesthetic so you will be asked to fast after midnight the night before. You must be discharged from the clinic with a responsible adult (preferably the person who will be helping care for you after surgery). A prescription for pain medication will be provided if needed. Arrival time for surgery will not be provided to you until about 1-2 weeks prior, so it is important that both you and your support person do not have any other responsibilities that day.

POST-OPERATIVE & LONG-TERM FOLLOW-UP

You can expect mild to moderate bruising and swelling post-operatively, peaking at around 72 hours and slowly resolving over the first couple of weeks. Mild to moderate discomfort is typical. Slight breast asymmetry is quite commonly seen in the early stages of healing.

You will be discharged from our clinic with small dressings over your incisions and a supportive bra. You will also have a tape-like closure (Prineo) and/or Steri-Strips over your incisions (beneath the dressings). Gauze-type dressings are left in place for 48 hours. More specific incision care, and instructions regarding dressings and the surgical tape closure will be reviewed by our nursing staff prior to discharge from the clinic after surgery.

You will be asked to rest at home for about a week after surgery. You will be seen in the office for follow-up about one week after your surgery, and it is recommended that your support person drive you to this appointment. Our nursing staff will help with scar management to help you achieve the best possible result.

Gym and workout routine can typically be resumed at four weeks, slowly working up to full activity at six weeks. You should refrain from any strenuous lifting or strain to the upper body while you heal.

Though rare, post-operative complications from any procedure are possible. These can include infection, bleeding (hematoma), asymmetry of breast shape or size, fat necrosis, delayed healing, unsatisfactory scarring, or loss of the nipple areolar complex. Altered sensations (numbness, tingling, and/or hypersensitivity) are to be expected while you are healing, and can persist for several weeks or months. Our health care team follows you closely to recognize and treat any complications, should they arise.

As with any surgery, results cannot be guaranteed. The goal of cosmetic plastic surgery is improvement, and perfection is not attainable. Final results depend on many factors and healing can vary from patient to patient. It is important to remember to have patience during convalescence to allow your body time to recuperate and settle.

You will be seen at approximately 3 months post-op by Dr. Robinson to assess your healing and the final shape of your breasts. You will be seen again at approximately 1 year. Post-operative photos may be done at this time. If revisions are required, they would be discussed, and a surgical plan set up at that time.

Call us at (250) 590-7097 if you have:

- Significant bleeding from the surgical site
- A fever over 100.4° F (38 C) within the first three days following the procedure
- Significant pain and swelling in the area that is not relieved with pain relievers
- Foul-smelling drainage from the site or increasing redness around the surgical site

In the event of an after-hours **EMERGENCY**, please call Dr. Robinson directly at the number provided by our office assistant.

Dr. Jennifer Robinson

Plastic Surgeon

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