Gynecomastia Surgery

Northland Plastic Surgery

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Surgery Handbook

Gynecomastia Surgery

Male Breast Reduction

A surgical procedure that removes excess breast tissue, fat, and/or skin to improve the contour of the chest.

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PROCEDURE OVERVIEW – GYNECOMASTIA SURGERY

Gynecomastia is a condition of excessive breast tissue in a man. This condition is common among men and may be on one or both sides. Gynecomastia is usually related to increased hormone production or changes in hormone balance. This may occur during puberty or later in life. Increased breast tissue may also be caused by hormone therapy, heavy alcohol or marijuana use, or certain medications. Discontinuing the use of these substances may reduce the breast tissue development.

The best candidates for surgery are those who are of normal body weight, are not going through puberty, are not taking hormones, and are not using alcohol or marijuana heavily. Male breast reduction surgery can be beneficial for men who have lost a large amount of weight but still have excess fat or sagging skin in the chest area.

Gynecomastia surgery is performed on an outpatient basis. Small corrections can be done using local anesthesia with sedation. More extensive surgery is usually done using general anesthesia. The surgery usually takes 1.5-3 hours to perform. Excess breast tissue or fat can be removed with liposuction, excision, or a combination of both. Most incisions are placed around the areola (dark area around the nipple) and may be well hidden to see after the scars mature. At the end of surgery, a drain may be placed beneath the skin to prevent the accumulation of fluid. Drains are usually removed within a couple of days. A pressure dressing is used to prevent swelling and to improve healing and contouring. Discomfort subsides daily and is well controlled with oral medication. Patients are seen several times after surgery to monitor healing. Most people are able to return to work after 7 days and resume light activity after 2 weeks. The tissue and wounds need at least one year to heal completely; after which an occasional revision may be needed.

Gynecomastia surgery can greatly improve a person's self-image and self-confidence. It can produce a flatter chest with masculine contouring, making one feel more comfortable in social situations both in and out of clothing.

PREPARING FOR SURGERY

STARTING NOW

- STOP SMOKING AND ALL NICOTINE PRODUCTS: We strongly recommend that you stop the use of ALL nicotine products at least one month before your surgery. Smoking reduces circulation to the skin and slows healing. In some cases, your physician may cancel your surgery if you do not follow this recommendation.

2 WEEKS BEFORE SURGERY

- STOP 2 WEEKS PRIOR: Fish oil, garlic, ginger, gingko biloba, ma huang, and vitamin E. Any herbal or homeopathic supplement.

- STOP 10 – 14 DAYS PRIOR: Do not take anti-inflammatories. Review the provided list of drugs to avoid and discontinue their use 10 – 14 days before your surgery. Such drugs can cause bleeding, delay in healing, anesthesia conflicts, infection, or problems during and after surgery. Use medications containing acetaminophen (such as Tylenol) instead. If you are unsure about discontinuing a medication, please consult with your primary physician.

24 – 48 HOURS BEFORE YOUR SURGERY

- CONFIRM YOUR SURGERY TIME: A nurse will call you 1 – 2 days before your surgery to review your medical status and confirm your surgery time. If a nurse has not reached you by 3:00 PM the day before your surgery, please call Lakewalk Surgery Center at 218-728-0650 or 877-728-0650 for your final preoperative instructions.

- EATING AND DRINKING: Do not eat or drink anything after 12:00 midnight the night before your surgery. This includes water. Do not drink alcohol within 24 hours of surgery.

THE MORNING OF SURGERY

- MEDICATIONS: If you take a daily medication that must be taken in the morning, you may take it with a <u>sip of water</u> in the early morning. Absolutely do not eat or drink anything else.

- ORAL HYGIENE: You may brush your teeth but DO NOT swallow the water.

- CLEANSING: Shower or bathe using an antibacterial soap such as Dial the morning of your surgery.

- TOPICALS: Please do not wear moisturizers, creams, lotions, deodorant, or make-up.

- CLOTHING: Wear comfortable, loose-fitting clothing that does not need to be put on over your head. Remove hair accessories and jewelry. <u>Please do not bring valuables with you.</u>

MEDICATIONS TO AVOID

- We have provided a list of medications that should be avoided when you are having surgery. These medications can prolong bleeding and should be avoided for 10 – 14 days before your surgery. Your surgeon will advise you when it is safe for you to use anti-inflammatories after your surgery.

- Please review the list carefully. Check the labels of all medicines that you take, even those available without a prescription, to make sure you are not taking any of these substances. If you have questions about any of the medications that you are taking, please let us know or talk with your primary care physician. It is important that we know all the current medications, vitamins, herbs, or other supplements that you are taking.

- If you need a medication for pain during this time, you may use products containing acetaminophen (Tylenol).

Aspirin medications to avoid

4-Way Cold Tablets
5-Aminosalicylic Acid
Acetilsalicylic Acid
Alka-Seltzer products
Anacin products
Arthritis foundation products
Arthritis pain formula
Aspirin (ASA)
Ascriptin products
Aspergum
Azulfidine products
BC powder or tablets
Bayer products
Bismatrol products
Butalbital Compound
Bufferin products
Cheracol
Coricidin
Darvon
Disalcid
Doan's products
Dristan
Easprin
Ecotrin products
Empirin products
Excedrin products
Equagesic
Fiorinal products
Goody's HA powder
Lanorinal
Magnesium Salicylate
Midol products
Meprobamate
Mesalamine
Methocarbamol
Momentum
Mono-Gesic
Nighttime effervescent cold
Norgesic products
Oxycodone
Pepto-Bismol
Percodan products
Salicylate products
Sine-off
Sinutab
Soma compound
Talwin
Triaminicin
Trilisate
Vanquish
Wesprin
Zorprin

Nonsteroidal anti-inflammatory medications to avoid

Advil products
Aleve
Anaprox products
Ansaid
Bextra
Cataflam
Celebrex
Clinoril
Daypro
Dolobid
Feldene
Fenoprofen
Ibuprofen
Indocin products
Indomethacin products
Meclomen
Midol products
Motrin products
Nalfon products
Naprelan Tablets
Naprosyn
Nuprin
Orudis products
Oruvail
Ponstel
Relafen
Tordal
Trilisate
Voltaren

Other medications to avoid

Accutrim
Aggrenox
Agrylin
Coumadin
Dipyridamole
Heparin
Hydrocortisone
Lovenox
Miradon
Persantin
Plavix
Pletal
Ticlid
Warfarin

WHAT TO EXPECT AT LAKEWALK SURGERY CENTER

Going to the operating room is not a normal experience for most of us. Your surgeon and all the staff caring for you recognize the anxiety with which most patients approach this step in the process of achieving their goals. A description of the surgery experience will help you feel more comfortable.

- When you arrive at Lakewalk Surgery Center you will be escorted to a private room. You will be asked to change into a gown and robe and a nurse will do a general assessment (blood pressure, pulse, etc.). An IV (intravenous line) will be started in your hand or forearm. Your surgeon and a member of the anesthesia staff will meet with you before you enter the operating suite. This is the time for final surgical planning; for certain procedures the surgeon may draw on your skin to aid him later during the procedure. There will be time for last minute questions.

- Once you enter the operating room, the staff will do everything they can to make you feel secure. Monitoring devices will be connected to you to ensure your safety during the procedure. Medicines that will make you drowsy will be administered through your IV.

- When your surgery has been completed and your dressings are in place, you will return to a private room for recovery. During this period, a registered nurse will take care of you and monitor you until you are ready to leave the surgery center. All the nurses at Lakewalk Surgery Center are certified for advanced cardiac life support. The surgery center is equipped just like a hospital, and is one reason Lakewalk Surgery Center is fully accredited.

- Your stay in the recovery area will vary depending on the type of surgery and length of anesthesia. Family or personal friends may be with you in the recovery room. The nurse can contact significant others when you arrive in recovery or when you are ready to be discharged. Even though you will be awake during this time, it is not unusual to not remember much about your recovery after surgery. This is related to the effects of the medications used during anesthesia.

- You can be assured that the staff at Lakewalk Surgery Center will do everything possible to make your surgical experience safe, comfortable, and confidential.

- **You must arrange for someone to bring you to and drive you home from the surgery center. Under no conditions will you be allowed to drive or take a taxi after surgery. It is also important that you have a family member or friend remain with you the first 24 hours after surgery while the effects of anesthesia wear off.**

GENERAL ANESTHESIA INFORMATION

- When general anesthesia is used, you will be sound asleep and under the care of the anesthesia staff throughout the operation. Lakewalk Surgery Center operating rooms have been designed to be spacious and comfortable. Once you are lying on the operating table, you will be connected to several monitors. After you have breathed pure oxygen for a few minutes, you will be given a sedative to help you fall asleep. You will breathe an anesthetic gas and be given medications through your IV to keep you asleep and pain free. The anesthesia staff will monitor your medical condition and assist your breathing throughout the procedure.

- The anesthesiologist or CRN-A (certified registered nurse anesthetist) spends all their time during the procedure ensuring your safety. Extremely sensitive monitors are used during surgery and have greatly reduced the risks of anesthesia. A tiny change in the oxygen level in your blood, the amount of carbon dioxide you breathe out, the percentage of anesthetic gas being administrated, your heart rate, or your blood pressure are reported and treated immediately.

- Today's anesthesia monitoring equipment is much safer than in the past. The anesthesia and monitoring equipment is routinely maintained and is the same quality as the equipment in any major hospital.

- Many precautions are taken before and during your surgery to prevent side effects from anesthesia. Minor side effects can include dry throat, soreness of the jaw, nausea, vomiting, or memory lapse. Significant risks are rare especially for patients having elective surgery and who have good general health.

SURGICAL RISKS

We want you to fully understand the risks involved in surgery so you can make an informed decision. Although complications are infrequent, all operations have some degree of risk. We will use our expertise and knowledge to avoid complications in so far as we are able. If a complication does occur, we will use those same skills to solve the problem quickly. The importance of having a highly qualified medical team and the use of a certified facility cannot be overestimated. In general, the least serious problems occur more often, and the more serious problems occur rarely. Most complications involve a lengthened recovery period rather than any permanent effect on your final result.

NORMAL SYMPTOMS

- SWELLING AND BRUISING**:** Moderate swelling and bruising are normal after any surgery. Severe swelling and bruising may be a symptom of persistent bleeding or development of an infection.

- DISCOMFORT OR PAIN: Mild to moderate discomfort or pain is normal after any surgery. If pain becomes severe and is not relieved by pain medication, you should call our office.

- CRUSTING OR SCABBING: You may develop some crusting or scabbing along the incision line. You may apply a small amount of antibiotic ointment on these areas until they are healed.

- ITCHING: Itching and occasional shooting electrical sensations often occur as the skin and nerve endings heal. Ice, skin moisturizers, and massage are sometimes helpful. These symptoms are common.

- REDNESS OF SCARS: All new scars are red, dark pink, or purple. Scars on the breasts or body may take a year or longer to fade and become flesh colored. All wounds take at least one year to fully mature. You will have scars after an operation. The final look of the scar(s) CANNOT be predicted. Everyone heals differently. The scar is permanent.

COMMON RISKS

- HEMATOMA: Small collections of blood under the skin are usually allowed to absorb spontaneously. Larger hematomas may require aspiration, drainage, or even surgical removal to achieve the best result.

- INFLAMMATION AND INFECTION: A superficial infection may require antibiotic ointment. Deeper infections are treated with oral antibiotics. Development of an abscess usually requires drainage.

- THICK, WIDE, OR DEPRESSED SCARS: Abnormal scars may occur even though we use the most modern plastic surgery techniques. Placement of silicone sheeting on the scars, massage, injection of steroids into the scars, laser treatment, or further surgery to correct the scars may be occasionally necessary. Most scars improve significantly with time. Areas of the body scar differently and people form scars differently depending on ethnicity, skin color and type, and other factors that affect scar development. Your own history of scarring should give you some indication of what you can expect, although even this can change with time.

- WOUND SEPARATION OR DELAYED HEALING: This can be a common occurrence. Any incision, during the healing phase, may separate or heal unusually slow for several reasons. These include inflammation, infection, wound tension, decreased circulation, smoking, or excess external pressure. If delayed healing occurs, the outcome is usually not significantly affected. Occasionally revision of a widened scar may be indicated.

- SENSITIVITY OR ALLERGY TO DRESSINGS OR TAPE: Occasionally, allergic reactions or sensitivity may occur from soap, ointment, tape, or sutures used during or after surgery. Such problems are unusual and are typically mild and easily treated. In extremely rare circumstances, an allergic reaction can be severe and require aggressive treatment or even hospitalization.

- INCREASED RISKS FOR SMOKERS: Smokers have a greater chance of skin loss and poor healing because of decreased skin circulation. We strongly recommend that you discontinue smoking and use the of all nicotine products at least one month before your surgery.

- INJURY TO DEEPER STRUCTURES: Blood vessels, nerves and muscles may be injured during surgery. The incidence of such injuries is rare.

RARE COMPLICATIONS

- If they are severe, any of the problems mentioned under Common Risks may significantly delay healing or necessitate further surgical procedures.

- Medical complications such a pulmonary embolism, severe allergic reaction to medications, cardiac arrhythmias, heart attack, and hyperthermia are rare but serious and life-threatening problems. Informing us of all pertinent medical data before surgery is extremely important; failing to do so may cause serious problems for you and for the medical team during surgery.

SURGICAL RISKS – GYNECOMASTIA SURGERY

- CONTOUR ABNORMALITIES: During the healing phase you may feel firmness or lumpiness under the treated areas. If direct excision has been performed, you may feel the edge around the areola. Irregularities in the tissue usually soften and become smooth with time.

- ASYMMETRY: It is not always possible to obtain total symmetry when bilateral procedures are performed. There are no perfectly symmetric breasts. Small differences in the appearance of the breasts after surgery would be considered acceptable. If asymmetry is significant after complete healing, a revision procedure may be indicated.

- LOSS OF SENSATION: Loss of sensation to the breast skin or nipple can occur as the result of surgery. Although rarely permanent, sensation may take several months to return as the nerves recover and regrow.

- RECURRENCE OF BREAST ENLARGEMENT: This is uncommon but can occur. If this happens you may elect to have additional surgery.

- HARDNESS WITHIN BREAST TISSUE: Postoperative scarring within the breast tissue may cause areas of hardness. An area of hardness could cause worry about cancer for some patients, especially if discovered later. Occasionally, mammography or even biopsy may be indicated.

- BLEEDING OR BRUISING: You should expect to have some bruising for 2-3 weeks after surgery. Formation of a hematoma (blood clot under the skin) is rare. Warm compresses, massage, and time usually resolve a hematoma. Very rarely, isolated blood collections will need to be drained.

- SEROMA: Serous fluid, which is produced by the body after surgery, can collect under the skin. If this occurs, aspiration or surgical drainage may be needed.

- SKIN LOSS: Skin loss can occur if circulation to the skin is compromised. This is a rare complication that may prolong the healing period or require additional surgery. Smoking increases the risk of problems resulting from poor circulation.

ALTERNATIVES:

- Male breast reduction surgery is an elective procedure. The alternatives include not having surgery, weight loss, and exercise.

MEDICATIONS AFTER GYNECOMASTIA SURGERY

You will be given prescription(s) the day of your surgery. It is important that you use the medications as directed unless you experience abnormal symptoms that might be related to medication use. Symptoms such as itching, development of a rash, wheezing, and tightness in the throat could be an allergic reaction. Should these occur, discontinue all medications, and call the office for instructions.

INSTRUCTIONS

- PAIN: You will be given a handwritten prescription for pain medication after your surgery. Take the pain medication only as prescribed. We require a minimum of a 24-hour notice if you are requesting a refill of the narcotic. Contact your pharmacy for a refill. There will be no medications prescribed after hours, on weekends, or on holidays. Contact your physician before you start taking aspirin or ibuprofen.

- ANTIBIOTICS: You will be given an antibiotic through your IV during surgery. Additional oral antibiotics are not indicated unless you develop signs and symptoms of an infection.

- NAUSEA: Scopolamine (Transderm Scope). A patch containing a medication to reduce nausea may be placed behind your ear after your surgery. You may experience mild blurred vision and dilation of the pupil on the side of your head that the patch was placed. This will resolve after the patch is removed. You should remove the patch 24 hours after surgery. Discard the patch and wash your hands thoroughly to avoid contact of the medication with your eyes. If you have trouble with nausea, please call our office for advice.

POSTOPERATIVE INSTRUCTIONS

- If you have bleeding, pain (not controlled by your medication), or swelling (increasing or expanding), call our office at (218) 724-7363, day or night, or go to the Emergency Room.

- You must have a responsible adult stay with you during the first 24 hours after surgery.

- DRESSINGS: Keep your dressings as clean and dry as possible. DO NOT REMOVE THEM UNLESS INSTRUCTED TO DO SO.

- ACTIVITY: TAKE IT EASY during the first week after surgery. You may perform activities of daily living but no matter how good you feel, do not clean the house, go shopping, etc. Light activity such as walking is encouraged but too much activity may cause bleeding and/or more swelling. DO NOT LIFT, PUSH OR PULL MORE THAN 10 LBS.

- COLD COMPRESSES: Use of cold compresses after surgery will help to reduce swelling, bruising, and pain. Apply cold gel packs, frozen peas or crushed ice cubes in a zip-lock bag over the surgical area for a period of 20 minutes at regular intervals during the first 24 – 48 hours after surgery. This should help, not hurt. If the ice feels too uncomfortable, don't use it as often.

- DIET: It is not unusual to experience mild nausea after anesthesia. When you begin eating, start with liquids and bland foods. If those are well tolerated, progress to a regular diet. To avoid exaggerating nausea, take your pain medication with food.

- DON'T SMOKE OR USE NICOTINE PRODUCTS: Smoking reduces the flow of blood through the small vessels in your skin. This can affect wound healing. It is important that you do not smoke until released to do so by your physician.

- ALCOHOL: Alcohol dilates the blood vessels and could increase postoperative bleeding. Please do not drink until you have stopped taking the prescription pain pills, as the combination of pain pills and alcohol can be dangerous.

- DRIVING: Do not drive for at least 24 hours after general anesthesia, IV sedation, or while taking prescription pain pills. You may feel normal and alert, but your judgment and reactions may be affected by the medications.

- POSTOPERATIVE APPOINTMENTS: It is important that you follow the schedule of appointments we establish after surgery.

- FEVER: Measured fever of 101.5 (oral temperature) CALL THE OFFICE at (218)724-7363.

POSTOPERATIVE INSTRUCTIONS – GYNECOMASTIA SURGERY

- SLEEPING: For at least the first week after surgery, try to sleep on your back. Using two pillows to elevate and support your head and back will help reduce swelling. A pillow under your knees and arms may help you feel more comfortable in this position. It is more important for you to sleep than to rigidly adhere to this suggestion.

- DRAINS: If breast tissue has been excised, a drain may be placed under the skin. The drain evacuates fluid that accumulates after surgery and enables you to heal faster. The drain will be removed when the drainage has significantly decreased or stopped. Please refer to the drain care instruction sheet for more information.

- SHOWERING: Remove your dressings and shower 48 hours after surgery. Do not soak in a tub until your sutures are removed. Pat dry, DO NOT RUB!

- DRESSINGS: After surgery gauze dressings and an ace bandage or surgical garment will be placed. These help reduce swelling, reduce discomfort, and improve contouring of the tissues as they heal. You should not remove the bandage or garment until the second day when you shower. We recommend wearing a compression garment for 4-6 weeks after surgery.

- ACTIVITY: Light activity such as walking is encouraged but too much activity may cause bleeding and swelling. Low impact aerobic activity can be resumed after 2 weeks. You should wait to start strenuous or high impact activity until after 4 weeks. In general, guide your activities by your discomfort – if an activity hurts, do not do it. Wearing your compression garment during activity is helpful and recommended.

- SCAR MANAGEMENT: Scars take at least one year to completely heal. During this time, you must protect them from the sun. Always wear sunscreen with an SPF of at least 30 when in the sunshine or a tanning bed. Most scars heal well without intervention; gentle massage of the scar tissue on a regular basis may help soften the scar more quickly.

AS YOU HEAL

FAMILY & FRIENDS

- Support from family and friends is helpful, but because they may not understand what constitutes a normal postoperative course, their comments may unintentionally create emotional turmoil for you. We will tell you honestly how you are doing and what we expect your result to be. Please trust in our knowledge and experience when we discuss your progress with you.

- After having cosmetic or reconstructive surgery, your friends may be reluctant to bring up and discuss what they believe is a private matter. Patients occasionally feel upset that "no one noticed" or "said anything." If you feel comfortable discussing your surgical experience, do so openly. When people ask how you are, respond by saying, "I'm recovering from surgery and I'm doing really well." This lets people know that they may talk freely with you. Often when patients are open, they find that their friends and acquaintances are interested in discussing the subject.

DEPRESSION

- Quite frequently patients experience a brief period of "let down" or depression after surgery. Some may subconsciously have expected to feel and look better "instantly" even though they rationally understand that this will not be the case. Patients commonly question their decision to have surgery during the first few days after surgery. As healing occurs, these thoughts usually disappear. If you feel depressed, understanding that this is a normal phase of the healing process may help you to cope with these emotions.

HEALING

- The capacity and speed of healing varies from person to person. Several factors such as your genetic background, and your overall state of health and lifestyle (exercise, diet, smoking, drinking, etc.) can affect how you heal. Every patient heals at their own rate.

- Another major factor while healing is whether you follow the postoperative instructions that are given to you. Such guidelines are designed to promote the healing process and prevent the occurrence of anything that may interfere with recovery. It is important you recognize that you are a partner in this process and have a responsibility to follow instructions carefully.

- Unexpected occurrences are infrequent. If, however, you experience a setback, we will do everything possible to facilitate your healing. Should an unexpected event occur, it is in your best interest to ally yourself with us. We will support you through any difficulties and assist you in reaching your goal.

AS YOU HEAL INFORMATION – BREAST AUGMENTATION

- ASYMMETRY: It is common for the two breasts to heal differently. One may swell more, one may feel more uncomfortable, or the shapes may differ initially. Patience is required; you will notice changes in the breasts for many months after surgery. After complete healing, they should look remarkably similar and natural.

- "SLOSHING" SENSATION: You may hear and feel "sloshing" in your breast after surgery. This is not the implant! It is air that is trapped in the space around the implant and the natural fluid that accumulates after the operation. Your body will absorb this within a few weeks.

- SHINY SKIN: The skin of your breasts may become shiny. This is the result of swelling that occurs after surgery. Within a few weeks, the swelling will subside, and the skin will look more normal.

- SENSITIVITY: As nerves recover from surgery, the nipples may become more sensitive. This will subside with time. You may find gentle massage helps.