

Factsheet for Breast Uplift (Mastopexy)
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Why do I need a Breast Lift?

A breast lift, or mastopexy, is a surgical procedure performed to lift and reshape sagging breasts. It is typically sought after by individuals who are unhappy with the position, shape, or firmness of their breasts due to various factors such as aging, pregnancy, breastfeeding, weight fluctuations, after removal of breast implants or genetics.

What are the alternative options?

A simple alternative to a breast uplift is to wear padded bras. If you don't have too much loose skin and your breasts are not droopy, a breast enlargement using silicone implants may be a good option for you. If your breasts are droopy and too large for you, a breast reduction may give you the result you want.

Many women want a breast uplift when their families are complete, so if you are planning to have more children, you should consider delaying your surgery until after that. Although there is no risk of a breast uplift preventing you from getting pregnant in the future, and breast uplifts do not usually interfere with breastfeeding, being pregnant is likely to stretch the breast again and reduce the final result of the procedure. Most surgeons delay surgery for six to 12 months after breastfeeding has stopped, so the breast has had time to settle back to its original shape.

What is the purpose of a breast lift?

The purpose of a breast lift, also known as mastopexy, is to reshape and raise the breasts to a more youthful and aesthetically pleasing position. It is a surgical procedure that addresses sagging or drooping breasts by removing excess skin and tightening the surrounding tissue to achieve a firmer and more lifted appearance.

Several factors can contribute to the loss of breast firmness and shape, including pregnancy, breastfeeding, weight fluctuations, aging, and genetics. Over time, the breasts may lose elasticity, resulting in sagging or a downward position of the nipples. A breast lift can address these concerns by:

1. **Lifting and repositioning the breasts:** The procedure involves removing excess skin and reshaping the breast tissue to lift the breasts to a higher position on the chest. This can restore a more youthful breast contour and improve symmetry.
2. **Reshaping the areolas:** If the areolas (the pigmented areas around the nipples) have stretched or enlarged, a breast lift can reduce their size and reposition them to match the new breast shape.
3. **Improving breast firmness:** By removing excess skin and tightening the remaining tissue, a breast lift can enhance the firmness and tone of the breasts.

It's important to note that a breast lift does not change the size of the breasts or provide a significant increase in upper pole fullness.

What can I expect during the procedure?

During a breast lift procedure, you can generally expect the following:

1. **Consultation and Preoperative Planning:** You will have an initial consultation with your plastic surgeon to discuss your goals, medical history, and expectations. Your surgeon will evaluate your breast anatomy, skin quality, and nipple position to determine the most appropriate surgical technique for you. Preoperative instructions will be provided, which may include avoiding certain medications and arranging for someone to accompany you on the day of surgery.

2. **Anaesthesia:** Breast lift surgery is typically performed under general anaesthesia, ensuring that you are comfortably asleep throughout the procedure. Your anaesthesiologist will administer the anaesthesia and closely monitor you during the surgery.
3. **Incision Placement:** The specific incision pattern used will depend on the degree of breast sagging and the desired outcome. Common incision options include:
 - a. **Anchor-shaped incision:** This is the most common technique, involving incisions around the areola, vertically from the areola to the breast crease, and horizontally along the breast crease.
 - b. **Lollipop incision:** This technique involves incisions around the areola and vertically from the areola to the breast crease.
 - c. **Donut incision:** This technique involves a circular incision around the areola and is suitable for milder cases of sagging.
4. **Reshaping and Repositioning:** After the incisions are made, the surgeon will lift and reshape the breast tissue, repositioning the nipple and areola to a more elevated position. Excess skin will be removed to achieve a firmer and more youthful breast contour.
5. **Areola and Nipple Adjustment:** If necessary, the size and shape of the areola can be modified during the procedure to match the new breast appearance. This may involve reducing the diameter of the areola or repositioning it higher on the breast mound.
6. **Closure:** Once the desired reshaping and repositioning are achieved, the incisions are meticulously closed with sutures. The surgeon may use layered sutures in the breast tissue, and the skin may be closed with stitches, adhesive tape, or surgical glue.
7. **Postoperative Recovery:** After the surgery, you will be monitored in a recovery area as the anaesthesia wears off. You will have dressings, and a surgical bra placed to support the breasts and aid in healing. You will receive instructions on postoperative care, including how to manage discomfort, incision care, medication usage, and when to schedule follow-up appointments.

It's important to note that every individual's experience and recovery can vary. Following your surgeon's postoperative instructions and attending scheduled follow-up visits are crucial for a smooth recovery and optimal results.

What are the complications of breast lift procedure?

Like any surgical procedure, a breast lift (mastopexy) carries potential risks and complications. While complications are infrequent, it's important to be aware of them before undergoing surgery. Some potential complications of a breast lift may include:

1. **Scarring:** Breast lift surgery involves incisions, which will result in some degree of scarring. The extent and visibility of scarring can vary depending on factors such as individual healing ability, incision technique, and post-operative care. While efforts are made to minimize scarring, some patients may experience more noticeable, unsightly, wide, hypertrophic or keloid (red, elevated and painful) scars.
2. **Bleeding** It is possible, though unusual, to experience a bleeding episode during or after surgery. Should post-operative bleeding occur, it may require emergency treatment to drain accumulated blood (haematoma). Do not take any aspirin or anti-inflammatory medications for ten days before surgery, as this may increase the risk of bleeding. If blood transfusions are necessary to treat blood loss, there is the risk of blood-related infections. Heparin medications that are used to prevent blood clots in veins can produce bleeding and decreased blood platelets.

3. **Infection** Wound infections usually appear in the immediate postoperative period. Subacute or chronic infections may be difficult to diagnose or occur later. Should an infection occur, treatment including antibiotics, additional surgery or local wound care may be necessary. Infections can lead to compromise of the final result of surgery.
4. **Changes in nipple sensation**: Temporary or permanent changes in nipple sensation can occur after a breast lift. This can manifest as increased or decreased sensitivity, or even a complete loss of sensation in the nipples and surrounding areas. However, most patients regain normal sensation within a few months, although it can take longer in some cases.
5. **Skin Contour Irregularities** Contour and shape irregularities may occur after breast reduction. Visible and palpable wrinkling may occur. One breast may be smaller than the other. Nipple position and shape will not be identical one side to the next. Residual skin irregularities at the ends of the incisions or “dog ears” are always a possibility when there is excessive redundant skin. This may improve with time, or it can be surgically corrected.
6. **Asymmetry**: Despite efforts to create balanced and symmetrical results, there is a possibility of minor asymmetry between the breasts after a breast lift. Pre-existing breast asymmetry may also be present or become more apparent after the procedure.
7. **Delayed wound healing**: In some cases, the incisions may heal slowly or develop complications such as infection, poor scarring, or wound separation. These issues are relatively rare and can usually be managed with appropriate wound care and follow-up with the surgeon.
8. **Extrusion**: This is where deep stitches poke out through the skin. These can easily be removed.
9. **Wound Breakdown**: In rare cases, if infection progresses, the wounds may breakdown in small areas, especially at areas where there is great tension. If this happens, usually longer periods of dressings are expected and a longer healing period. Sometimes, you may need another surgery to address this.
10. **Changes in breast or nipple shape**: While the goal of a breast lift is to enhance breast shape, there is a slight possibility of unintended changes in breast or nipple shape. This can include over-correction, under-correction, or changes in the position or symmetry of the nipples.
11. **Loss of nipple or areola**: In rare cases, the blood supply to the nipple and areola complex may be compromised during surgery, leading to tissue necrosis (death of tissue). This can result in partial or complete loss of the nipple or areola, requiring additional surgical intervention. Smokers or individuals on nicotine have a higher risk of developing this complication.
12. **Anaesthesia-related risks**: General anaesthesia carries its own set of risks, including allergic reactions, respiratory problems, and adverse reactions to medication. However, these risks are generally minimal and can be discussed with the anaesthesiologist before the procedure.
13. **Changes in shape**: breast uplift procedure aims to lift the nipple to a more youthful position and reshape the breast to a more rounded shape and tightens the skin, however these results will not last for long. Typically, they last from 3-5 years and varies with each individual. Changes in weight, pregnancy, hormonal changes (e.g. menopause), age, smoking, life-style changes, and gravity, all contribute to the longevity of the results. Inevitably, breasts will droop over time under the effect of age, weight and gravity.

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14. **Other general surgical risks:** There are general surgical risks associated with any procedure, such as bleeding, infection, blood clots, and adverse reactions to medications. However, these complications are relatively rare in the context of a breast lift.
15. **Dissatisfaction:** Rarely, individuals may still not be satisfied with the results of the surgery, as it may not meet their expectations. Therefore, it is crucial to communicate your expectations with your surgeon to check if they are achievable or unrealistic.

It is important to note that while these complications can occur, most individuals undergo a breast lift without experiencing significant issues.

What are the post-operative instructions for Breast Lift?

- 1- **Dressings:** You will have shower proof dressings applied to your incisions, and around your areola (the darker area around the nipple). Please leave this on for a week after surgery until you see your nurse for dressing change.
- 2- **Showering:** You can have a shower within 48 hours of your surgery but try not to soak your dressings. Please avoid soaking yourself in a bath until your wounds are completely healed.
- 3- **Pain Relief:** Paracetamol and Ibuprofen (if you are not allergic) can be taken regularly alternatively in the first 3 days after surgery. This can be taken as follows, 1-gram (2 tablets of 500 mg) Paracetamol, followed by 200mg Ibuprofen 3 hours later, then another 1-gram (2 tablets of 500 mg) Paracetamol 3 hours later, and henceforth during the day, with a maximum of 4 g (8 tablets of 500 mg) Paracetamol and 600 mg Ibuprofen per day. Please consult your doctor, or pharmacist if you suffer of any conditions that preclude you from taking either medication.
- 4- **Support Bra:** You will need to wear a sports / support bra for a total of 8 weeks after the operation to support your breasts, minimise swelling and aid in wound healing.
- 5- **Avoid smoking and alcohol:** Smoking or using nicotine-containing products and alcohol can impair the healing process and increase the risk of complications. It is generally recommended to refrain from smoking, using nicotine-containing products and consuming alcohol for 4 weeks prior and 6 weeks after surgery.
- 6- **Maintain a healthy lifestyle:** Following a healthy lifestyle, including eating a balanced diet and staying hydrated, can support the healing process. Proper nutrition and hydration can promote tissue recovery and overall well-being.
- 7- **Driving:** You are advised not to drive for 4 weeks after the operation, provided there are no complications.
- 8- **Physical activity:** Please refrain from excessive and heavy exercise (e.g., going to the Gym, Running, and heavy weightlifting, etc.) for 8 weeks after the surgery. Walking for long distances is allowed after 4 weeks postop.
- 9- **Going back to work:** You may go back to work 4 weeks postop, depending on your healing and level of physical activity expected in your job.
- 10- **Dressing change** will be arranged for you either at your GP practice, your home or in the clinic depending on your circumstances and healing.
- 11- **Further appointments** will be arranged until full healing and recovery.
- 12- Results are expected at around 6 months.

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Additional Surgery Necessary

Should complications occur, additional surgery or other treatments may be necessary and can be unpredictable as the practice of medicine and surgery is not always an exact science. Although good results are expected, there is no guarantee or warranty expressed or implied on the results that may be obtained through the hospital does have specific terms and conditions which they should supply separately.

Patient Compliance

Follow all post operative instructions carefully; this is essential for the success of your outcome. It is important that the surgical incisions are not subjected to excessive force, swelling, abrasion, or motion during the time of healing. Personal and vocational activity needs to be restricted. Protective dressings and drains should not be removed unless instructed by your plastic surgeon. Successful post-operative function depends on both surgery and subsequent care. Physical activity that increases your pulse or heart rate may cause bruising, swelling, fluid accumulation and the need for return to surgery. It is wise to refrain from intimate physical activities after surgery until your physician states it is safe. It is important that you participate in follow-up care, return for aftercare, and promote your recovery after surgery.

Female Patient Information

It is important to inform your plastic surgeon if you use birth control pills, oestrogen replacement, or if you suspect you may be pregnant. Many medications including antibiotics may affect the preventive effect of birth control pills, allowing for conception and pregnancy, so please use alternate contraception until discussing with your family planning doctor.

Intimate Relations After Surgery

Surgery involves coagulating blood vessels and increased activity of any kind may open these vessels leading to a bleed, or haematoma. Activity that increases your pulse or heart rate may cause additional bruising, swelling, and the need for return to surgery and control bleeding. It is wise to refrain from intimate physical activities for 6 weeks after surgery.

Covid

Private healthcare providers review the covid situation on a regular basis. Unfortunately, there is a risk associated with acquiring covid during any hospital admission. However, the hospital takes a number of reasonable precautions and only people screened negative proceed with general anaesthetic procedures. There is reduced emergency and ICU capacity within the NHS due to covid and therefore there is a risk that, in the rare event that you need ICU, access to this may be delayed. All patients are screened and only proceed to surgery if negative; I am also swabbed. You have already had consultations where we discussed potential complications as well as receiving my own consent form/fact sheet and the above is additional information. Should you wish to defer your operation I fully understand. If you wish to discuss the specifics of this letter, I would be happy to do so.

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Health Insurance

Most health insurance companies exclude coverage for cosmetic surgical operations or any complications that might occur from surgery. Most insurance plans exclude coverage for secondary or revisionary surgery due to complications of cosmetic surgery.

Financial Responsibilities

The cost of surgery involves several charges for the services provided. The total includes fees charged by your surgeon, the cost of surgical supplies, anaesthesia, laboratory tests, and possible outpatient hospital charges, depending on where the surgery is performed. Depending on whether the cost of surgery is covered by an insurance plan, you will be responsible for necessary co-payments, deductibles, and charges not covered.

The fees charged for this procedure do not include any potential future costs for additional procedures that you elect to have or require in order to revise, optimize, or complete your outcome. In signing the consent for this surgery/procedure, you acknowledge that you have been informed about its risk and consequences and accept responsibility for the clinical decisions that were made along with the financial costs of all future treatments.

Changing your mind

You can change your mind at any stage and there is no obligation to have any procedure. This may be to discuss the procedure in more detail or to withdraw from the treatment completely. Please bring up any concerns as soon as you have them, and I can attempt to address them.

Smoking, Second-Hand Smoke Exposure, Nicotine Products (Patch, Gum, Nasal Spray)

Patients who are currently smoking, use tobacco products, or nicotine products (patch, gum, or nasal spray) are at a greater risk for significant surgical complications such as skin dying, delayed healing and additional scarring. Individuals exposed to second-hand smoke are also at potential risk for similar complications attributable to nicotine exposure. Additionally, smoking may have a significant negative effect on anaesthesia and recovery from anaesthesia, with coughing and possibly increased bleeding. Individuals who are not exposed to tobacco smoke or nicotine-containing products have a significantly lower risk of this type of complication.

If you are a smoker, or nicotine user, it is important to refrain from smoking at least 6 weeks before surgery and 4 weeks after to allow for wound healing.

Mental Health Disorders and Elective Surgery

It is important that all patients seeking to undergo elective surgery have realistic expectations that focus on improvement rather than perfection. Complications or less than satisfactory results are sometimes unavoidable, may require additional surgery and often are stressful. Please openly discuss with your surgeon, prior to surgery, any history that you may have of significant emotional depression or mental health disorders. Although many individuals may benefit psychologically from elective surgery, effects on mental health cannot be accurately predicted.

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Disclaimer

Informed-consent documents are used to communicate information about the proposed surgical treatment of a disease or condition along with disclosure of risks and alternative forms of treatment(s), including no surgery. The informed-consent process attempts to define principles of risk disclosure that should generally meet the needs of most patients in most circumstances.

However, informed-consent documents should not be considered all-inclusive in defining other methods of care and risks encountered. Your plastic surgeon may provide you with additional or different information which is based on all the facts in your particular case and the current state of medical knowledge.

Informed-consent documents are not intended to define or serve as the standard of medical care. Standards of medical care are determined on the basis of all of the facts involved in an individual case and are subject to change as scientific knowledge and technology advance and as practice patterns evolve.

If you have any questions after reading this information leaflet regarding the breast lift surgery (Mastopexy), please feel free to contact Mr Khashaba plastic surgery.