

Breast Reduction

Reduction Mammoplasty



AMERICAN SOCIETY OF
PLASTIC SURGEONS®

What is a Breast Reduction?

Breast reduction surgery entails the removal of skin and tissue from the breast, followed by reshaping and elevating to create a smaller, more proportionate bust size.

Many women struggle with the decision to have a breast reduction, but afterwards consider it one of the best decisions they ever made for themselves.

Women pursue this surgery for various reasons, but all with the goal of enhancing their overall quality of life:

Improved confidence and self-expression

Many women say that after a breast reduction they are more confident in themselves and more comfortable in their own bodies.

Easier to shop

Women often report that finding clothes that fit them becomes much easier and they can shop at almost any store they want.

Back feels better

Women almost always report that having smaller breasts significantly reduces back pain and gives them new found energy throughout the day.

Bras don't hurt

By removing weight from their breasts nearly all women experience a significant reduction in bra strap pain.

Exercise with ease

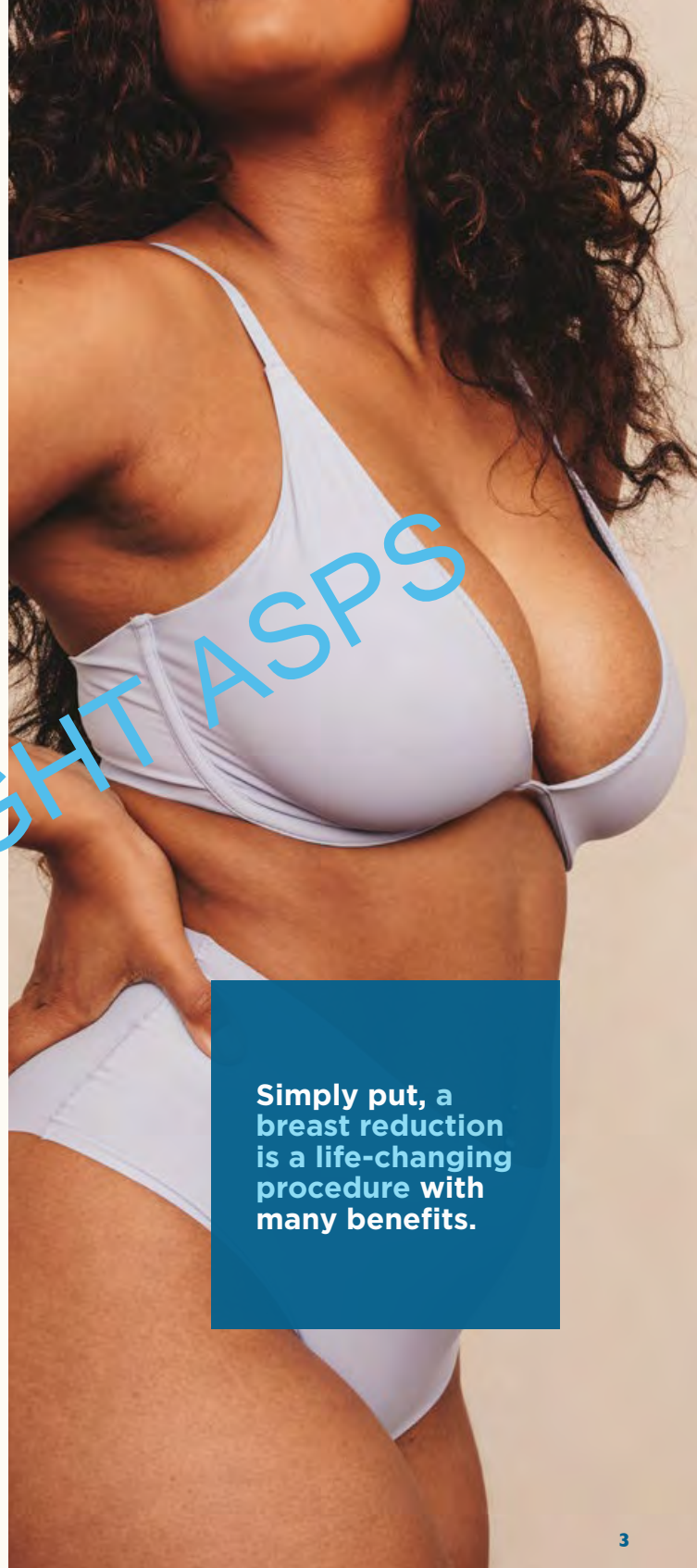
Women frustrated with the pain and discomfort of having overly large breasts can finally exercise in the way they want.

Skin feels better

For women with very large breasts, skin irritation under the breasts is common; this is significantly reduced after a breast reduction.

Easier to breathe

Women find it easier to breathe with smaller, more proportionate breasts.



Simply put, a breast reduction is a life-changing procedure with many benefits.

Consultation & Preparing for Surgery

During your consultation be prepared to discuss:

- Your surgical goals
- Your reasons for wanting to have surgery, your expectations, and your desired outcome
- Your medical condition and medical treatments (bring documentation if you have it)
- Your current medications and drug allergies, any vitamins or herbal supplements you take, and any alcohol, tobacco, vaping, or drug use
- Breast cancer in the family, as well as the results of any mammograms or previous biopsies
- Any questions or concerns you have about breast reduction from your own research

Your surgeon will also:

- Evaluate your general health status and any pre-existing health conditions or risk factors
- Examine and evaluate the appearance of your breasts, including the position of the nipples and areolas, the condition of the skin, and the shape of the breasts
- Take photographs
- Discuss your options and recommend a course of treatment
- Discuss the likely outcomes of breast reduction and any risks or potential complications



Breast reduction surgery may be performed in an accredited outpatient facility, an ambulatory surgical center, or a hospital. Prior to surgery, you may be asked to:

- Have a physical examination, including lab work
- Obtain breast imaging studies depending on your personal or family history or age
- Take certain medications or adjust your current medications
- Stop smoking or vaping*
- Avoid taking aspirin and certain anti-inflammatory drugs, as they can increase bleeding

**Smoking decreases blood flow, which can impede wound healing and increase the risk of infection.*

Be sure to ask your plastic surgeon questions. It's very important to understand all aspects of your breast reduction surgery, especially regarding your personal health history. It's natural to feel some anxiety, whether it's excitement for your anticipated new look or a bit of preoperative stress. Don't be shy about discussing these feelings with your plastic surgeon.

The Procedure

Breast reduction involves making incisions on the breast skin to remove the excess breast tissue and skin. This surgery can also reduce the dark skin around the nipple called the areola.

The technique used to reduce the size of your breasts will be determined by your individual anatomy, breast composition, amount of reduction desired, your personal preferences and the surgeon's advice.

In some cases, excess fat may be removed through liposuction in conjunction with the excision techniques described below.

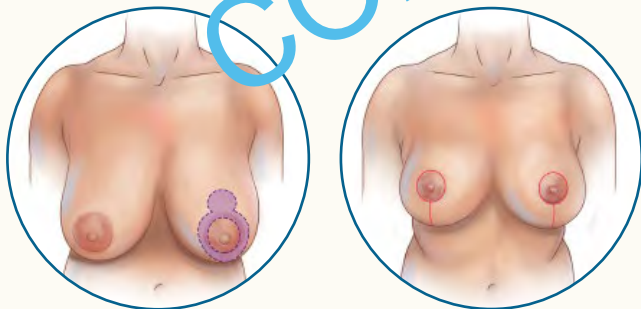
Step 1 - Anesthesia

Medications are administered for your comfort during the surgical procedure. The choices include intravenous sedation and general anesthesia. Your doctor will recommend the best choice for you.

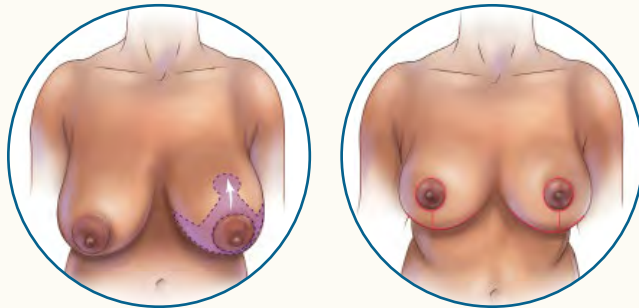
Step 2 - The incision

Incision options include:

Lollipop Incision



Keyhole Incision (Anchor Incision)



Step 3 - Removing tissue and repositioning

After the incision is made, the nipple – which remains tethered to its original blood and nerve supply – is then repositioned. If necessary, the areola diameter is reduced by removing skin around the perimeter. Underlying breast tissue is reduced and the remaining breast tissue is lifted and shaped.

With extremely large breasts, the nipple and areola may need to be removed completely and then repositioned to a higher position on the breast (this is called a free nipple graft). In this case, the nipple and areola will not have sensation after the operation and it will take longer to heal.

Step 4 - Closing the incisions

The incisions are brought together to reshape the now smaller breast. Sutures are layered deep within the breast tissue to create and support the newly shaped breasts.

Sutures, skin adhesives, and/or surgical tape close the skin. Incision lines are permanent, but in most cases they will fade over time.

Risks & Safety

The decision to have breast reduction is extremely personal. You will have to decide if the benefits will achieve your goals and if the risks and potential complications are acceptable. Your surgeon should review with you the relevant risks for your specific procedure.

You may be asked to sign a consent form to ensure that you fully understand the procedure and any risks and potential complications. You should feel free to ask any questions to help you understand those risks.

Important Considerations

- While breast reduction surgery may interfere with sensation, most of the time nipple sensation improves over time
- Breast and nipple piercing can cause infection
- Breast reduction surgery may limit a woman's ability to breast feed, although most women can still breast feed after having a breast reduction
- While a breast reduction can be performed at any age, ideally, breasts should be fully developed
- Changes in the breasts during pregnancy can alter the outcomes of previous breast reduction surgery, as can weight fluctuations



Risks can include:

- Allergies to tape, suture materials and glues, blood products, topical preparations, or injectable agents
- Anesthesia risks
- Bleeding (hematoma)
- Blood clots
- Breast asymmetry
- Breast contour and shape irregularities
- Changes in nipple or breast sensation, which may be temporary or permanent
- Damage to deeper structures such as nerves, blood vessels, muscles, and lungs can occur and may be temporary or permanent
- Deep vein thrombosis, cardiac, and pulmonary complications
- Excessive firmness of the breast
- Fat necrosis (fatty tissue deep in the skin could die)
- Fluid accumulation
- Infection
- Pain, which may persist
- Poor wound healing
- Possibility of revisional surgery
- Potential inability to breastfeed
- Potential loss of skin/tissue of breast where incisions meet each other
- Potential, partial or total loss of nipple and areola
- Skin discoloration, permanent pigmentation changes, swelling and bruising
- Unfavorable scarring

All risks will be fully discussed prior to your consent. It is important that you address all your questions directly with your plastic surgeon.

Recovery & Results

Following your surgery, gauze or bandages will be applied to your incisions. An elastic bandage or support bra will minimize swelling and support the reconstructed breast. A small, thin tube may be temporarily placed under the skin to drain any excess blood or fluid. A pain pump may also be used to reduce the need for narcotics.

You will be given specific instructions that may include how to care for your surgical site(s) following surgery, medications to apply or take orally to aid healing and reduce the risk of infection, specific concerns to look for at the surgical site or in your general health, and when to follow up with your plastic surgeon.

Be sure to ask your plastic surgeon specific questions about what you can expect during your individual recovery period.

- Where will I be taken after my surgery is complete?
- What medication will I be given or prescribed after surgery?
- Will I have dressings/bandages after surgery?
- When will they be removed?
- When can I resume normal activity and exercise?
- When do I return for follow-up care?

The immediate results of breast reduction surgery can include:

- Reduced breast size and volume
- Improved breast shape
- Relief from physical symptoms such as back and neck pain, skin irritation, and grooving from bra straps
- Improved self-esteem and body image

It is important to note that post-operative swelling and bruising may initially obscure the final results, and full recovery can take several months.



Recovery Period	What to expect
Week 1	<ul style="list-style-type: none">• Monitor pain, swelling and bruising (medication may be required)• Significantly limit your activity
Weeks 2-3	<ul style="list-style-type: none">• You will start to feel much better• Return to work (depending on your job)• Limit exercise and activities
Weeks 4-5	<ul style="list-style-type: none">• Continue to wear a support bra• Increase activity• Continue to be gentle with your breasts
Week 6 and beyond	<ul style="list-style-type: none">• Continue to perform breast self-examination• Schedule routine mammograms• Discuss scar optimization and resumption of normal activity with your surgeon

Cost

Prices for breast reduction can vary. A surgeon's cost may be based on his or her experience, the type of procedure used, and geographic office location.

Cost may include:

- Anesthesia fees
- Hospital or surgical facility costs
- Medical tests
- Post-surgery garments
- Prescriptions for medication
- Surgeon's fee

Breast reduction surgery is often covered by health insurance plans, but your plastic surgeon may need to get approval from your insurance company. This process may involve submitting a letter and photos. Once the authorization is granted, you can proceed with scheduling the surgery, but keep in mind that you will still be responsible for any co-payments or deductibles set by your insurance. If your insurance does not cover the procedure, you will have the option to pay for it out of pocket.

Your satisfaction involves more than a fee:

When choosing a plastic surgeon for a breast reduction, remember that the surgeon's experience and your comfort with him or her are just as important as the final cost of the surgery.

Make the Right Choice

Plastic surgery involves many choices. The first and most important is selecting a member of the **American Society of Plastic Surgeons (ASPS)**.

ASPS member surgeons meet rigorous standards:

- Board certification by the American Board of Plastic Surgery (ABPS)[®] or in Canada by The Royal College of Physicians and Surgeons of Canada[®]
- Complete at least six years of surgical training following medical school with a minimum of three years of plastic surgery residency training
- Pass comprehensive oral and written exams
- Graduate from an accredited medical school
- Complete continuing medical education, including patient safety each year
- Perform surgery in accredited, state-licensed, or Medicare-certified surgical facilities

Do not be confused by other official-sounding boards and certifications.

The ABPS is recognized by the American Board of Medical Specialties (ABMS), which has approved medical specialty boards since 1934. There is no ABMS-recognized certifying board with "cosmetic surgery" in its name. By choosing a member of The American Society of Plastic Surgeons, you can be assured that you are choosing a qualified, highly trained plastic surgeon who is board certified by the ABPS or The Royal College of Physicians and Surgeons of Canada.

Questions to ask my plastic surgeon

- ☐ Are you certified by the American Board of Plastic Surgery?
- ☐ Are you a member of the American Society of Plastic Surgeons?
- ☐ Were you trained specifically in the field of plastic surgery?
- ☐ How many years of plastic surgery training have you had?
- ☐ Do you have hospital privileges to perform this procedure? If so, at which hospitals?
- ☐ Is the office-based surgical facility accredited by a nationally- or state-recognized accrediting agency, or is it state-licensed or Medicare-certified?
- ☐ Am I a good candidate for this procedure?
- ☐ What will be expected of me to get the best results?
- ☐ Where and how will you perform my procedure?
- ☐ What surgical technique is recommended for me?
- ☐ How long of a recovery period can I expect, and what kind of help will I need during my recovery?
- ☐ What are the risks and complications associated with my procedure?
- ☐ How are complications handled?
- ☐ What are my options if I am dissatisfied with the outcome?
- ☐ Do you have before-and-after photos I can look at for this procedure and what results are reasonable for me?

This brochure is published by the American Society of Plastic Surgeons®, including text, graphics, illustrations, and images, and is strictly intended for educational purposes. It is not intended to make any representations or warranties about the outcome of any procedure. It is not a substitute for a thorough, in-person consultation with a board-certified plastic surgeon. The models depicted in this brochure are not actual patients, and the use of these model images is for illustrative purposes only.

Words to know

- **Areola:** Pigmented skin surrounding the nipple.
- **Breast reduction:** Also known as reduction mammoplasty, the surgical removal of breast tissue to reduce the size of breasts.
- **General anesthesia:** Drugs and/or gases used during an operation to relieve pain and alter consciousness.
- **Hematoma:** Blood pooling beneath the skin.
- **Intravenous sedation:** Sedatives administered by injection into a vein to help you relax.
- **Liposuction:** Also called lipoplasty or suction lipectomy, this procedure vacuums out fat from beneath the skin's surface to reduce fullness.
- **Local anesthesia:** A drug injected directly to the site of an incision during an operation to relieve pain.
- **Mammogram:** An x-ray image of the breast.
- **MRI:** Magnetic Resonance Imaging; a painless test to view tissue similar to an x-ray.
- **Reduction mammoplasty:** The surgical removal of breast tissue to reduce the size of breasts.
- **Sutures:** Stitches used by surgeons to hold skin and tissue together.



AMERICAN SOCIETY OF PLASTIC SURGEONS®

AMERICAN SOCIETY OF PLASTIC SURGEONS

444 East Algonquin Road
Arlington Heights, Illinois 60005-4664
(847) 228-9900
PlasticSurgery.org

***Connect with us on Facebook, Twitter,
Instagram and TikTok***

 facebook.com/PlasticSurgeryASPS

 twitter.com/asps_news

 instagram.com/PlasticSurgeryASPS

 tiktok.com/@PlasticSurgeryASPS

The American Society of Plastic Surgeons® (ASPS®) is dedicated to advancing quality care in plastic surgery by encouraging high standards in training, ethics, physician practice, research, and continuing medical education. ASPS members are certified by The American Board of Plastic Surgery® (ABPS) in The United States and its territories or The Royal College of Physicians and Surgeons of Canada®.

©2023 American Society of Plastic Surgeons®.
All rights reserved.

Reorder # 1807 - 0323