

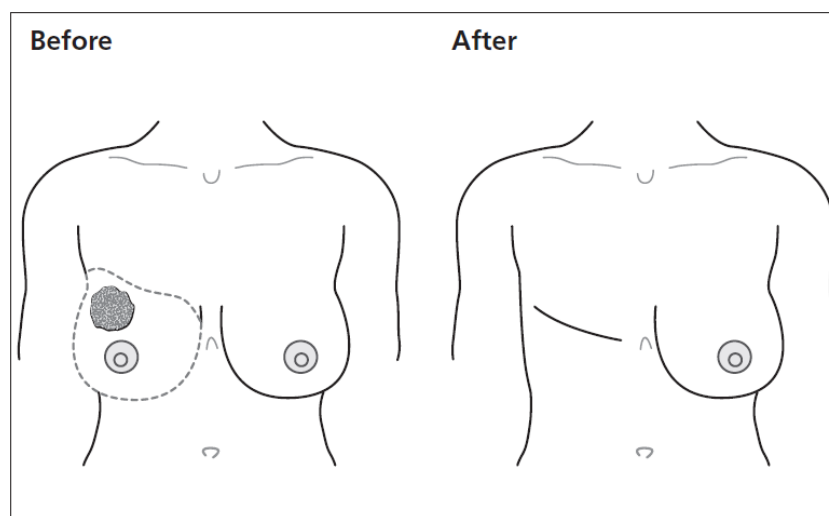
Having a mastectomy

Breast Care Centre
Information for patients

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What is a mastectomy?

This operation removes all the breast tissue, including the nipple, and leaves a scar from near the breast bone to below the armpit. A few of the lymph nodes from your armpit are often removed at the same time. Your wound will be closed with stitches or dissolvable sutures. The operation is performed under general anaesthetic and takes around 90 minutes.



During the operation, a drain to remove fluid will be placed under the wound and through the skin, connected on the outside to a bottle. This will be removed after a few days.

Breast reconstruction surgery may be possible at the same time as the mastectomy, or at a later date. Your surgeon will discuss this with you.

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals
To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk

What are the risks involved?

As with any operation, complications can occur. These can include:

- **Bleeding** - blood transfusion is occasionally required during or after this operation.
- **Bruising at the operation site.**
- **Infection** - which may require treatment with antibiotics.
- **Seroma** - this is a collection of fluid that may form around the wound area after your drain has been removed. If this happens, your nurse will arrange for you to have this fluid drawn off at intervals until it stops collecting, so that it does not become too uncomfortable. The pre-assessment nurse or breast care nurse will give you a leaflet that explains more about the seroma service.
- **Shoulder stiffness** - you may get some stiffness in your shoulder after the operation. This stiffness should get steadily better with exercise. Your nurse will tell you about appropriate exercises.
- **Deep vein thrombosis (DVT)** - following this kind of surgery there is a small risk of developing clots in your leg veins, which occasionally travel to the lungs and cause breathing difficulty (pulmonary embolus). To minimise the risk, dalteparin (blood thinning) injections may be given to you.
- **Pain and numbness** - you may have some discomfort following surgery. You will be offered painkillers to take whilst you are in hospital and you will be given a supply to take home. This should settle after a few weeks, but some numbness along the scar may remain.
- **Skin necrosis** - the skin at the edge of the wound may become black because the tissue in this area has died. You may require further surgery to remove this. Occasionally a skin graft is necessary.
- **Unsightly scarring** - this could happen if the wound becomes infected or tissue in the area has died (necrosis).
- **Haematoma** - this is a collection of blood under the wound, which sometimes needs removing with a needle. Another operation may be necessary to remove the haematoma.
- You will have time to discuss all these risks with doctors and nursing staff before you consent to your operation.

How long will I be in hospital?

This can be done as a day case procedure or you may spend at least one night in hospital. Before you go home, you will be assessed to see if it is safe for you to do so. If you have a wound drain you will go home with this in place. The ward nurse will advise you on how to care for this at home and will arrange for you to come back to the ward to have this removed.

Prosthesis

You can be fitted with a temporary breast prosthesis (a “softie”) following surgery before you are discharged home. However, if you have a wound drain, it may be more comfortable for you to have this fitted once the drain has been removed. The ward nurses will fit you with your softie.

A fitting appointment to be measured for your long lasting prosthesis can be made for you once your wound has healed. This prosthesis will be of a size and shape to match your natural figure. A leaflet explaining more about this will be given to you by the ward nurse.

Who should I contact if I have concerns about my wound?

Wound healing is usually straightforward, but the centre of the wound may be slower to heal than the outside. If your wound becomes red and inflamed, or begins to ooze, after your discharge home, please contact your GP for advice.

How will I be followed up?

All the tissue removed during the operation will have been sent for analysis. The results of this analysis, and your future treatment, will be discussed by the team of healthcare professionals looking after you. This team is called a multidisciplinary team (MDT).

You will be asked to attend the out-patient clinic a few weeks after your operation, so that we can discuss your future treatment with you

How do I contact the Breast Care Nurses (key workers)?

We are available from Monday to Friday from 9.00am to 4.00pm

Our office telephone number is **0116 250 2513**

An answer phone service is available on this number, but messages will only be listened to during our working hours.

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
على هذه المعلومات بلغة أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل

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