

Male Breast Reduction
(*Gynaecomastia Excision*)

General information

Gynaecomastia (male breasts) is a common problem. In most cases the problem develops during the teenage or early adult years, although it can also develop in older adult men. Sometimes it corrects itself but when this does not happen no amount of exercise will flatten the 'breasts'. It can be caused by drugs, medication or hormone imbalance; however, usually there is no specific cause for it. In such cases, surgery is the only effective treatment.

The technique used for correction of gynaecomastia depends on the severity of the problem. The majority of patients require liposuction alone or liposuction with a small excision of the 'breast' tissue, with a short scar around the nipple. Less commonly, a more extensive excision is required with scarring across the chest and this may require removal of the nipple and placing it back as a graft.

Preparation for surgery

Smoking can cause problems with wound healing and increase your risk of a chest infection following general anaesthetic. You must not smoke for at least four weeks before your operation and for four weeks after it.

Please, only take medication prescribed by your doctor for the two weeks before and two weeks after your operation. In particular, herbal, homeopathic and nutritional supplements (including vitamin E capsules) may contain substances that increase your risk of bleeding and cause sun sensitivity.

Aspirin, and other non-steroidal anti-inflammatory drugs (NSAIDs) increase your risk of bleeding. You should avoid all such medicines for two weeks before and two weeks after your operation. If you are concerned, please check with your GP that it is safe to do so. In certain specific

circumstances, you may be prescribed a NSAID for your post-operative pain, which you should take as directed.

If you drink alcohol, it is best to drink only a small amount for the week before the operation and for the first two weeks of your recovery. You should avoid it altogether if you are taking antibiotics or strong pain medication.

Your recovery after the operation will be easier if you are fit and maintain a healthy lifestyle. Regular exercise will help you cope with the operation better.

If you feel unwell leading up to your operation please inform our secretary, as it may be best to reschedule your operation for when you are well.

The operation

Please come for your operation in loose-fitting clothing that can be easily and comfortably removed. Slip-on shoes are best, as bending over may be uncomfortable. Rings, ear-rings and body-piercings should be removed at home. Bring your normal medication with you and a sufficient supply for the duration of your anticipated stay in hospital. Someone should accompany you to the hospital and home when you leave hospital.

The operation is performed under general anaesthesia (asleep). You should expect to be in hospital for one to two nights. You may have one drain in each side of your chest. Getting up and about after the operation is important although it may be painful to start with. You should try to do this as soon as possible.

Care after your surgery

You will be given a tightly fitting garment to wear for a few weeks after your surgery. You should wear this as instructed.

The incisions will be closed with dissolving stitches and protected with a padded dressing. If you have drains, keep the wounds dry while they are in place. You may start to shower your chest after removal of your drains, unless specifically advised not to, but do not soak in a bath. Dry the area with great care, patting it gently with a towel. The dressing should be changed at least every other day, but can be changed more often if necessary. Once the scars are entirely dry, and no longer staining the dressing, you can stop covering them. However, you may prefer to keep the scars covered until you are no longer wearing the garment.

After two weeks, provided that your scars have healed and are dry, start to moisturise and massage your chest paying particular attention to the scars. Use any plain skin moisturiser (which can contain vitamin E if you wish) and rub the cream in with a gentle massaging motion for 5-10 minutes, three times a day.

All scars should be protected from the sun for the first year after surgery. Ideally they should be covered with clothing. If this is not practical, then total sun block should be used and the area shaded from the sun. Sun exposure of a fresh scar can cause permanent discolouration, resulting in a darkened, visible scar.

You should avoid becoming constipated after your surgery. If you are prone to this then you must take a stool softener during your recovery.

What to expect after your surgery

Your scar will depend on which technique was used to correct your gynaecomastia. Liposuction alone will leave you with two very small scars on each side of your chest. Liposuction with a standard excision will leave you with an additional scar running half-way around the nipple. If an extended excision is to be performed your

nipple scar will extend onto your chest skin. If your nipple has been replaced as a graft, then you will have a scar all the way around it. The scars are usually red and slightly raised during the early period of healing. It takes a few months for the scars to settle fully and massage can aid this process, once it is comfortable enough to do so. Your chest may feel numb, including the nipples but this will gradually improve over several months, although full sensation may not return. During this time you must avoid contact with hot things, such as a hot water bottle, as there is a risk of being burned. Some swelling is normal during the first few weeks. Your chest may feel a little tight at first and you will experience some pain and discomfort. This settles in the first few weeks after surgery. Please take your pain medication as directed until you are able to move about comfortably. Breathing may be sore but it is important you take regular deep breaths and cough frequently to avoid a chest infection post-operatively.

A follow-up appointment will be arranged for you when you leave hospital.

Driving and activity

All heavy and strenuous activity should be avoided for the first few weeks after your surgery. Graduated activity and exercise can then be started with full, unrestricted activity after twelve weeks, as your comfort allows. You will be able to start driving again when you feel comfortable and are safe doing so. This is usually between two and four weeks. Some car insurance companies have guidelines for driving after surgery and it is always best to check with your own company whether there are any restrictions imposed on you.

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Complications

Although complications are uncommon, problems may occur as a result of your surgery. These can result in prolonged recovery but may also have an adverse effect on your final result. These include poor scarring, bleeding, infection, delayed healing, wound breakdown, fluid collection, incomplete flattening of the 'breast', lumpiness in the chest, persistent numbness (including the nipple) or pain, and asymmetry. Further surgery may be necessary to correct some of these, should they occur. A charge may have to be made for any additional treatment. There is also a small risk of developing a venous thrombosis (DVT), although measures are taken to minimise this risk.

Additional comments

If you have any questions about the information contained in this leaflet or you do not understand something that is included in it, please contact our secretary for clarification.

If you are concerned about your recovery, have bleeding, feel unwell or have increasing pain then please contact Clare Park Hospital where your surgery was performed, our secretary (during office hours), your local A+E Department, or your GP.

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