General advice for going home after breast surgery

Introduction

Recovery after surgery involves healing, both physically and emotionally, and the time this takes varies from person to person. There is no right or wrong way just whatever works for you as an individual.

Going home can bring mixed emotions. You may feel relief that the operation is over but concern about what comes next, results appointments and possible treatments. You may feel isolated or insecure because you no longer have the immediate support of the hospital team. If you have any concerns or questions don't hesitate to contact the Macmillan Breast Care Nurse Specialists (BCNs) for advice or information by telephone or email (see below). Always remember to leave a message on the answer phone with as much information as possible as the breast care nurse office is not staffed and they are frequently out seeing patients.

You may also call Breast Cancer Care's free phone helpline on 0808 800 60 00 or Macmillan Cancer Support on 0808 808 00 00 for general cancer information and support.

Will there be any swelling or discomfort?

Your scar area, chest wall, breast and under arm area may be puffy and slightly swollen following surgery, particularly if you have had lymph nodes removed. This will gradually settle, but it may take several weeks and months before the areas begin to feel more 'normal'. It is unlikely that you will get a wound infection after your breast surgery but it is important to know what to look for. Any of the following symptoms could mean you have an infection:

- The wound feels Tender, swollen, warm to touch, redness in the area
- Discharge from the wound
- Feeling generally unwell with a raised temperature
- If you have any of these symptoms please get an emergency appointment with your GP or out of hours service (e.g. NHS 111). Please leave a message on the answer phone of the breast care nurses to update them on the situation but do NOT wait for a return call before contacting your doctor.

Sometimes once the drain has been removed a collection of fluid can develop in the breast or under arm area. This is called **SEROMA**, this is not a serious issue; it is normal fluid which the body has not yet found an alternative way of draining. A seroma is normally re absorbed over a period of time but can take several weeks or months. If it is causing a lot of pain or discomfort it may need to be drained. This is a simple procedure which can be done as an outpatient, it is not usually painful and it is not a medical emergency. If you are concerned about any swelling you have please contact the Macmillan Breast Care Nurse Specialists, your GP or out of hours service e.g. NHS 111 for advice.

If you develop a large amount of swelling within 24-48 hours of the drain being removed and start to feel unwell it is important that you are reviewed.

Occasionally blood collects within the tissues surrounding the wound causing swelling, discomfort and hardness. This is known as HAEMATOMA and will usually be reabsorbed by the body but can take several months. As with a seroma this may sometimes be

drained but is not a medical emergency and can usually be done as an outpatient. If you are concerned please contact the Macmiallan Breast Care Nurse Specialists, your G.P. or out of hours service e.g. NHS 111 for advice.

If you develop a large amount of swelling within 24-48 hours of the drain being removed and start to feel unwell it is important that you are reviewed.

Will there be any side effects?

It is quite usual for the breast, chest wall and ribs and arm (if lymph glands have been removed), to feel 'alien' for weeks and sometimes months. There are a wide variety of sensations including numbness, tingling, burning, pins and needles, aching and heaviness are all quite common. There can also be short sharp shooting pain in the breast and under arm, or scar area and occasionally an 'itchy nipple' sensation following a mastectomy.

This is nothing to worry about and for most people will resolve over a period of months. It is safe to use your arm as normally as possible even when it is feeling numb.

Wound care after I go home? (Please refer to the section for your consultant)

Details about your operation should have been discussed with you at your clinic appointment. It is important that you mention any issues or concerns about your expected post operative care so they can be discussed. If you think of any questions please contact your breast care nurse.

Mr Allan

If you have had a mastectomy, wide local excision or excision biopsy you will need to make an appointment with your practice nurse seven to ten days post surgery for removal of dressings and wound check. Following your operation you may have dissolvable sutures, clips or nylon sutures; the choice of closing suture material is made by the surgeon in theatre. If you have surgical clips or nylon sutures which require removal the practice nurse will be able to book any appointments for their removal and this is normally 10 - 14 days after surgery. Occasionally the sutures will remain in situ for 14 - 21 days at the request of your surgeon; the ward staff or breast care team will be able to tell you if this is the case.

If you have had breast reconstruction, revision of a reconstruction, differential breast augmentation (all have dissolvable sutures) or breast reduction (Mammoplasty; dissolvable sutures and clips) the breast care nurse will arrange an appointment to see you again in the outpatient department 10-14 days after your operation, (dependant on date discharged home). If the breast care nurse is unable to see you whilst you are in hospital they will contact you to arrange the appointment.

Your follow up appointment in the breast clinic will be sent to you; this is normally two to three weeks after your operation.

Mr Subramanian

You will need to make an appointment with your practice nurse 10-12 days post surgery for removal of the dressings and a wound check. You will have disolvable sutures which do not requure removal. If you are concnerned or have questions please contact the Macmillan Breast Care Nurse Specialists for advice

All patients

If you are discharged home with your drain bottle the ward staff will complete a referral to the community district nursing team for management of the drain and any necessary dressings or suture care. Some people find the removal of the drains a little uncomfortable and you may want to take some pain relief before it is done. Usually you're asked to lie down and you may find it helpful to take some slow deep breaths. The stitch (which holds the drain in place) is cut and removed and then the tube itself. A small padded dressing is applied to the area, this can be removed 24-48hours later. Please refer to the leaflet 'Advice for patients discharged home with a drain following surgery to the breast and/or axilla', which you should have received prior to discharge home.

How soon will I be able to resume normal activities?

Once you get home from hospital, you can try to do a little more physical activity each day. Try not to set yourself enormous tasks and remember to rest between them; your body needs time and energy to recover. You should be able to return to most of your normal activities within a few weeks of your operation but this will vary from person to person and it is helpful to take things gently at first try to avoid strenuous housework such as vacuuming, ironing or carrying heavy shopping for the first 1 or 2 weeks. You may have more discomfort and stiffness as you begin to move your arm more and become more active. This usually improves naturally over time. Eating well will also help your body recover and your wound to heal and a healthy balanced diet is recommended.

When will I be able to drive?

Depending in the type of surgery you have had you may be advised to avoid driving for between one and four weeks. It is important to wait for your wound to heal before you start driving and if you have a large amount of swelling allowing this to resolve first may make driving easier and more comfortable. It is important that before you start driving again you feel safe and confident that you can handle you car in the event of an emergency. It is advisable to start with short journeys and may be useful to have a companion with you at first. Breast surgery does not exempt you from wearing a seatbelt and this may be uncomfortable. To alleviate this you may try using a small thin cushion or placing extra padding around the seatbelt or purchasing a seatbelt clip (available from motoring stores). You may also want to check with you insurance provider that you are covered.

When can I return to work?

How soon you return to work will vary depending on your job and any follow on treatments you require as well as your progress recovering from your surgery. Most people will usually require at least four to eight weeks off work and then will be able to reassess the situation as more information becomes available. If you feel you want to return to work earlier than this and are feeling fit and well then you can.

Follow up care

Your follow up appointment in the breast clinic will be sent to you; this is normally two to three weeks after your operation. This appointment is to discuss your histology results and begin the discussions of future treatment you may need.

Follow up care will at regular intervals and further information can be found in the 'Follow up schedule - following treatment for breast cancer' leaflet, which you can get from the breast clinic or the breast care nurses.

Sources of information

More information can be found in the following leaflets and booklets, which you may have been given:

Advice for patients discharged home with a drain following surgery to the breast and/or axilla – East Sussex Healthcare NHS Trust – supplied if you are discharged with a drain in. Your Operation and Recovery – Breast Cancer Care

Getting Fitter Feeling Stronger – Breast Cancer Care – supplied if you have had lymph glands removed

Reducing the risk of lymphoedema – Breast Cancer Care - supplied if you have had lymph glands removed

Breast Cancer Care:	Free phone helpline: 0808 800 60 00
Macmillan Cancer Support:	Free phone helpline: 0808 808 00 00

Contact Numbers

If you have any questions/concerns following your discharge from hospital, please contact the following:

Monday – Friday 9-5 (Excluding Bank Holidays and weekends)

Conquest Hospital Patients:

Macmillan Breast Care Nurse Specialists:Louise Hunter Tel. 0300 131 4500 ext 734834 or Juliette Twyman or ext 734833 Your GPSecretary to Miss Shah:0300 131 4500 ext 735056Secretary to Mr Subramanian:0300 131 4500 ext 735057 (Conquest)

Eastbourne DGH Patients:

Macmillan Breast Care Nurse Specialists: Emma Robb, Katy Hollobon or Heather Driver 0300 131 4500 ext 734604 Your GP Secretary to Mr Allan: 0300 131 4500 ext 735385 Secretary to Mr Subramanian: 0300 131 4500 ext 735385 (Eastbourne)

Out of Hours:

Eastbourne Patients:Your GP, NHS 111, The ward you were discharged fromConquest Patients:Your GP, NHS 111, The ward you were discharged from

Important information

The information in this leaflet is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the Patient Experience Team – Tel: 0300 131 4731 or by email at: esh-tr.patientexperience@nhs.net

Hand Hygiene

The Trust is committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other Formats

If you require any of the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department.

Tel: 0300 131 4434 Email: esh-tr.AccessibleInformation@nhs.net

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

Reference

The Conquest and Eastbourne breast multidisciplinary teams have been consulted and agreed this information.

Next review date:	December 2023
Responsible clinician/author:	Louise Hunter (Macmillan Breast Care Nurse Specialist)

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