

# **Tissue Expander**

## **Patient Care Instructions**

### ***General Information***

Breast reconstruction with tissue expanders is normally performed on the same day as your mastectomy, immediately after. This involves placing the tissue expander either pre-pectoral (above the muscle) or retro-pectoral (behind the muscle). Tissue expanders are designed to be more rigid and larger than a breast implant or autologous tissue (one's own tissue). The purpose of the expander is to gradually stretch the overlying skin and sometimes muscle. The tissue expanders have a metallic port that will be accessed with a magnet and filled with a small catheter. An extra layer of tissue is frequently used with tissue expanders to support and secure the tissue expander in place as it expands. Tissue expansion may or may not begin in the operating room, determination will be made at time of placement. Expansion will continue in clinic until the desired goal is reached. Please plan to stay in the hospital 1-2 nights.

### ***Pre-Operative Guidelines***

Smoking should be stopped a minimum of 4 weeks prior to surgery. Smoking should be avoided for at least 4 weeks after surgery as well. Smoking can greatly interfere with healing and lead to postoperative complications.

Do not eat or drink anything after midnight the night before surgery. This includes no water, gum or hard candy. Blood pressure and/or heart medications can be taken with a sip of water as directed by your prescribing physician.

If you take medication for diabetes, then confirm with your prescribing physician how to manage these medications prior to surgery.

If you are prone to nausea or motion sickness let your anesthesiologist know on the day of surgery. Medications can be started prior to surgery or during surgery to help improve your post-operative experience.

### ***Post-Operative Care***

You will be prescribed medications after surgery. Pain medication, usually Norco, should be taken as prescribed in order to keep you comfortable enough to keep moving. Antibiotics should be taken after surgery until your drains are removed. We also recommend you take a stool softener, such as Colace, Biscodyl, or Milk of Magnesia, while taking pain medications to avoid constipation.

NEVER USE A HEATING PAD OR ICE on your chest after surgery to relieve pain or discomfort; this can lead to injury due to impaired sensation.

## ***Incision Care***

You will have skin glue over your incisions after surgery that are waterproof. You will additionally have two drain tubes (one on each side) covered with a plastic dressing. This dressing can be changed if needed. Aquaguard waterproof dressings can be purchased over the counter and are good dressings to replace them with.

You can shower beginning 24 hours after surgery. **Do not bathe or soak in a tub.** You may cleanse the incisions, but please keep the drain sites dry. You may re-enforce the drain dressings with Aquaguard over the counter dressings if needed

Do not smoke or be around smoking as even second hand smoke delays healing and increases the risk of complications.

You may resume a normal diet after surgery. Do follow a well-balanced diet and drink plenty of fluids.

## ***Activity Restrictions***

You may resume normal daily activities the day after surgery; this includes activities that encourage elevation of your arms to 90 degrees to maintain range of motion of the shoulder. Stretching immediately after surgery is recommended, and exercises with your arms are encouraged once the drains are removed. You may return to light exercise two weeks after surgery, but avoid chest specific exercises or running or jumping until 6 weeks. After 6 weeks, you can return to normal activity and exercise.

You may resume driving when you are no longer taking narcotic pain medications during the day and are able to sit comfortably behind the wheel and perform all motions necessary for safe driving. Always wear a seatbelt.

## ***Post-Operative Expectations***

You can expect some minor swelling, numbness, and bruising of the breast. Wearing a soft support bra (or ace wrap), even at night, may help ease any discomfort, but is not required. Do not wear anything that is tight or uncomfortable. A garment that leaves marks on the skin is too tight. DO NOT use a hot water bottle or electric heating pad on your chest or abdomen until normal sensation returns as the risk for burns with the electric pad is substantially increased.

You expect some slight bloody oozing from the suture lines and swelling of the incisions. It is not uncommon for some saturation of the dressings to occur. Gauze may be applied if it is bothersome. However, you should call the clinic if you have continuous bleeding, significantly more swelling on one breast, or any severe pain associated with swelling.

Tightness of the breasts is a normal feeling after this surgery. This may worsen over the first 2 days, but will relax with time.

Usual hospital stay after tissue expander reconstruction is 1-2 days; average return to work is 2 weeks.

***When to Call the Office***

If you have increased swelling and bruising of one breast significantly more than the other. Remove the bra to make this determination. This may represent a hematoma (a collection of blood) or a seroma (collection of clear fluid).

If you have swelling or redness around the incision.

If you have severe pain not relieved by pain medication.

If you have any side effects from medication: rash, nausea, headache, vomiting.

If you have fever over 101.

If you have yellow or green drainage from an incision or notice foul odor.

If you notice some vaginal burning and itching as a result of the antibiotics used during and after surgery.

You will need to be seen in clinic in 1 weeks' time. Please keep track of your drain output in a daily log and bring it with you to clinic.

**Please call 817-702-9100 or JPS patients call 817-702-8300 with any issues, or you may send a message via myChart.**