

Mr Sudip Jiban Ghosh MBBS, MS, FRCS(Plast)  
Consultant Plastic Surgeon  
Clinical Director Burns  
Stoke Mandeville Hospital  
[www.sjgplasticsurgery.com](http://www.sjgplasticsurgery.com)

## Lejour Breast Reduction

This operation is to help control the symptoms caused by very large breasts. It may reduce breast tenderness, back pain, shoulder grooving (from bra straps), interigo (inflamed, moist skin) below the breast and breast discomfort – but only if these symptoms are actually caused by large breasts. Back pain, for example, due to other causes will not be helped.

The operation is performed under **general anaesthetic**. The anaesthetist will see you before your operation. Discuss any queries you have about the anaesthetic with your anaesthetist. If you have had any difficulties during a general anaesthetic in the past make sure that both the anaesthetist and the ward doctor know about it. On the evening after your general anaesthetic you will feel rather tired and sleepy and should warn your visitors not to expect you to be very good company!

During the operation we remove a large quantity of tissue from within the breast. It is not possible to do this without creating long **scars**. Your scar will go around the nipple and down the centre of the breast below the nipple. The scar down the centre of the breast below the nipple starts off wrinkled as the skin is gathered up to reduce the length of the scar. This scar takes longer than other scars to settle down. Sometimes even after a period of 6 months or more the skin is not satisfactorily flat and if this is the case you may require a small secondary operation to trim away the excess skin. The scars will never completely disappear and may even stretch (widen) as the years go by. The scars start off red. Over a period of time they will tend to fade – it will take about 18 months for this process to occur. Some people's fade better than others. If you scar badly, there will be only slight fading and you will be left with red, thickened scars that remain noticeable.

The breast starts off an exaggerated **shape** after the operation but as healing occurs and gravity takes effect, the breast will relax into a more normal shape. This process takes 3 months or more.

Removing tissue from the breast interferes with the blood and nerve supply of the nipple. This will result in an **alteration in the nipple sensation**. Some ladies find a decrease in sensation with a degree of numbness and others an increase in sensation with a degree of tenderness.

Interfering with the blood supply to the nipple may occasionally result in small areas of **breakdown of the nipple or areola**. These areas will be slow to heal but will heal leaving an area of scarring on the nipple or areola. It is possible to lose all or nearly all of the nipple and areola on one or both sides. This is a more serious complication and would require further surgery to reconstruct the nipple. Fortunately this more serious complication does not occur frequently.

Removing breast tissue damages the milk ducts of the breast. More often than not **breast feeding** is no longer possible after a breast reduction operation. You must be satisfied in your own mind that you will not want to breast feed in the future. If you are unsure about this you should delay your breast reduction operation until you have completed your family.

Sometimes the fat tissue in the breast forms hard tender lumps after surgery. This is called **fat necrosis**. These lumps usually settle on their own over a period of time (which may be several months). Occasionally further surgery is required to remove particularly troublesome areas.

Any operation can give problems with **infection or bleeding** and breast operations are no exception. Simple infections will settle on a course of antibiotics. Some infections will require treatment in theatre. If you notice increasing redness of your wound and it is painful make sure one of the doctors checks on it as soon as possible. Infections caught early are easier to settle. Bleeding after your operation can result in a collection called a haematoma. Haematomas must be drained in theatre otherwise they cause problems with the wound later on.

We try to size your breasts in proportion to your general shape but will take into account whether you prefer to be 'bigger' or 'smaller'. If you look carefully at your breasts before your operation you will notice there is some asymmetry. This is normal. After your operation it is inevitable that you will have some **asymmetry**. This is seldom noticeable to other people.

#### **WHAT TO EXPECT WHEN YOU COME BACK FROM THEATRE**

- **a drip** – this stays in until you are eating and drinking normally – usually just overnight.
- **drains** – one to each breast. These stay in until they stop draining usually about 48 hours, but may be longer, sometimes a week or more.
- **dressings** – a firm dressing will be applied to support the breast after the operation. This usually stays on until after you go home and will be removed in due course by the nurses in the dressing clinic. You may find it comfortable to wear a soft (no under wires) but supportive bra over your dressings once you are up and about. Many ladies find a sports bra or crop top comfortable.
- **heparin** – lying in bed increases the chance of your veins in your legs clotting. To counteract this you will have tiny heparin injections twice a day until you are up and about. You will also need to wear firm stockings on your legs until you go home.
- **Home** – once your drains are out, and you are up and about and feeling well enough, you will be able to go home. This is usually within a week.

#### **WHAT TO EXPECT AFTER YOU GO HOME**

At first you will feel rather **tired**, and should spend the first week or so taking it very easy. Thereafter you will be able to work up slowly to doing your usual activities. A breast reduction is a big operation which does take time to get over. Expect to feel more tired than usual for up to 3 months.

You will be able to start **driving** once you feel up to it. For most people this will take about 2 weeks. Do not drive if you are not well, alert and able to take emergency action. It is advisable to check with your insurance company before you start driving. You will, likewise, be able to start **work** again once you feel up to it, if your job involves a lot of lifting or heavy work, this will take longer. Most ladies get back to work after about a month. Liaise with your general practitioner. You should ask your general practitioner for a 'sick line' for work.

Before you leave the ward, arrangements will be made to see you in the **dressing clinic**. Any stitches needing removal will be seen to in the dressing clinic. Your wounds will be checked and your dressings changed. You will be given an **out patient clinic** appointment for about 6 weeks after your operation.