PATIENT & CAREGIVER EDUCATION

Breast Reconstruction Using a Tissue Expander

This information will help you learn how to care for yourself after your breast reconstruction surgery using a tissue expander and will help you prepare for the tissue expander process.

This resource is meant to supplement, not replace, discussions with your doctors and nurses. Some of the information may not apply to you. Be sure to ask your plastic surgeon or nurse if you have any questions.

About Breast Reconstruction Using a Tissue Expander and Implant

After your mastectomy, you will have a breast reconstruction surgery using a tissue expander. In this type of reconstruction, your plastic surgeon will make a pocket under a large muscle in your chest and place a tissue expander in that space. A tissue expander is an empty breast implant that will be filled with normal saline over 6 to 8 weeks. This process slowly stretches your skin and pectoralis muscle (large muscle in your chest). When your expander reaches the size your surgeon and you agree upon, we will stop the expansion process.
About 4 to 8 weeks after the tissue expansion is finished, you will have a second surgery to remove the tissue expander and insert the permanent breast implant. If you will be having chemotherapy or radiation therapy, your doctor will tell you when your implant will be placed.

Some people also want to have nipple and areola (brown or pink circle around your nipple) reconstruction. If you decide to have nipple reconstruction, you can have about 2 to 4 months after the permanent breast implant is placed.

**What to Expect After Your Surgery**

After your surgery, you will wake up in the Post-Anesthesia Care Unit (PACU) or your recovery room. You will have:

- An intravenous (IV) line. You will receive fluids, antibiotics, and pain medication through the IV.

- Small plastic drains, called Jackson-Pratt® (JP drain) drains, below or near each incision (surgical cut). They collect the fluid that normally develops around the incisions after surgery. The drains are secured with a suture (stitch) and usually remain in place for 1 to 2 weeks after surgery.

**Jackson-Pratt drain(s)**

Your nurses and nursing assistants will care for your Jackson-Pratt drains while you’re in the hospital. Many people go home with drains in place. If you go home with drains in place, your nurses will teach you how to care for them and give you a resource called *Caring for Your Jackson-Pratt Drainage*
System. You can also watch a video that shows you how to care for your drains:

Please visit [www.mskcc.org/pe/jackson_pratt](http://www.mskcc.org/pe/jackson_pratt) to watch this video.

### About your incision sites

#### Pain and sensations

You will have some discomfort after your surgery. You may have a stinging sensation along your incision and your drain site(s) may itch. You may also notice some tenderness along your lower ribcage. These sensations will gradually get better. You can take pain medication when you need it. Be sure to ask your doctor or nurse for it so you will be as comfortable and active as possible.

Other common sensations you may experience after your surgery include:

- Numbness under your arm and over your chest on the affected side (side of your surgery).
- Warmth in your arm on the affected side.
- A feeling of water trickling down your arm on the affected side.

These sensations are caused by nerves being cut or moved during surgery. They will gradually get better over time, but some amount of numbness may be permanent.
Incisions

After your surgery, you will have a gauze dressing over your mastectomy incision. The dressing will be held in place by either clear tape or a surgical bra.

The incision across your breast mound will be closed with sutures (stitches). These sutures will dissolve and don’t need to be removed. You may see some redness and slight bloodstains on the gauze pad covering your incision. You may also feel tenderness around it. These are normal signs after surgery.

At first, the size of your reconstructed breast will be much smaller than your other breast. This is because the tissue expander is not completely filled when it is inserted. Before you go home and with your nurse present, we would like you to gently touch your new breast mound. You may be able to feel the port that is used to fill the tissue expander under your skin.

Caring for Yourself at Home

When you leave the hospital, your incision will be covered with a gauze pad. Continue to wear the surgical bra 24 hours a day until your doctor gives you other instructions.

Showering

Do not shower or wet your dressing for the first 48 hours after your surgery. Your surgeon will let you know about how you should shower after the first 48 hours. You may be able to take a full shower or you may need to shower only from your waist down.
Your drains will be removed 1 to 2 weeks after your surgery. You may take a full shower 48 hours after your drains are removed. After the drains are removed, some fluid may continue to leak from the drain sites. Cover the area with a sterile gauze pad or Primapore™ dressing that your nurse gave you and change it if it becomes damp. This drainage is normal and can be expected for 24 to 48 hours. By that time, the drain sites are usually healed.

Once your drain site(s) is healed, take a shower every day to help keep your incision clean. Before entering the shower, remove your bra and the gauze pad covering your incision. Check the temperature of the water first with your back or hand because numbness may prevent you from detecting heat in the affected area.

Wash with lukewarm water and gentle, fragrance-free soap. Gently clean your upper incisions and drain sites and rinse well. Don’t scrub your incisions. The shower stream should be directed at your upper back or your arm and run softly over your reconstructed breast. Pat your incisions dry with a clean towel. Don’t rub them.

After your shower, inspect your incisions and drain site(s) carefully. To do this, stand in front of a mirror in a room with good lighting. Call your plastic surgeon or nurse if you notice any of the following:

- Increased redness of your breast
- Increased swelling of your breast
- New drainage from your incision
- A temperature of 101° F (38.3° C) or higher

When you have finished the inspection, place a clean gauze pad over your incision and put on your bra.

Don’t take tub baths until your incisions and drain sites are fully healed because soaking may increase the risk of infection. Most people can take tub baths about 6 to 8 weeks after your surgery, but speak with your doctor before you do.

Only use an electric razor to shave under your arm on the affected side. This is to prevent getting a cut, which you may not feel due to numbness. A cut could lead to an infection.

Don’t use deodorant until after you have put your bra on. This will prevent the deodorant from getting on your incision and causing an infection. Don’t use deodorant on the side of your surgery if there is any break in the skin there.

**First Follow-up Appointment**

Your first follow-up appointment after your surgery will be 1 to 2 weeks after your surgery. Call your plastic surgeon’s office to make the appointment once you’ve been discharged from the hospital.

**JP drain removal**

During this appointment, your plastic surgeon and nurse will
examine your breast incision to make sure it is healing well. If you went home with a JP drain(s), your doctor or nurse will remove it if the amount of drainage is less than 30 mL (1 fluid ounce) in 24 hours, per drain. Most people describe the drain removal as a slight pulling or stinging sensation that lasts only a few minutes. You will not need to take pain medication for the drain removal process.

After the drain(s) is removed, continue to wear the surgical bra or you can wear your own supportive bra. It should:

- Be comfortable.
- Not be too tight.
- Not have an underwire.

**What to Expect During Tissue Expansion**

During your second office visit, you will have your first tissue expansion. Your nurse will inject normal saline into the tissue expander through the port using a small needle. Each expansion appointment takes about 20 minutes.

After the tissue expansion, you may feel some tightness and fullness in your breast area and some discomfort in your shoulder or back. This usually gets better within a few days.

After each expansion, your reconstructed breast will become larger. However, the breast will not take its final form until the permanent implant is inserted.
Ways to be more comfortable between tissue expansions

Between tissue expansions, here are some things you can do to increase your comfort:

- Take warm showers.
- Take over-the-counter pain medications, such as acetaminophen (Tylenol®) or ibuprofen (Advil®).
- Apply a fragrance-free moisturizer (e.g., Eucerin®, Lubriderm®) to your breast skin. Do not put the moisturizer directly on your incision for 6 weeks after your surgery.
- Do the upper arm stretches and other exercises as instructed in the *Exercises After Breast Surgery* resource your nurse gave you.
- Wear soft, supportive bras. Do not wear underwire bras.

Daily activities

After each tissue expansion, you should continue your normal activities. You can return to work or do light housekeeping a few hours later. You can also drive when you have full range of motion in your shoulder on your affected side and are not taking any prescription pain medication. However, follow the restrictions on physical activity below:

- Avoid vigorous exercise unless approved by your doctor. For example, do not jog, jump, or run.
- Do not lift any objects heavier than 5 pounds (2.27 kilograms) with your affected arm for 6 weeks after your
surgery. Please check with your breast surgeon if you have had a large number of lymph nodes removed because your lifetime lifting restrictions may be different.

- If your job involves lifting 10 pounds (4.5 kilograms) or more, you may need to change your work schedule until it is safe for you to lift heavy weights.
- Don’t do any type of exercise that will tighten or bulk your chest muscles.
- When travelling a long distance by car, pad your seat belt if it falls directly over the tissue expander. Do not avoid wearing a seat belt.

Other precautions while the tissue expander is in place

- **You cannot have magnetic resonance imaging (MRI).** You can have other imaging tests, such as a bone scan, computed tomography (CT) scan, or x-rays.
- Do not soak in a pool, bath tub, hot tub, until approved by your doctor or nurse. This is to decrease the risk of irritation or infection at your incision.
- Your surgical sites may have less feeling. **Do not put a heating pad or hot or cold compress on them.** This is to prevent burn or damage to your skin.
- The tissue expander may set off airport security devices. Tell your doctor or nurse if you plan to travel; you will be given a letter to take with you.
Clothing tips

Your tissue expander will be over-expanded. As you near the end of the expansion, your reconstructed breast may look larger than your other breast, if only one breast was operated on.

During the different stages of your breast reconstruction, your bra can be padded to help balance your appearance. One way to fill the bra is to use a soft breast form. This breast form is a lightweight nylon pouch, and the size can be adjusted to match your opposite breast by adding or removing the cotton fluff inside. This is especially useful as your breast mound becomes larger during expansion.

You can buy the breast form from the Breast Boutique at the Evelyn H. Lauder Breast Center. The Breast Boutique is located at 300 East 66th Street, at 2nd Avenue. To reach the boutique, call 646-888-5330.

You can also line your bra with soft gauze, which you can get from your nurse. Replace the gauze frequently to make sure that it is always clean.

Some other clothing tips include wearing:

- Loose blouses, tops, and sweaters
- Dark knit tops under a looser open blouse, sweater, or blazer
- Tops with diagonal stripes
- Asymmetrical prints
A neck scarf or shawl

After Your Tissue Expansion Is Finished

Once you have finished the tissue expansion, the next stage of your breast reconstruction will be scheduled. This stage is the surgery to remove the tissue expander and place the permanent implant. The surgery will be done 4 to 6 weeks after the expansion is completed so that your skin can rest. This date may change if you need other treatments such as chemotherapy or radiation therapy.

The surgery to take out the tissue expander and insert the permanent implant takes about 1 hour for each side. If a matching procedure is done on your other breast to make it match the shape and size of your reconstructed breast, it takes more time. You will be able to go home once you have recovered from anesthesia (medication to make you sleep). This is typically 3 to 4 hours after your surgery.

Nipple reconstruction and fat grafting

The last stages of reconstruction include nipple reconstruction and fat grafting, if needed. Fat grafting is when fat is removed from a part of your body such as your thighs or breast and injected into your breast area.

If you decide to have nipple reconstruction, it is usually done about 2 to 4 months after the permanent implant is placed. Nipple reconstruction can be done either in the operating room or in your surgeon’s office. If your reconstructed nipple

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or areola (brown circle around the nipple) needs to be darkened, you can have it tattooed in your doctor’s office.

If needed, fat grafting will be done in the operating room. It can be done at the same time as the nipple reconstruction.

If you have any questions or concerns, talk with a member of your healthcare team. You can reach them Monday through Friday from 9:00 AM to 5:00 PM at __________________________. After 5:00 PM, during the weekend, and on holidays, please call________________________. If there’s no number listed, or you’re not sure, call 212-639-2000.

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