

Breast reduction surgery ^[1]

Dear Alice,

I have a breast reduction coming up soon and I wanted to know if you could explain to me how and what is done so that I could understand it better?

Answer

Dear Reader,

Breast reduction surgery (a.k.a. reduction mammoplasty) is usually performed when the size of a woman's breasts cause physical discomfort, (i.e., back pain, neck pain, skin problems, breathing difficulties) and/or affect her self-image or confidence. Breast reduction surgery removes some of the fat, glandular tissue, and skin in order to relieve these problems. Depending on the size of the areola (the pigmented area around the nipple), the areola may be surgically reduced in size in order to make the breast and areola appear proportionate to each other. Although not as common, breast reduction surgery is also occasionally performed on men.

Before surgery, photographs are usually taken of the breasts to aid the surgeon in planning for your operation. In many cases, photos are drawn or recreated to show you what you will look like after surgery. You can use this time to ask your surgeon any questions you may have about the procedure and what kind of preparation you will need before and after surgery. For example, you may want to ask what the surgery will entail, where and how many stitches will be used, how long you will be in the hospital, who should bring you home, and what kind of post-surgical care will be needed.

In the operating room, general anesthesia is given so that you are unconscious throughout the procedure. An incision is usually made around the nipple and areola, and then down underneath the breast, so that the scars are somewhat hidden by the breast's natural crease (the scars should be completely hidden by your bra or bikini top in the future). The surgeon usually tries to leave the areola and nipple attached throughout the surgery, if possible, although when large amounts of breast tissue are removed, the nipple and areola need to be detached and repositioned in a higher location on the remaining breast tissue.

Some of the side effects of this surgery may include decreased or lost sensation in the breast skin and/or nipple and areola. If the surgery required significant removal of glandular tissue, a woman may not be able to breastfeed in the future. Post-surgery, small and flexible drainage tubes are usually left in the breasts for a day or two to drain fluid that may accumulate.

Patients typically go home or stay one to two days in the hospital, and are provided with prescription painkillers and antibiotics. Complete healing from surgery, on average, takes a year. While post-surgical guidelines vary among patients (and should be discussed in detail with the surgeon), some of the following may be helpful to keep in mind:

- Avoid lifting more than five pounds for a month following surgery
- Plan to take some time off: patients typically go back to work two to four weeks following surgery
- Avoid wearing underwire bras for at least four weeks
- Ensure that you have planned for the appropriate care for your children and/or pet(s)
- Ensure that your nutritional needs are met with your diet

List adapted from the [American Society of Plastic Surgeons](#) [2].

Another option for reducing breast size is liposuction-only breast reduction, for women who only need minimal breast reduction. This technique results in minimal scar tissue, complications, and recovery time. Women who undergo this procedure typically retain the ability to breast feed and have feeling in their nipples. However, breast liposuction is not typically covered by insurance.

Your surgeon is your best resource for information about the procedure, addressing your concerns, and helping you feel prepared. If you have further concerns about breast reduction surgery you can talk to your primary health care provider. Your primary care provider can give all necessary referrals for specialists as well as answer any questions about insurance coverage. Knowledge is power, especially before an operation. Good luck!

Alice!

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