

Having a mastectomy (breast removal surgery)

This leaflet will explain what will happen when you come into hospital for your operation. It is important that you understand what to expect and feel able to take an active role in your treatment.

This surgery is performed under a general anaesthetic and may require you to stay in hospital overnight; however, we can consider this as a day case operation if you are fit and healthy and would like to go home the same day as the operation. Occasionally, depending on other medical conditions, you may need to stay two or three nights. This leaflet will answer some of the questions you may have.

Why am I having this surgery?

A mastectomy is an operation to remove as much breast tissue as possible (and will include loss of the nipple), in order to safely remove the cancer and a rim of normal tissue around it. It is not possible to guarantee being able to remove all of the breast tissue. This operation is normally undertaken when other types of surgery are unsuitable or, following a discussion of your treatment choices, you feel that a mastectomy is the appropriate choice for you.

Is there an alternative to surgery?

You will have discussed various treatment options with your doctor so that you can make the best decision for your individual situation. The aim of the surgery is to remove the problem area so it cannot spread or grow further.

If you choose not to have surgery for breast cancer, you may be shortening your life expectancy. If the growth is a cancerous tumour, it may grow outside the breast and spread to other parts of the body.

Are there any complications of my surgery?

Your consultant will explain any possible complications so that you are aware of these when asked to sign your consent form. Some possible complications are:

1. **Thickened scar:** Scar healing is unpredictable and although usually the scar heals as a fine line, occasionally, the scar heals in a thickened fashion called a 'keloid' or 'hypertrophic' scar. This scar may not be entirely 'flat and smooth' on the chest wall and may vary in appearance according to your body shape and size.
2. **Infection:** Following this sort of procedure, infection may occur in up to 5 in 100 patients, but if it occurs it can usually be treated with antibiotics. Occasionally however, we may need to reopen the wound, drain the infected fluid and then it may need to be packed, in which case it may take some weeks to heal.

- 3. Haematoma:** Occasionally patients can bleed after surgery, blood collects in a lump underneath the wound (known as a haematoma) and this may need to be removed, either in the clinic or by a second operation. (4% risk)
- 4. Wound pain:** Some patients experience pain, discomfort or altered sensations in or around the wound during or after the healing process. Usually these sensations will settle with painkillers but if the problem continues, we would recommend that you contact your GP. If necessary, he/she can then refer you back to see us if there is any ongoing problem.
- 5. Seroma:** This is fluid that naturally collects beneath the wound, which may require draining if there is a lot of it or it is uncomfortable. It is possible that you may require drainage on a number of occasions in the first few weeks after surgery. Your breast care nurse will discuss with you how to attend this clinic.

What happens in theatre?

You will be offered the opportunity to have a discussion with the breast care nurse prior to the date of your operation. This is to discuss the operation in more detail and discuss the psychological impact of having a mastectomy; you will also have the opportunity to see a photograph of the likely scar (if you wish to) and the different sorts of prosthesis available. Incisions will be made and all visible breast tissue will be removed. The edges of the incisions are brought together to form a scar that will appear as curved horizontal line where the breast has been removed. A drain may be inserted into the wound at the time of surgery and this will be removed before you are discharged from hospital.

The tissue will be sent to pathology for examination and a report will be produced which will give your surgeon all the pathological (tissue analysis) information. This information will help guide any further treatment you may require.

What happens after my operation?

- **Pain:** It is normal to experience some mild to moderate pain and discomfort after your operation and whilst the wound is healing. You will also find some moderate bruising around the area. You will be offered painkillers to help reduce the pain and should continue to use these as required once home.
- **Prosthesis:** If you have not already been seen by the breast care nurse during your admission, a member of the team will see you to fit you with the temporary soft prosthesis in your bra (women patients).
- **Time off work:** At home you should allow up to 4 weeks off work, although you may require longer than this, depending on the healing process and your job. Please ask staff if you require a 'fit note' for work and this will be given to you before you leave hospital. If you require a longer time off work than is indicated on the certificate, your GP can provide you with an additional certificate.
- **Resuming normal activities:** You should rest for 7 days after surgery, limiting your arm movement on the side of your surgery to reading, eating, drinking and getting dressed.

You should not start the exercises until after the first week. Once the exercises are started you can stretch frequently at first to recover and maintain strength and mobility in your arm and to soften scar tissue. You should also allow up to 4 weeks before driving and only when you can safely perform an emergency stop. You should be able to gradually resume normal household activities between 2-4 weeks after surgery when you feel well enough. Avoid heavy lifting, including hoovering and carrying shopping. You will be given an exercise sheet and encouraged to perform the exercises at least three times per day. If you have ongoing problems with shoulder or arm stiffness, we will refer you to a physiotherapist.

Wound care

When you come back from the operating theatre your wound will be covered with a dressing to keep it clean. The ward nurse will give you instructions on when you are able to shower. If there is any swelling or discharge from the wound when you are at home, please contact your breast care nurse for advice or attend the Seroma Clinic. Your stitches are dissolvable.

If you have any emergency concerns out of hours, please telephone the Surgical Assessment Unit (SAU) – number at the end of this leaflet.

When will I be discharged?

If day case, later the same day as surgery. Some patients will remain in hospital for one night. Very occasionally, you may need to stay an extra night if we need to monitor the drainage from your wound for longer. It is essential that you have someone who can collect you and drive you home. You will need someone at home with you for at least the first 24 hours if you have had a day case operation. It is advisable that you have someone with you at home who can offer support for a minimum of one or two days after surgery.

Follow-up treatment

You will be given an outpatient appointment to see your consultant 14-28 days after surgery. You may need to attend an appointment before this to have the dressing removed and wound checked. The results from your operation will be discussed together with any concerns you may have. This appointment may be in the Berkshire Cancer Centre on a Tuesday morning or at your surgeon's clinic elsewhere. The appointments will be arranged and communicated to you beforehand. It may be helpful to bring a relative or friend with you to discuss the results and any additional treatment you may require.

You will be seen by a member of the surgical team to check your wound and explain the surgical findings to you and other treatments that may be needed. If other treatments are needed it will then be necessary for you to see a member of the oncology (cancer specialist) team to discuss whether you require any further treatments. An appointment will be made for you at a later date.

A WRVS tea bar is available in the Berkshire Cancer Centre and you are welcome to eat and drink normally while you wait.

Useful contact details

Hopkins Ward 0118 322 7771

Pre-operative Assessment Clinic 0118 322 8532

Breast Care Nurses 0118 322 7420 breastcarenurses@royalberkshire.nhs.uk

Surgical Assessment Unit 0118 322 7541 or 7542

Patient Advice and Liaison Service 0118 322 8338 PALS@royalberkshire.nhs.uk

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

Breast Unit, March 2022

Next review due: March 2024