

UOA MS

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Patient Name:

Special Instructions:

Follow Up:

Mastectomy, With or Without Reconstruction

Mastectomy (removal of the breast) is a procedure most commonly used to treat *cancer* (tumor) of the breast. Different procedures are available for treatment. This depends on the stage of the *tumor* (abnormal growths). Discuss this with your caregiver, surgeon (a specialist for performing operations such as this), or *oncologist* (someone specialized in the treatment of cancer). With proper information, you can decide which treatment is best for you. Although the sound of the word cancer is frightening to all of us, the new treatments and medications can be a source of reassurance and comfort. If there are things you are worried about, discuss them with your caregiver. He or she can help comfort you and your family. Some of the different procedures for treating breast cancer are:

- **Radical** (extensive) mastectomy. This is an operation used to remove the entire breast, the muscles under the breast, and all of the glands (*lymph nodes*) under the arm. With all of the new treatments available for cancer of the breast, this procedure has become less common.
- **Modified radical** mastectomy. This is a similar operation to the radical mastectomy described above. In the modified radical mastectomy, the muscles of the chest wall are not removed unless one of the lesser muscles is removed. One of the lesser muscles may be removed to allow better removal of the lymph nodes. The axillary lymph nodes are also removed. Rarely, during an axillary node dissection nerves to this area are damaged. Radiation therapy is then often used to the area following this surgery.
- **A total mastectomy** also known as a complete or simple mastectomy. It involves removal of only the breast. The lymph nodes and the muscles are left in place.
- **In a lumpectomy**, the lump is removed from the breast. This is the simplest form of surgical treatment. A sentinel lymph node biopsy may also be done. Additional treatment may be required.

RISKS AND COMPLICATIONS

The main problems that follow removal of the breast include:

- **Infection** (germs start growing in the wound). This can usually be treated with *antibiotics* (medications that kill germs).
- **Lymphedema** . This means the arm on the side of the breast that was operated on swells because the *lymph* (tissue fluid) cannot follow the main channels back into the body. This only occurs when the lymph nodes have had to be removed under the arm.
- There may be some areas of **numbness** to the upper arm and around the *incision* (cut by the surgeon) in the breast. This happens because of the cutting of or damage to some of the nerves in

the area. This is most often unavoidable.

- There may be **difficulty moving the arm** in a *full range of motion* (moving in all directions) following surgery. This usually improves with time following use and exercise.
- **Recurrence of breast cancer** may happen with the very best of surgery and follow up treatment. Sometimes small cancer cells that cannot be seen with the naked eye have already spread at the time of surgery. When this happens other treatment is available. This treatment may be radiation, medications or a combination of both.

RECONSTRUCTION

Reconstruction of the breast may be done immediately if there is not going to be post-operative radiation. This surgery is done for *cosmetic* (improve appearance) purposes to improve the physical appearance after the operation. This may be done in two ways:

- It can be done using a *saline filled prosthetic* (an artificial breast which is filled with salt water). Silicone breast implants are now re-approved by the FDA and are being commonly used.
- Reconstruction can be done using the body's own muscle/fat/skin.

Your caregiver will discuss your options with you. Depending upon your needs or choice, together you will be able to determine which procedure is best for you.

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