Mastopexy (Breast Lift)

Changes in breast shape and firmness often occur due to pregnancy, weight loss, or aging. Breast tissue and skin lose their elasticity (ability to expand or stretch and return to normal). This allows the breasts to droop and lose their shape. Mastopexy is a type of cosmetic surgery done to reshape the breasts. It is often called a breast lift. Having a breast lift changes the look of your breasts and may improve their appearance.

Preparing for surgery

Prepare for the surgery as you have been told. In addition:

- Tell your doctor about all medications you take. This includes herbs and other supplements. It also includes any blood thinners, such as warfarin, clopidogrel, or daily aspirin. You may need to stop taking some or all of them before surgery.
- Do not eat or drink during the 8 hours before your surgery, or as directed by your surgeon. This includes coffee, water, gum, and mints. (If you have been instructed to take medications, take them with a small sip of water.)

Preparing for surgery

The day of surgery

The surgery takes about 2 to 4 hours. You may go home the same day. Or you may stay overnight.

Before the surgery begins:

- An IV line is put into a vein in your arm or hand. This line delivers fluids and medications.
- You will be given medication to keep you pain free during surgery. This may be general anesthesia, which puts you into a state like deep sleep. (A tube may be inserted into your throat to help you breathe.) Or you may have sedation, which makes you relaxed and sleepy. If you have sedation, local anesthesia will be injected to numb the area being worked on. The anesthesiologist will discuss your options with you.

During the surgery:

- The doctor makes incisions in the skin around your breast. You and your doctor will have discussed incision sites before surgery.
- The doctor moves the breast tissue higher on the chest. Breast skin is tightened to hold the tissue in position. Any excess skin is removed.
- The areola (dark skin around the nipple) and nipple are moved higher on the breast. If the size of the areola is being decreased, skin is removed. The areola is stitched into place.
- The process is repeated on the other breast.
- The incisions are closed with sutures, surgical glue, or both. A tube (drain) may be placed into an incision before it is closed. This drains excess fluid that may build up as the wound begins to heal.

After the surgery

You will be taken to a room to recover from the anesthesia. You may feel sleepy and nauseated. If a breathing tube was used, your throat may be sore at first. You’ll be given medication to control pain. When you’re ready, you will be able to go home with an adult family member or friend. Or, you may be taken to a room to stay overnight.

Recovering at home

This picture shows one type of mastopexy. Talk to your surgeon about how your own surgery will be done.
Once home, follow any instructions you are given. Your doctor will tell you when you can return to your normal routine. During your recovery:

- Take any prescribed medications exactly as directed.
- Wear the special bra or bandage you were given before discharge as directed by your doctor.
- Care for your incisions and the dressing (bandage) over them as instructed by your doctor.
- Follow your doctor’s guidelines for showering. Avoid swimming, bathing, using a hot tub, and other activities that cause the incisions to be covered with water until your doctor says it’s OK.
- When you shower, gently wash your incision sites. Then pat the incisions dry. Don’t apply lotions, oils, or creams to the incisions until after they are fully healed.
- Don’t raise your arms above breast level for 10 days. And don’t lift, push, or pull anything heavier than 10 pounds for at least 7 days.
- Don’t drive until you are no longer taking prescription pain medication and your doctor says it’s OK. When riding in a car, carefully position the seatbelt so that it doesn’t compress your breasts.
- Be aware that breast swelling may last for 3 to 5 weeks. If advised by your doctor, use a cold pack wrapped in a thin towel to relieve discomfort and control swelling. It’s important not to leave the cold pack on for too long, or your skin could be damaged. Put the pack over your bandages for no more than 20 minutes at a time. Then, leave it off for at least 20 minutes. Repeat this as often as needed during waking hours until swelling starts to improve. Don’t fall asleep with the cold pack on. If you’re not sure how to safely use the cold pack, ask your doctor.

### When to call your doctor

Call the doctor if you have any of the following:

- Extreme chest pain or trouble breathing (call 911 or other emergency service)
- A fever of 100.4°F (38.0°C) or higher (or as directed by your doctor)
- Bleeding or drainage through the special bra or Ace bandage
- Symptoms of infection at an incision site such as increased redness or swelling, warmth, worsening pain, or foul-smelling drainage
- Pain that is not relieved by medication
- More soreness, swelling, or bruising on one breast that the other
- Breast that is very warm to the touch

### Follow-up

You will have follow-up visits so your doctor can see how well you’re healing. If needed, stitches or drains will be removed during one of these visits. If you have any questions about your recovery, let your doctor know. Also, be aware that your breasts may sag again over time. If you have any concerns about your surgery results, talk to your doctor.

### Risks and complications

Risks and possible complications include:

- Bleeding
- Infection
- Blood clots
- Excessive or visible scarring
- Changes in breast or nipple sensation (temporary or permanent)
- Potential for breasts to sag again
- Breasts that are not the same shape or size
- Not being happy with cosmetic result
- Risks of anesthesia