

Surgical Division

After Breast Surgery

Wound

Your wound has dissolvable stitches or sometimes clips which will need removing. It is normal for the area underneath the wound to feel thickened and firm for a few weeks. Bruising is common and will disappear in time. Sometimes you may experience numbness and/or pins and needles due to nerve trauma which should improve over time.

Your dressing should stay in place until you are called back to a clinic by your breast care nurse.

Possible problems:

- Redness around the wound site may be a sign of infection, any swelling, extensive bruising
- Any leakage in particular blood soaked dressings
- Increased pain despite taking regular paracetamol
- Fever

If any of these symptoms occur please contact your Breast Care Nurse, the ward or your GP for advice. Contact the ward within the first 48 hours, following this, contact the breast care nurse team.

Seromas

A seroma is a collection of fluid behind the wound which can often feel like a balloon filled with water or a golf/tennis ball under your armpit. They are fairly common and nothing to worry about and can present in the first few weeks after the drain has been removed after surgery. They can feel very uncomfortable. If you think you have a seroma do not panic. Only do gentle arm exercises and take regular painkillers, and phone your Breast Care Nurse for advice. Sometimes we can remove some of the fluid in a simple painless procedure. Rest flat on your bed (no pillows) for one hour am and pm.

Drains

If you are discharged with a drain still in place, the ward will arrange for it to be measured and emptied daily. It will be removed wh en it drains 50mls or less in a 24 hour period, or 5 days after surgery unless otherwise instructed. Reconstruction drains will be removed by the surgeon.

Pain

It is normal to have some discomfort which will gradually settle over a few weeks. Take painkillers if required ensuring that you do not exceed the recommended dose. Sometimes the arm, breast or chest wall will tingle and feel tight and/or numb, the breast bone and ribs can also feel tender. Sometimes this is more noticeable 2-4 weeks after surgery. Don't worry if that happens it is normal. If your pain/discomfort does not improve seek advice from your Breast Care Nurse or GP.



Showers/Baths

You may have a bath or shower, but do so carefully and keep the wound dressing dry. Avoid perfumed toiletries for 2-4 weeks whilst your wound is healing. You may use deodorant if your wound does not involve the armpit (if it does avoid for 2 weeks). Initially use a roll-on so you can be precise in application.

Wearing a bra

You should wear a good supportive bra with adjustable straps to help support the breast tissue following surgery. You may wear a bra when you feel comfortable. Sometimes you will be most comfortable with one of your older "well worn" bras, a vest style top with secret support, or a soft front fastening bra. The ward staff and/or your Breast Care Nurse will endeavour to help you feel comfortable and look good in a bra after your operation.

Lymphoedema

If you have had any lymph nodes removed there are simple things you can do to avoid lymphoedema:

- Avoid blood tests or blood pressure monitoring on the arm that the lymph nodes were removed.
- To remove underarm hair use an electric shaver, avoid razors (which may cut) or depilatory cream (which can cause allergic reactions).
- Wear washing up gloves when washing up.
- Wear gardening gloves when gardening.
- Try and get into the habit of wearing a shoulder bag on the opposite side to surgery.
- Perform daily skincare with unperfumed moisturising cream as demonstrated by the ward or Breast Care Nurse. Apply any creams with an upward motion towards the armpit/shoulder.
- Report any problems with swelling of the arm to your Breast Care Nurse.

After axillary surgery

- Maintain normal arm movement throughout your recovery. You should have been provided with specific advice and information regarding arm exercises and it is important to follow the exercise programme until you can move your arm as well as you could before your operation.
- Avoid heavy lifting and repetitive arm movements such as ironing and vacumning with the operated arm for the first 4-6 weeks.
- Avoid walking large or unpredictable dogs on a lead-they could pull your arm!

Driving

You will be able to drive when you have regained full arm movement and feel capable of controlling your car in an emergency situation. This is usually between 2 and 6 weeks. Please check with your insurance company if you are concerned.

Going back to work

The amount of time off will depend on your occupation and any further treatment you may require, initially it should be 2-3 weeks. Please seek advice from the nursing staff prior to discharge, or from your GP. Fitness to work certificates may be obtained from the medical staff prior to discharge or from your GP.

If you have any problems or concerns please contact your Breast Care Nurse or the ward.

Day Surgery Unit: 01484 342111

The Breast Care Nursing Team: 01422 222711

If you have any comments about this leaflet or the service you have received you can contact :

Macmillan Clinical Nurse Specialist Breast Care The Macmillan Unit Calderdale Royal Hospital Salterhebble Halifax HX3 0PW

Telephone No: 01422 222711

www.cht.nhs.uk

If you would like this information in another format or language contact the above.

Potřebujete-li tyto informace v jiném formátu nebo jazyce, obraťte se prosím na výše uvedené oddělení

Jeżeli są Państwo zainteresowani otrzymaniem tych informacji w innym formacie lub wersji językowej, prosimy skontaktować się z nami, korzystając z ww. danych kontaktowych

ਰ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਪ੍ਰਾਰੂਪ ਜਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਲੈਣਾ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਉਪਰੋਕਤ ਵਿਭਾਗ ਵਿੱਚ ਸਾਡੇ ਨਾਲ ਸੰਪਰਕ ਕਰੋ।

اگر آپ کو سے معلومات کسری اور فارم میٹ بی زبان می درکار ہوں، تو بر ائے مہربازی مندر جہ بالا شعبے میں ہم سے رابطہ کری.

"إذا احتجت الحصول على هذه المعلومة بشكل مغاير أو مترجمة إلى لغة مختلفة فيرجى منك الاتصال بالقسم المذكور أعلاه"

