# MARK E. GOLD MD FACS Plastic Surgery

Board Certified: **American Board of Plastic Surgery** 

Member: American Society of Plastic Surgeons The American College of Surgeons

## **Breast Reduction**



Excessively large breasts can produce many functional problems. Many patients complain of neck and back discomfort, deep grooving of their shoulders from brastraps, a heavy pulling discomfort on the chest, inability to wear many types of clothing, especially without

a bra), and sometimes even rash or skin problems beneath the breasts.

Large breasts also prevent some patients from participating in exercise or athletic activities, and can make breast self-examination and even mammograms more difficult.

#### **What Breast Reduction Does**

Breast reduction procedures improve functional problems of excess breast size by:

- Reducing the excess size and weight of the breasts, and removing excess breast tissue from within the breasts.
- Tailoring the lower skin envelope of the breasts to reposition the breast mound upward to a more normal position.
- Repositioning the nipple-areola complex upward onto the newly shaped and positioned breast mound.

Most patients experience a dramatic improvement in their symptoms soon after reduction mammaplasty, and are able to wear many types of clothing for the first time. In addition, they can often participate in many activities that they were unable or unwilling to do before.

#### Limitations

In order to remove excess skin from the breasts and reposition the breast mound, incisions must be made in the lower part of the breasts. These incisions produce scars, which are visible, but improve significantly over 6-12 months. The scars are usually located around the nipple, from the lower center of the areola to the fold beneath the breast, and across the fold beneath the breast. The extent and location of the scars depends to some degree on the size and shape of your breasts, and the procedure necessary to correct them.

Differences always exist between your two breasts—they are different sizes, and the nipple locations are also different. After a breast lift, these differences will be less, but will always exist to some degree.

In order to reposition the nipple up the new breast mound, some of its attachments must be detached. In massive breasts, the nipple may have to be detached and reattached at the end of the procedure. Most patients experience return of sensation in a few months, but some loss of sensation following breast reduction may occur.

### **Nursing After Reduction**

Breast tissue is removed during a breast reduction. The ducts that carry the breast milk to the nipple may also be disrupted.

For this reason, the ability to nurse after a reduction may be decreased. Most patients however, have nursed successfully after reduction.

#### Risks

Other risks common to all surgical procedures such as bleeding, infection and scar tissue formation occur in a very small percentage of cases. We encourage you to discuss any concerns that you may have, during your consultation.

#### The Operation

Prior to your breast reduction, Dr. Gold will make several measurements and mark specific areas of your breasts with you sitting or standing. These markings are precise guidelines, which are used when your breast is distorted or shifted while you lay down. Dr. Gold will also refer to your preoperative pictures during surgery to assure the best possible result.

During the reduction procedure, the stalk of tissue carrying the nipple is designed and prepared, and the excess loose skin (mostly in the lower portions of the breast) is then removed. Excess glandular or milk producing breast tissue is removed.

To reposition the breast mound upward, the skin of the lower portion of the breast is tightened, tailored, and then sutured closed. The nipple-areola complex is repositioned upward onto the proper position on the new mound and sutured in place.

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Dr. Gold precisely weighs the amounts of tissue removed, sits you up on the operating table, places temporary stitches and carefully compares your breasts to assure as much symmetry as possible before closure.

#### Recovery

All of your incisions will be closed with stitches placed beneath the skin, there's no chance of you having "railroad track" type marks but rather very fine line scars. You'll be able to shower or bathe immediately.

Following breast reduction procedures, most patients have very little pain, but rather experience nuisances such as tightness or fullness.

Your breasts may feel tight to you for 48-72 hours, and the tightness will gradually resolve over the next several days as the swelling decreases. You may develop slight bruising on the sides, which will resolve in about a week.

#### The Stages Of Recovery

Our patients usually want to know about four stages of recovery:

**Surgery:** Breast Reduction is usually performed as a day surgery procedure. Dr. Gold has a fully accredited surgical suite in his office for your convenience.

Bruising and swelling resolve: 10-14 days. Return to work, social activity: 5-10 days. Aerobic or strenuous activity: 14-21 days.

We encourage returning to full normal activity immediately. Don't do any type of strenuous exercise that would push your pulse over 100 for about two to three weeks. Any aerobic activity that increases your pulse over 100 also increases your blood pressure, and could make you bleed.