

# Advice following breast surgery and/or reconstruction

Patient Information Series PI 10a

This leaflet should be given with the Breast Cancer Now  
leaflet: '**Exercises after breast cancer surgery**'



Mount Vernon  
Cancer Centre

## Contacts

Your oncologist secretary: .....

Your local breast care nurse: .....

Physiotherapist: .....

Physiotherapy Department (Mount Vernon Hospital):

..... 01923 844430

## National Organisations

Breast Cancer Now: ..... 0808 800 6000  
[www.breastcancernow.org.uk](http://www.breastcancernow.org.uk)

Macmillan Cancer Support:  
[www.macmillan.org.uk](http://www.macmillan.org.uk) ..... 0808 808 0000

Contact Centre Hub ..... 0333 332 5470  
(General enquiries and appointment queries)

**24 hour Acute Oncology Service**  
**Mount Vernon Cancer Centre: 07825 028855**

# Advice following breast surgery and/or reconstruction

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## Introduction

**Please read this leaflet alongside the Breast Cancer Now leaflet 'Exercises after breast cancer surgery'.**

The Breast Cancer Now leaflet highlights which exercises are important to do after any type of breast surgery. The leaflet you are currently reading provides some additional advice if you have had reconstruction surgery and/or lymph node removal.

Exercises and scar massage are designed to help you regain as much movement in your arm as you had before your surgery. They will also help to prevent pain and stiffness in your shoulder.

If you are finding it difficult to lift your arm or to do the exercises, please tell your breast care nurse who may refer you for physiotherapy.

If there is anything in this leaflet that is unclear, please ask your breast care nurse.

## Effects of surgery (and/or radiotherapy)

### **After your drain has been removed**

You may notice a soft swelling in your chest or armpit a few days after the drainage tubes have been removed from your operation wound. This is caused by a collection of fluid. If this happens, please contact your breast care nurse for more advice.

### **What is scar tissue?**

Scar tissue is produced as a result of the body's normal healing mechanism. It takes about 18 months to two years for scars to settle down. During this time, symptoms related to the scar can be relieved by regular firm massage with a non-perfumed cream.

You may start scar massage once your wounds are fully healed. This is usually at about two to three weeks after your operation. By doing this as well as your exercises, it is likely that you will regain your normal range of movement.

## **Why do I need to massage my scars?**

When your wounds are dry and have no inflamed, moist or scabby areas, they are fully healed. You can now start massaging them with a non-perfumed cream to reduce hard, lumpy areas over and around them.

Try to do the massage little and often over the day. This is because scars respond to regular massage, for example two minutes, six times a day. If you have had breast reconstruction, remember to massage your donor site scars as well.

To start with it may feel like they tighten up again by the next day, but if you carry on they will start to soften and get better. It is also helpful to move the skin around your scar over the tissues below, by holding your (dry) skin with the flat of your hand and making small circular movements. It may be useful to work at this exercise from below your breast and up towards your collar bone.

It is important that you keep doing your scar massage for at least a year. This is because the scarring will continue to become softer, smoother and more mobile. If you are unsure, please ask your breast care nurse as you may need some help from a physiotherapist.

If you need radiotherapy, you may have to change your massage. The radiographers will tell you what to do as they will be monitoring any skin reaction from your treatment.

## **What is cording?**

Cording may sometimes appear after your operation as tight bands or 'cords' in your armpit. These can sometimes stretch down your arm. You may have a sharp pulling sensation or pain when you try to stretch your arm.

This often happens between one to eight weeks after your operation. If the exercises and scar massage do not help this problem within a month, you may need to see a physiotherapist to help you. Your breast care nurse can arrange this for you.

## **What should I do if I have cording?**

This should not stop you doing your massage, exercises or stretches. Carry on massaging the areas where you feel the cords, working from your arm up into your armpit.

These cords may 'pop' or snap. If they do, this will improve your movement and will not have any ill effects.

## **Why do I need to do exercises?**

The exercises are designed to improve the range of movement in your arm and shoulder. They are grouped in sections so that you can gradually increase the movement in your arm as you recover from surgery. It is important that you start these exercises gently as you may have pain when you start to move your arm.

It is important to take painkillers, especially in the days after your surgery. You should carry on taking them until your arm movement is back to normal. If your pain carries on and is not relieved by your regular painkillers, please tell the nurse in charge or your breast care nurse. You may need to see a physiotherapist for more advice.

If you have had lymph nodes removed from under your arm we recommend that you continue these exercises for at least two years, maybe even for life, depending on the number of lymph nodes removed. Performing arm exercises and leading an active life will help to reduce your chances of developing lymphoedema.

## **What if I have had a breast reconstruction?**

You should **wait three weeks** before starting the exercises and stretches in the 'breast cancer now' leaflet.

If you are in pain or uncomfortable, keep taking your regular painkillers. It is important that you do not limit your exercises because of pain or discomfort. However, if they are painful to do, it is also important that you do them gently. Do not try to push through a lot of pain.

You can follow the BAPs App; this been designed by physiotherapists, a breast cancer surgeon and some breast cancer survivors to provide you with post-operative exercises after breast surgery.

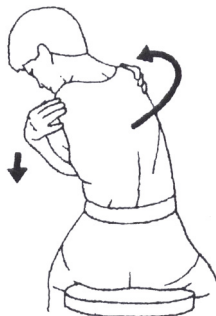
## Exercises for after breast reconstruction

Please ask your breast care nurse which exercises you should do.

### LD Flap Reconstruction - Exercise 1

Sit upright on a chair or bed with your arms crossed over your chest, holding the opposite shoulder.

Keeping your pelvis still, rotate your body around to the left, then to the right.



### LD Flap Reconstruction - Exercise 2

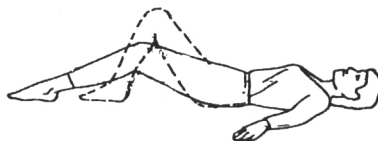
Sit or stand with an upright posture.

Stretch your arm over your head and bend your body over sideways. Return to an upright position.

### DIEP & TRAM Flap Reconstruction - Exercise 3

Lie on your back, with your knees bent up in a relaxed posture. Tighten your tummy muscles and gently slide one foot down the bed until your leg is straight, then slide it back again, keeping contact with the bed all the time.

Repeat with the other leg.



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## What should I do after I have left hospital?

### Exercise

We advise you to carry on doing your exercises three times a day after you go home. This is very important if you are going to have radiotherapy. Try to take time to do the exercises slowly and carefully. It is sensible to wear loose clothing and do them in a warm area.

If you do not carry on improving and regaining your full movement, you may need to do the exercises more often or see a physiotherapist who can help you further.

Remember, if you are having pain in your arm, keep taking your regular painkillers. It is important that you do not limit your exercises because of pain or discomfort. However, if they are painful to do, it is also important that you do them gently. Do not try to push through a lot of pain.

As you use your arm more you may feel some aching around the shoulder. This discomfort should improve as the muscles become stronger.

**If you have had breast reconstruction, your donor site will also benefit from regular exercises and stretches.** (See the exercises on page 7.)

If you need more help, please ask your breast care nurse who may refer you for physiotherapy.

### Am I allowed to lift or grip things?

**Do not try to do any heavy tasks. This includes carrying heavy bags of shopping, suitcases or watering cans until three months after your operation.**

#### ○ Weeks one to six

For the first three weeks do not carry anything heavier than a bag of sugar, and then for no more than 10 minutes.



For the first six weeks, you should limit the use of your affected arm for repetitive tasks such as ironing, vacuum cleaning or using a computer. You may gradually increase the time you spend on such tasks from 10 to 30 minutes over these six weeks.

You may find your shoulder muscles ache as you increase the use of your arm. This is normal and should improve.

○ After six weeks

Carry on increasing the use of your arm over the next six weeks.

## **What is Lymphoedema?**

This is when a swelling is caused by a build up of lymph fluid in the tissues. Anyone who has had surgery and/or radiotherapy to the armpit is at risk of developing lymphoedema. Your risk is increased if you are inactive or overweight. It can develop months or even years after treatment has finished and may be brought on, or made worse by an infection in the arm/chest/breast areas, gaining excessive weight or leading an inactive lifestyle.

It occurs as a result of damage to, or removal of the lymph nodes/vessels in the armpit following surgery and/or radiotherapy. These normally allow lymph fluid to drain away. But when they have been damaged, the fluid collects in the tissues.

It is normal for you to have some swelling from the surgery you have had. If it carries on for longer than three months after your operation, it may be that you need to see a lymphoedema specialist.

Lymphoedema is a life long incurable condition which can be managed. It is important to tell your GP or your breast care nurse if you have a persistent swelling, pressure or a feeling of tightness in your arm/chest/breast. This is so that you can be referred for treatment at an early stage.

It is important to carry on doing your arm exercises for at least two years after your radiotherapy. It may be necessary to do these exercises for life.

Research has shown that exercise does not increase the risk of lymphoedema or make it worse. Regular activity/exercise that you enjoy doing will help with lymph drainage and keep your joints supple. Keeping your weight within a healthy BMI range will help to manage lymphoedema and reduce the chances of it developing. Wearing a well fitting, supportive, non-moulded/padded cup bra daily will help support the breasts and reduce chances of developing lymphoedema in your breasts. Please ask your breast care nurse for advice on bra styles.

## **Will I notice any changes in sensation?**

After your breast surgery you may feel a change in sensation over your breast and/or inner arm. If you have had a breast reconstruction you may also feel a change in sensation over the donor site of your flap. Many patients described these as numbness, tingling or extra sensitivity to light touch.

This is because the nerves have been affected during your surgery. These sensations are not harmful and may carry on for many months after your surgery. Some people have a small amount of numbness for good (permanently).

You can ease any extra sensitivity by regularly touching the area with your hands and with other materials, such as cotton wool, sponge and velvet. Progress to harder materials, such as rough towelling or clothing. This helps to desensitise the skin.

## **When can I return to work?**

There are a number of factors you will need to consider before you return to work. These include the type of work you do and whether your treatment will affect your ability to carry it out. Please ask your doctor for advice.

## **When can I start doing my sport or leisure activity?**

When your scar has healed fully, you may begin swimming. However, if you are having chemotherapy please ask the team treating you. Start slowly and build up gradually over the next six weeks to your previous level of fitness. This also includes using gym equipment.

## **For patients having radiotherapy**

You may go swimming during treatment. Moisturise well before and have a good rinse after swimming, to reduce the chances of a reaction from the chlorine. However, if the chlorinated water irritates your skin you may need to stop. Please ask the radiographers for advice.

Most other leisure activities can be started within two or three months. Please ask your surgeon if you need specific advice about any other sport or interest.

If you have any queries about exercise, activity or care of your arm, or about anything in this leaflet, please ask your breast care nurse.

## **When can I start driving again?**

We advise that you do not start driving for at least two to three weeks after your operation. Patients who have had reconstructive surgery should not start driving for four to six weeks. You must not start to drive until you feel confident that you are safe and able to react in an emergency.

When you start driving again, it is a good idea to go for short trips at first and then increase the distance as you feel able. You should check with your insurance company as they may have exclusion clauses about recent surgery.

## **Where can I get more information?**

If you are worried or would like to discuss any further issues, please contact your breast care nurse based at your local district general hospital.

## Other help and support

People who have cancer often say that, during their illness, they experience a range of emotions. Many find it to be a stressful, anxious and confusing time.

If you have any questions or concerns about cancer and your treatment, are struggling to cope or need some support, please visit the Lynda Jackson Macmillan Centre (LJMC). Please feel free to drop in before, during or after any of your visits to the Cancer Centre.

The team at the LJMC works as part of the overall team caring for you to provide help, support and information in a relaxed setting to help you better cope with cancer and its treatment. Your family and friends are also welcome to visit the centre or call the Helpline.

A range of support services are available at the centre. These include complementary therapy, relaxation sessions, counselling and financial advice. Please ask for more details.

You do not need an appointment to visit the LJMC which is located next to the Chemotherapy Suite by Gate 3. If you are unable to get to the LJMC, you can call the Helpline on 020 3826 2555.

Please see the back page of this leaflet for more information.

### **If you normally pay for NHS prescriptions...**

People undergoing treatment for cancer do not have to pay NHS prescription charges if they have a valid medical exemption certificate. To get an exemption certificate, ask your GP for an application form.

Mount Vernon Cancer Centre is committed to ensuring that patients receive the best quality of care regardless of their gender identity or sexual orientation.

### **Consent**

It is a legal requirement to have a signed consent form from you before the start of your treatment.

If you have already been given one of these forms, please bring the completed form with you when you come for your first appointment.

If you have not been given a form, this will be discussed with you at your first appointment.

### **Identification**

Please note that it is a legal requirement for the staff to check your name and details against your treatment sheet every time you attend.

### **Pregnancy/fathering a child**

Patients must not be pregnant or become pregnant, or father a child, during a course of treatment or for some months afterwards. **Please discuss this with your cancer specialist.**

If you are of child bearing capacity we ask that you inform a member of staff. It is our duty of care to enquire whether individuals may be pregnant or breastfeeding. This information will be kept in strict confidence.

If you think there is a chance, however small, of you or your partner being pregnant during treatment, it is extremely important that you discuss this with your oncologist, radiographer or nurse as soon as possible.

This publication has been produced by the Information team at Mount Vernon Cancer Centre. Contributors include health professionals, patients and carers who have expertise and experience in the topics covered by this publication. All our publications are reviewed and updated regularly. If you would like any details of the references used to write this information please contact the Information team on 020 3826 2555.

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# Questions or concerns about cancer and treatment? Need some support? Need to talk?

Drop in to the Lynda Jackson Macmillan Centre  
or call the support & information helpline

We will listen to your concerns, answer your questions  
and guide you to further information  
and services to help you

cancer treatment	practical support
side effects of treatment	headwear workshops
day-to-day living with cancer	exercise
finance and benefits	diet and nutrition
counselling	health and wellbeing
someone to talk to	talking to family and friends
emotional support	Look Good Feel Better
complementary therapy	self-help courses
relaxation services	life after cancer

The Lynda Jackson Macmillan Centre is situated between the  
Cancer Centre and Gate 3 (White Hill)

Opening hours: Monday–Friday 9.30am–4.30pm

**020 3826 2555**

[www.ljmc.org](http://www.ljmc.org)

Supporting people affected by cancer  
from diagnosis, through treatment and beyond