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The evidence used in the preparation of this leaflet is available on request. Please email: patient.information@ salisbury.nhs.uk if you would like a reference list.

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Breast Augmentation (page 1 of 4)

We hope you will find this leaflet helpful before you come into hospital.

Breasts can vary in size due to changes in body weight, pregnancy and breast-feeding. As women age, the shape of their breasts change, so that they gradually droop (this is called ptosis). This effect is greater following pregnancy, breast feeding and particularly after a large weight loss.

Most women have breasts of slightly different sizes, but occasionally a very marked difference may develop. Breast augmentation is one of the ways of correcting this. There are other ways but you need to talk to your consultant about this.

Benefits of the operation

The psychological benefit of having breast augmentation is an increase of confidence through self-image. The physical benefit is that the breasts are more similar in size and shape.

The operation

Breasts can be made larger by placing an implant either under the breast tissue or behind the muscle on which the breast lies. Implants are usually inserted through incisions in the crease beneath the breast. Often a tissue sling is also placed to support the implant.

Breast Implants

A breast implant is made of an outer layer of silicone or polyurethane, filled with either silicone gel or salt water. Your consultant will discuss the options with you.

Some implants are round and others are shaped more like a natural breast. Either can give excellent results.

The life expectancy of breast implants is as yet unknown but an average is 10 - 15 years.

Safety of silicone

Many studies have been conducted to establish whether silicone breast implants cause certain diseases. As a result of these studies the Government Independent Review Group say at present there is no evidence to suggest that breast implants are associated with an increased risk of breast cancer or autoimmune diseases such as rheumatoid arthritis.

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Complications

- Rupture of the implant leakage of the silicone can occur. This silicone is almost always contained within the fibrous capsule, which the body forms around the implant. Silicone leakage has never conclusively been linked to serious health problems.
- **Infection** any infection that may occur in the tissue around the implant can usually be treated with antibiotics. Occasionally the implant must be removed; it can be replaced 6 months later.
- **Bleeding** blood can sometimes collect around the implant. Small amounts of blood usually cause no problems and will disappear without treatment. Larger amounts may need another operation.
- Capsular contraction in a few patients (1 in 10) at around 6 or more months after surgery, the layer of tissue that is formed around the implant sometimes shrinks and thickens. This can cause pain or the breast can feel hard. Treatment may be needed. Sometimes the implant will have to be removed. This does not often happen with newer designs of implants. Do not wear under-wire bras for about 8 weeks after the surgery.
- Shape most women have some unevenness between their breast sizes. Breast
 augmentation may occasionally exaggerate this difference. We can never be sure about
 the shape and size of the breast after surgery. All breasts change shape as the woman
 ages, the weight of the implant may have an affect on this. It is not always possible to
 create a cleavage.
 - Movement of the fluid which fills the implant may occasionally be seen through the skin; this is more likely in the saline (salt water) filled implants, and less likely in the silicone implants, which also have a more natural feel.
- Scars breast augmentation will always leave scars on the breast, and although these will settle over 12 months, the appearance of the scars varies between women. The surgeon tries very hard to keep any scars as small and invisible as possible, making sure they are in a certain position, so that they are not seen when a swimming costume is worn.
- **Sensation** there is normally a difference in skin and nipple sensation following breast augmentation. A breast that has an underlying implant will not necessarily feel like a normal breast and some women may be aware of the implant within the breast.
- **Breast-feeding** breast augmentation does not usually interfere with breast-feeding and there is no evidence that any silicone is found in breast milk.
- **Breast cancer** the presence of breast implants interferes with mammography, (X-ray screening method for breast cancer). Special X-rays can be taken to minimise this.
- Deep vein thrombosis (Venous Thromboembolism VTE) This is caused by a blood clot forming in the leg veins. To help prevent this you will be encouraged to be up and about as soon as possible after the operation. Blood clots are a serious complication and if a clot breaks away from the vein in the leg it can travel to the lungs and cause a pulmonary embolism which can be fatal. To help prevent this happening you may be

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given a small injection of a blood thinning medicine every day. This makes your blood take slightly longer than normal to clot which reduces the risk of a blood clot forming.

Pre-assessment Clinic

You will usually be asked to go to the pre-assessment clinic before your operation. Here a nurse will talk through the operation with you, fill in any forms needed and make sure that you have had all the tests you need.

Day of admission

Please bring a good supporting bra with you. We recommend a Marielle bra or equivalent. You will need to wear this day and night for the first 6 weeks after your operation.

You will be asked to come to the Surgical Admissions Lounge where you will be seen by a doctor who will ask you to sign the consent form. You will go to theatre from here.

After your operation

- You will be offered regular painkillers to ensure that you are as comfortable as possible.
 You will be asked to score your pain on a scale of 0-10. You can have medication if you are feeling sick.
- You may have a drip in your arm. This is to help to keep you hydrated until you are able
 to drink normally. Usually your drip is taken down on the first day after your operation as
 soon as you are eating and drinking normally.
- You will have one soft plastic tube in each breast. These are attached to plastic bottles and called drains. They are there to remove the excess fluid from the operation site. These will stay in until there is minimal drainage usually for 2 4 days, then they are taken out.
- There will be two small dressings, one under each breast. It is important that you wear
 a support garment or a sports bra, as it will make you feel more comfortable and help
 improve the shape of your breasts.
- The day after your operation you will be able to sit in a chair for as long as you want. The
 nurses will help you with your personal hygiene if required. From then on you can be up
 and about, gradually doing more for yourself.

Discharge home

When the doctors are pleased with your progress and your drains have been removed you will be discharged home. The average length of stay is 2 to 4 days.

Appointments. You will need an outpatient appointment at Salisbury District Hospital approximately one week after your discharge from hospital. This will be given to you when you leave.

If you live a long distance from Salisbury, your first appointment has to be at Salisbury District Hospital. Any subsequent appointments can be closer to home. Isle of Wight patients may go to the Consultant Clinic or the Outpatients Department at St Mary's hospital.

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Dressings. The small dressings under your breasts will be changed before you go home. It is important that you wear a support garment night and day for at least 6 weeks.

Lifting. It is important that you do not lift heavy objects nor do any stretching for about 6 weeks, as this could be harmful to the scars under your breasts.

Driving. It is advisable to wait until you feel well enough before you start to drive again and are able to perform an emergency stop without pain. This could take up to 4 weeks. You are not exempt from wearing a seat belt. Contact your insurance company if you have any doubts.

Discharge summary. The doctors will write a summary of your operation and this will be sent to your GP. You will be given a copy of this. The nurse who is discharging you home will tell you about any medicines that you need to take home with you.

Fitness to Work Note (previously known as a Medical Certificate). Please ask the nurses if you need one of these.

Bra fitting. Approximately 3 weeks after your operation you will need to get yourself properly measured for a bra.

If you have any worries or questions, please contact the Burns and Plastic ward or the Plastics Outpatients Department. There is always someone available to offer advice.

National Implant Registry

All implants can now be registered so that patients can be recalled if there is a problem. Either in the outpatient clinic or at the pre-assessment clinic you will be asked to read an information leaflet about this. The nurse will take written consent from you if you agree to your details being included in the register. Recording your details is not compulsory and you do not have to do this if you would rather not.

We wish you a speedy recovery and thank you for taking the time to read this leaflet.
Use this space to note down any questions you may want to ask:

Plastic Surgery Outpatients 01722 336262 ext 3254

Plastics and Burns Unit 01722 336262 ext 3507