



Pre-operative patient information leaflet for:

Breast reduction- Part 1 of 3

*This is a pre-operative information document to explain breast reduction surgery. **It is important that you read this information carefully and completely. Please initial each page**, indicating that you have read it. For information on the risks and complications and after-care of breast reduction surgery, please see parts 2 & 3.*

What is a breast reduction?

A breast reduction removes excess fat, breast tissue and skin from the breasts. The breasts are reshaped and the nipples repositioned to form smaller breasts which are often uplifted.

Why have a breast reduction?

Large breasts can cause problems at any age, including: backache, neck pain, grooves in the shoulders from bra straps and rashes under the breasts. Many patients with large breasts can be very self-conscious of their appearance and find that they attract unwanted attention. Commonly, women with large breasts report that it is difficult to wear certain clothes or enjoy active sports, particularly in hot weather.

The operation can help patients who are unhappy with the shape, weight and droop of their breasts, by creating smaller and more uplifted breasts. Asymmetry of the breast can also be evened out, where one breast is much larger than the other.

How is the procedure performed?

There are several different ways to reduce the breasts. Most breast reduction surgery begins with the nipple, which is lifted into a new position and kept alive on a pedicle, or stalk, of tissue. Excess skin and breast tissue is then removed, and the remaining breast tissue reshaped to create a smaller and more elevated breast.

The methods of reduction and reshaping vary, and depend upon the patient's breast size, wishes and needs. While the principle of all breast reductions remains the same, different techniques result in different scars on the breasts. Regardless of the approach, the scars are designed to be invisible when wearing normal clothing and as far as possible are designed to lie under the average bra or bikini top.



The anchor-type or inverted T reduction



The most common and traditional type of breast reduction uses an anchor-type incision, also known as an inverted T. This technique results in an anchor-shaped scar, starting around the nipple, travelling vertically down and then horizontally across the breast crease (Fig. 1).

Figure 1: the anchor-type or inverted T reduction

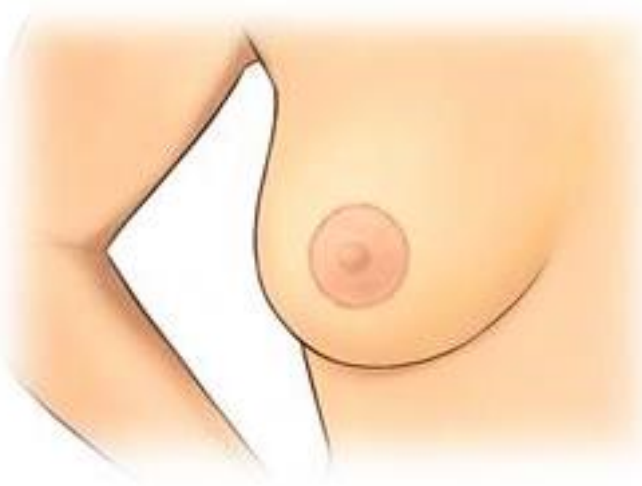
The vertical pattern breast reduction

Another common type of reduction procedure is the vertical pattern breast reduction (Fig. 2). With this technique, patients end up with a scar around the nipple that travels vertically down, but with no scarring underneath the breast. Though there is reduced scarring, the skin around the scar can look gathered up using this technique. The vertical pattern is less effective when dealing with particularly large breasts.

Figure 2: The vertical pattern breast reduction



The circumareolar (or periareolar) breast reduction



In circumareolar breast reduction the only scar is a circular scar around the areola (Fig. 3).

This technique is suitable when only a small amount of tissue needs to be removed. It can also be good when only one breast needs to be reduced to match the other breast.

Figure 3: The circumareolar breast reduction



If you decide to go ahead with your breast reduction, only go to a surgeon who is properly trained, and be guided by his or her advice as to what is possible in your own case. Members of several different organisations carry out cosmetic surgery, and therefore your general practitioner is the best person to advise you on whom you should see. You should establish from your surgeon in advance what the conditions for a re-operation would be, and what any arrangements for payment would be.

For further information, please follow the links below:

Cosmetic surgery

www.baaps.org.uk/safety-in-surgery
www.bapras.org.uk/public/patient-information/cosmetic-surgery/considering-cosmetic-surgery
www.gov.uk/government/news/recommendations-to-protect-people-who-choose-cosmetic-surgery

GMC plastic surgery specialist register

www.gmc-uk.org/doctors/register/LRMP.asp

Anaesthetics

www.rcoa.ac.uk/patientinfo

Blood transfusion

www.nhs.uk/Conditions/Blood-transfusion

Contact us:

British Association of Aesthetic Plastic Surgeons
The Royal College of Surgeons of England
35-43 Lincoln's Inn Fields
London WC2A 3PE

Tel: 020 7430 1840
Fax: 020 7242 4922
Email: info@baaps.org.uk
Website: www.baaps.org.uk

British Association of Plastic, Reconstructive and Aesthetic Surgeons
The Royal College of Surgeons of England
35-43 Lincoln's Inn Fields
London WC2A 3PE

Tel: 020 7831 5161
Fax: 020 7831 4041
Email: secretariat@bapras.org.uk
Website: www.bapras.org.uk



DISCLAIMER:

This document is designed to supply useful information but is not to be regarded as advice specific to any particular case. It does not replace the need for a thorough consultation and all prospective patients should seek the advice of a suitably qualified medical practitioner. The BAAPS and BAPRAS accept no liability for any decision taken by the reader in respect of the treatment they decide to undertake.

Date of review: **August 2020** (produced August 2015)