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The Royal Liverpool
and Broadgreen
University Hospitals
NHS Trust

Patient information

Bilateral Breast Augmentation

Breast Services

This information leaflet should be read along with Breast Implants: Information for women considering breast implants.

You may wish to discuss alternative treatments or procedures. Please ask a doctor or nurse if alternative treatments or procedures are available.

What is Breast Augmentation?

Breast augmentation is a method of making the breasts larger by the insertion of an implant or prosthesis behind them. To operate on the normal breast is a big step, which you need to think about carefully.

The prosthesis is usually placed behind the breast tissue and on top of the underlying muscle, occasionally it is placed under the muscle. This involves a general anaesthetic and an incision just under the breast in the skin crease. This scar is permanent, how obvious this looks is dependent on how well you heal.

What are the benefits of Breast Augmentation?

This operation will increase the size of your bust, but no particular bra size can be guaranteed. Nor can we guarantee that both breasts will be exactly the same size.

What are the risks of Breast Augmentation?

It is important to be aware of some of the short-term effects of breast implant surgery and the longer-term potential risks.

What happens if I do not have the treatment?

If you decide not to have the procedure done your breasts will remain as they are.

What are the alternatives?

There is no alternative surgical treatment for this.

Some short-term effects

You are likely to have a small amount of swelling at first, with hardness and discomfort. Bruising, twinges and pains may continue for the first few weeks, although any symptoms that are causing concern, or cannot be explained, should be reported immediately to your surgeon.

Warning symptoms include:

- Excessive swelling, deflated breast, offensive wound discharge, excessive pain or heat in breasts.
- Changes in breast sensation are common most are temporary, some are permanent.

Potential Problems

Capsular contracture

The human body puts a wall of scar tissue (fibrous capsule) around any implanted foreign material and breast implants are no exception. Scar tissue shrinks, but the extent of the shrinkage varies from person to person and even from breast to breast. This is known as capsular contracture.

This shrinkage, or capsular contracture, can be noticeable as an apparent hardening of the breast. This occurs in approximately 5 - 10% of patients. If severe it may cause pain and discomfort and alteration of the breast shape and further surgery may be required to correct this.

Rupture rates and life expectancy of implants

'Rupture' means the development of a split or hole in the silicone shell of a breast implant. Rupture was common with early, thin-walled implants. It is not very common now.

It is difficult to establish the rate of rupture because imaging can fail to detect ruptures or incorrectly identify intact implants as ruptured.

It is estimated that current implants will last 10 - 15 years, but may last much longer. Routine scans are not required, but if a lump in the breast is detected, consult your doctor in the normal way.

Scarring

The scars resulting from the insertion of breast implants are normally satisfactory. However, in a small number of women, (up to 1 in 20) as with any surgical procedure, scars will be red, or highly-coloured, thick, painful and will take several years before they improve.

Appearance of the implanted breasts

The position of the breast may be unsatisfactory as a result of the implant and the shape of the breast tissue may be unpredictable. It may not always be possible to produce a natural cleavage and the implant will not drop to the side when the woman lies down. The breast will feel relatively firm and is not the same shape or consistency as the normal breast. How firm the breast feels is in part dependent on the type of silicone used. Often it is possible to feel the edge of the implant.

Creasing and folds

The nature of the implant capsule may enhance less desirable characteristics such as creasing, kinking, vertical ripple folds and rippling in the breast. These are seen most frequently in women with little breast tissue.

Nipple sensation

Inserting the implants under the breast may result in permanent loss of nipple sensation in approximately one in seven women. Often the nipple sensation will be increased for a period of three to six months following surgery, which may be painful. Temporary nipple secretion may also occur.

Infection

Infection of cosmetic breast implants is rare, although more frequent after surgery for breast reconstruction following mastectomy. If infection occurs this may not settle with antibiotics alone and the implant will have to be removed.

Bleeding

Is uncommon, but occurs occasionally and may require further surgery usually shortly after the initial operation.

What sort of anaesthetic will be given to me?

You will be given a general anaesthetic. General anaesthesia is drug-induced unconsciousness. It is always provided by an anaesthetist, who is a doctor with specialist training. Unfortunately, general anaesthesia can cause side effects and complications. Side effects are common, but are usually short-lived: they include nausea, confusion and pain.

Complications are rare, but can cause lasting injury: they include awareness, paralysis and death.

The risks of anaesthesia and surgery are lower for those who are undergoing minor surgery, and who are young, fit, active and well.

You will be given an opportunity to discuss anaesthetic options and risks with an anaesthetist before your surgery.

If you are worried about any of these risks, please speak to your Consultant or a member of their team.

Getting ready for your operation

- You will usually be seen in the pre-operative clinic. Here you will have blood tests, possibly a chest X-ray, and sometimes a heart trace.
- You will be asked to have nothing to eat or drink from 12 o'clock midnight the day before your operation.

The day of your operation

- You will usually come into hospital on the day of your operation.
- The staff will ask routine questions about your health, the medicine you take at the moment and any allergies you may have.
- You will be asked to sign a consent form to say that you understand the procedure, and what the operation involves. Again, you will be able to discuss the operation with your surgeon.

What should I expect after my operation?

- When you return to the ward you may have a plastic tube coming from your wound. This tube is to drain fluid from around your prosthesis. The tube will be removed as soon as the fluid drainage has reduced.
- A nurse will check your pulse, blood pressure, breathing and wound regularly. **It is important that if you feel any pain you must tell the nursing staff, who can give you painkillers to help.**
- The nursing staff will also advise you when you can start taking sips of water. Anaesthetics can make some people sick. If you feel sick we advise you not to drink until this feeling has passed. The nursing staff may offer an injection to help this sick feeling go away.
- There is usually some swelling and bruising of the breast and surrounding tissue, but this will eventually settle.
- **The first time you get out of bed, please make sure you ask a nurse to be with you. This is in case you feel dizzy.**

Going Home

You will usually be in hospital overnight, and go home the day after your operation.

Discharge Information

Pain relief and medication

The nursing staff will advise you about painkillers before you leave the hospital. Please tell the nurses what painkilling tablets you have at home. When you go home, you may need to take some painkiller for a few days.

If you get any severe pain or feelings you are worried about, please contact the ward as soon as possible.

Your wound

You will have some wide tape at the side of your breasts. Please keep this tape in place for the first week. This paper tape will eventually fall off.

Dressings will be in place for two weeks. Sometimes if there is wide microfoam tape this will need to stay in place for one to two weeks.

Your Bra

Please wear an elasticated, crop type sports bra night and day for the first two weeks.

Getting back to normal

After any operation it may take weeks to fully recover. It is normal to feel more tired than usual for a few weeks after having an operation. This will pass.

Returning to work

- As with any surgical operation, you may expect to need to take some time off, depending on the surgical procedure.
- You can self-certify for the first seven days of sickness. After this, a medical certificate (fit note) may be issued by your hospital doctor to cover the expected time off you will need after being discharged.
- Advice on returning to work will be given.

Further Appointments

Your Consultant will see you at one to two weeks following your operation to check your wound and then three months later. If you have any problems before or after you are seen, please contact the Breast Care Unit for an appointment.

Further information

The Breast Care Nurses

Tel: 0151 706 2927 (24 hour answer phone)

Text phone Number: 18001 0151 706 2927

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All Trust approved information is available on request in alternative formats, including other languages, easy read, large print, audio, Braille, moon and electronically.

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