



CARING FOR YOURSELF AFTER YOUR BREAST IMPLANT HAS BEEN EXCHANGED

This fact sheet has general information for women preparing to have their breast implant exchanged. The implant may be a tissue expander exchanged for a permanent prosthesis; or a permanent prosthesis exchanged for a new permanent prosthesis.

Incision

The position of the stitches (suture line) can vary for this procedure and will be discussed with you before surgery. Generally, the cut (incision) is made in the inframammary fold, which is the fold or crease of skin under your breast. However, if you have a scar from your previous surgery that requires improvement, that scar may be used for the exchange and revised at the same time.

There are generally no sutures visible at the surface of your incision. Usually, there will be dissolvable sutures under your skin covered with surgical glue or a waterproof dressing. When surgical glue is used to cover the suture line it appears as though you have no dressing. This glue is waterproof. Generally you will be asked to avoid getting this area wet for 48 hours after surgery. After this time you can shower normally, but it's best to avoid direct pressure from the water jet and hot water on the suture line as these may increase the amount of bruising or swelling.

Seven to ten days after surgery you will attend our wound clinic; at this visit the nurse will talk to you about when to start covering the suture line with Micropore tape (available at any pharmacy). It is recommended you use the tape for six weeks, changing it every seven days. This will help to minimise the scar. Rubbing creams and oils into the suture line is discouraged until after this six-week period.

Drain tube

A drain tube may be placed into the wound bed at the time of surgery to remove excess fluid. The surgeon will decide when to remove the drain tube, but it will usually be removed the day after surgery and before you're discharged from hospital. Occasionally, if there is a high level of fluid draining from the drain tube, it may remain in place for a day or two longer.

The drain tube may cause some discomfort. You may wish to have pain relief half an hour before the drain is removed, as the procedure can be painful.

When the drain tube is removed the small hole will be closed with a dressing, this must be removed after 48 hours.

Pain

You may experience some pain or discomfort after surgery. This is often due to the recent movement of the muscle and the placement of a permanent prosthesis that may stretch the muscle a little further. This pain should not be as uncomfortable as your initial surgery. Most women find they require mild to moderate regular pain relief in the first week or two after surgery.

Physical activity

After surgery a physiotherapist will give you gentle arm exercises to do. Regular gentle exercise is important in the first few weeks following your surgery to reduce the risk of developing a stiff shoulder.

In the first week after surgery we ask that you avoid raising your elbow higher than your shoulder height. This will minimise any strain on the healing muscle. It is important that you avoid heavy physical activity in the first two weeks after surgery. For the following four weeks, slowly increase your physical activity as you become more comfortable. After six weeks you should be able to resume your normal level of activity. Check with your surgeon before you resume vigorous exercise or heavy lifting.

Comfort

It is important that you wear a supportive bra for six weeks after your surgery, day and night. The breast care nurse will give you one bra, which you will be fitted with at your pre-operation appointment. It is recommended that you also buy an additional bra for this period of time.

Look for a bra that is wireless with a wide band under the cup, wide straps as well as wide back and underarm support. Your arm movement may be restricted initially and you may find it helpful to buy a bra that can be opened at the front.

Wearing a bra as described will provide support while reducing any swelling, bruising or discomfort.

Appearance

You may initially have some mild swelling or bruising after surgery, most of which will disappear within six weeks. The height of your implant will probably drop slightly in the first few months post-surgery, this is normal and expected. It will generally take six months before your breast settles into its final shape. For this reason women requiring nipple-areola reconstruction are advised to wait at least six months. The nipple can then be placed in the best position.

Post-operative care

As previously mentioned it is not unusual to have some swelling or bruising following surgery. This should gradually settle over the first few weeks, but it is important to contact the hospital if you notice a sudden increase in swelling or pain.

To reduce the risk of infection you may receive intravenous antibiotics while in hospital and/or given oral antibiotics for another week on discharge. Infection is uncommon following surgery; however, it is very important to contact the Breast Service staff if you have any signs of infection such as fever or increasing pain, redness or swelling around the wound.

An appointment will be made for you to attend the RMH Complex Wound Clinic in the first week after surgery followed by a Breast Plastics Clinic appointment four to six weeks after surgery.

Scar management

Our aim is minimise any scarring as much as possible. We use different techniques at different times to achieve this:

Week 1 to 6

Micropore is paper tape that provides gentle support to your wound and helps to flatten the scar. The tape is to be worn continuously and changed once a week. You are able to shower with the tape on, but ensure you dry it off afterwards. Do not use any creams or oils on your scars during this time.

Week 6 onwards

Massage and moisturising with a gentle cream (e.g. Cetaphil Moisturising Cream, sorbolene) will help soften the scar and break up any underlying scar tissue. This will encourage the scar to become flatter and smoother. Massage should be done in a firm circular motion along the length of the healed scar. Massage any scars three to four times a day for at least five minutes each time.

6 weeks to 12 months

Silicone gels and sheets can be used to help lock in moisture as well as put pressure on a scar to flatten and soften it. Silicone should only be used on wounds once they are completely healed (normally after 6 weeks, but please check with your doctor/nurse). They can be used for many months; however, most silicone sheets need to be applied gradually in case your skin has an allergic reaction to them.

For more information

For more information and advice or if you require medical assistance please contact:

Breast Care Nurse

The Royal Women's Hospital

(03) 8345 2000 (switchboard, ask for pager 53100)

(03) 8345 3565 (Monday to Friday during business hours, leave a message if phone unattended)

Breast Care Nurse

The Royal Melbourne Hospital (03) 9342 8120

DISCLAIMER The Royal Women's Hospital and The Royal Melbourne Hospital do not accept any liability to any person for the information or advice (or use of such information or advice) which is provided in this fact sheet or incorporated into it by reference. We provide this information on the understanding that all persons accessing it take responsibility for assessing its relevance and accuracy. Women are encouraged to discuss their health needs with a health practitioner. If you have concerns about your health, you should seek advice from your health care provider or if you require urgent care you should go to the nearest hospital Emergency Department. © The Royal Women's Hospital and The Royal Melbourne Hospital 2015-2018