

Breast Surgery

Words to know . . .

The breast area has many parts:

- fibrous tissue
- glandular tissue
- fat
- lymph channels and nodes

Fibrous tissue anchors the breast to the chest and provides structural support for the breast.

Glandular tissue makes and secretes milk through the nipple for breastfeeding.

Fat surrounds the glandular tissue and helps determine the size and shape of the breast.

Lymph channels drain fluid from the breast. They are found throughout the breast and drain into lymph nodes in the axilla (armpit). Lymph nodes help protect the body against disease.

Muscles are behind and under the breast for support and movement.

Why do I need breast surgery?

Breast surgery is most often used to remove known tumors in the breast. Sometimes, an area of breast that is suspicious for being a tumor is taken out so that a diagnosis can be made. The 2 different types of surgery to remove breast tumors are Breast Conserving Surgery and Mastectomy.

Breast Conserving Surgery

Breast conserving surgery removes only the breast tumor and a part of the surrounding tissue. Often, your surgeon will recommend the removal of some of the lymph nodes. This is done to see if the tumor has spread to the lymph nodes.

Some types of breast conserving surgery are:

- lumpectomy
- segmental and partial mastectomy
- wedge resection

Needle or Seed Localization

Sometimes the lump or tumor cannot be felt, but only seen on mammogram or by ultrasound. In that case, it may need to be localized just before surgery usually by the radiologist. Either a wire/needle or radioactive seed is used. This is explained before you have it done.

Mastectomy Surgery

There are 2 types of mastectomy surgery:

- simple mastectomy
- modified radical mastectomy

Simple mastectomy is removal of all breast tissue. The lymph nodes and muscles remain. This surgery does not affect your arm.

Modified radical mastectomy removes all of the breast tissue and some of the lymph nodes under the arm. The muscles remain. This may cause discomfort under the arm.

What type of surgery will I have?

The type of surgery depends on:

- the size, type and location of the tumor
- the size of your breast
- your preference

Before surgery, you and your surgeon will talk about the type of surgery you need. You will get more information about the surgery you are having and be able to ask specific questions.

What happens during breast surgery?

An intravenous tube called an IV is put into a vein in your arm. This is used to give you fluids and medications.

Most women have general anesthetic which means they are asleep during the operation.

The number of incisions you have depends on the type of surgery. You may have an incision on the breast and one in the armpit.

What should I expect after breast surgery?

You will go to the recovery area after surgery. You will stay here until you are fully awake. You will them for to the Day Surgery Unit or a Nursing Unit depending on the type of surgery you had and how long you are staying in the hospital.

You will have some pain and discomfort in your incisions. The amount of pain depends on the type of breast surgery. You may feel nauseated or sick to your stomach. If you have pain, discomfort or nausea, tell your nurse. He or she will give you medication to help.

The size of the breast incision depends on how much breast tissue is removed. If the nodes under your arm are removed, you may also have an incision under your arm.

At first, the incisions will be swollen and may be bruised. The incisions will have stitches or clips and will be covered by bandages or tape. There may be some drainage or seepage.

You may have 1 or 2 tubes, called drains, in your breast or armpit. These tubes drain fluid away from the operated site into a container. It is normal for this fluid to look bloody at first. When the amount of drainage decreases, the tubes are taken out. A visiting community nurse will help you with the tubes when you are home or you may go to a Nursing Care Clinic for help.

What can I do after breast surgery?

Activity

You will be able to get out of bed the day of your surgery. Ask your nurse for help the first time you get up.

It is important to do deep breathing, coughing and circulation exercises each hour you are awake. You may place a pillow or rolled towel over your incision to support your incision and reduce pain when you deep breathe and cough.

Moving and walking:

- · Keeps your muscles strong.
- Prevents breathing problems.
- Helps move your blood around your body and prevents blood clots.
- Helps keep your bowels moving.

You may be shown special arm and hand exercises that you will need to do after surgery.

Diet

You may eat and drink a few hours after surgery. The I.V. will be removed when you are drinking well. Eat light meals for the first day and then begin your normal diet.

Hygiene and incision care

You will be able to get up, go to the bathroom and use the shower. You can shower 24 hours after surgery. It is all right to remove the bandages but keep the steri-strips on. Keep your incision clean. Carefully pat the area dry after a shower Do not soak in the tub until your incisions are fully healed. Do not put powder or cream on your incisions until they are fully healed.

When will I go home?

This will depend on the type of surgery you had. Before surgery, talk to your surgeon about how long you will be in the hospital so you can make plans.

When should I see the surgeon again?

You should have a follow-up appointment with your surgeon in 1 to 2 weeks. Call for an appointment if you have not been given one.

Your surgeon will check your breast and incision at this time.

If you have stitches, they will be removed.

You and your surgeon will talk about further follow-up after your biopsy at this appointment.

Call your surgeon if you notice:

- You have pain or discomfort that gets worse.
- You have a lot of yellow or bloody drainage from any incision.
- You have a fever greater than 38°C or 100°F.
- You have a lot of swelling around any incision.



Going Home After Breast Surgery

The amount of activity and exercise you can do depends on the type of surgery you had. Here are some general guidelines.

Activity

You can gradually resume your normal activities, as you feel comfortable. Avoid lifting anything heavy for 2 to 4 weeks. Heavy lifting is lifting more than 4 kilograms or 10 pounds. This weight is like a full grocery bag, small suitcase or small baby.

Talk to your surgeon about when you can drive, go back to work and lift something heavy.

Exercises

You need to be active at home. Walking is a good exercise. Ask your doctor when you can resume the exercise you did before surgery. You may be shown special arm exercises such as wall climbing, shoulder circling and rope turning.

The Canadian Cancer Society offers book called 'Exercises for After Breast Surgery'. Go to www.cancer.ca and type the title in the search box.

Sexual Activity

Resuming your normal sexual activity is part of getting better. Having a sexual relationship is more than intercourse. Until you feel interested in having intercourse, remember that holding and touching are important. You may find it helpful to talk about your body image and your sexuality. You may want to talk to your partner, recovery visitor, friend, doctor, nurse or social worker.

Call your doctor if you have any of these problems:

- You have pain or discomfort that gets worse.
- You have a lot of yellow or bloody drainage from any incision.
- You have a fever greater than 38°C or 100°F.
- You have a lot of swelling around any incision.