



PATIENT INFORMATION SURGERY FOR A MASTECTOMY WITH OR WITHOUT AXILLARY LYMPH NODE DISSECTION OR SENTINEL NODE BIOPSY

Your Preadmission Visit

You will receive information about:

- preparing for surgery (review of any lymph node surgery)
- medications to take the morning of your operation
- discharge planning: what to expect after surgery (care of your incision, drain care, arm exercises)
- community services to help support you (Community Care Access (CCAC) visits, Peer Support through the Canadian Cancer Society)

You may have blood, urine tests, an ECG (heart tracing) and/or a chest x-ray.

The Day before Surgery

- Some patients will be instructed to come to hospital the day before surgery for the sentinel node markings (your nurse will review this with you at the Preadmission visit).
- Practice the Range of Motion (for shoulder / arm), deep breathing and leg exercises.
- Ensure arrangements are in place for someone to take you home and stay with you overnight.

The Day of Surgery

- Follow the instructions you received in Preadmission about when to stop eating and drinking.
- Take your regular prescribed medications as instructed with a sip of water, in the morning. Diabetic medication is not taken the morning of surgery, unless instructed by a doctor.
- If you have diabetes, your blood sugar will be checked when you come to the hospital.
- Do not wear any creams, lotions, powders and deodorant on the side of the surgery.
- Wear a top that buttons, snaps or zips all the way down the front for easier off and on.
- An intravenous (IV) will be started.
- If you are having a sentinel node biopsy, and markings were not done the day before surgery, hospital staff will take you to Nuclear Medicine for preparation a few hours before surgery.

After Surgery

- You will be in the recovery area (PACU) for about 1 hour and in the Surgical Day Care Unit (SDCU) for about 1-2 hours.
- The incision(s) on your chest and/or under your armpit may have dissolvable sutures and be covered with paper tapes and a clear plastic dressing.
- There will be 1-2 drainage tubes attached to drainage collectors coming from the incisions. You will receive instructions on how to care for the drain(s).
- Your arm will be elevated on a pillow.
- The nurse will offer you pain and nausea medication to keep you comfortable.
- Take deep breaths and move your legs while in the recovery and day surgery area.
- You will be helped to sit up on the side of the bed and go to the bathroom before discharge.
- You will be encouraged to drink fluids and the IV will be removed when you are drinking well.
- Before discharge the CCAC nurse may speak with you, provide home supplies and arrange home visits, which will start the next morning. You will be given a phone number to call if you need assistance before the first visit.
- You will receive a prescription for pain pills and a follow up appointment.

LIFESTYLE AFTER YOUR SURGERY

Activities, Rest and Common Concerns

You may need extra rest in the first few weeks after your surgery. Try to save your energy for the most important jobs of the day. How quickly you resume your usual activities, will depend on your type of surgery and your doctor's orders.

What about Sexual Activity?

Physically, sexual activity can be resumed soon after surgery. Sometimes your chest may feel numb, so your partner should be aware that stroking or applying pressure may be uncomfortable for you. A change in position during lovemaking may decrease this discomfort. If you are worrying about your partner's reaction, it is important to talk about these concerns. It is not so often the physical changes that cause sexual problems, but how a person feels about the changes. Talking with someone who is comfortable with the topic, may reduce some of your anxieties.

The Many Feelings You Will Have

Denial, anger, fear, guilt, worry, sadness and depression are all very normal reactions. Each woman may have some or all of these feelings after hearing they have breast cancer. Many will fear the surgery, the recurrence of the cancer, or the changes various treatments will bring into their lives. Distracting yourself through activity, talking with someone, or learning relaxation skills may help to cope with these worries.

Prosthetic Services

A temporary soft prosthesis is available free of charge from the Peer Support Program of the Canadian Cancer Society. When your incision has healed well, a permanent prosthesis can be bought. A wide choice is available for women who have had a simple mastectomy, or a modified radical mastectomy.

A list of registered vendors who have trained fitters is available to you from your doctor.

The breast prosthesis is expensive, but through the Assistive Devices Program, these are partially funded. Under this program, a prosthesis can be bought every 2 years, or it can be replaced sooner if a weight gain or loss affects the initial fit.

Check further details with the fitter and/or your doctor.

Financial support is also available through the Patient Assistance Fund at the LRCP.

Forms for both of these programs are available at your follow up visit after surgery.

Support Services

Peer support visitors are trained volunteers who have had breast surgery themselves. They can visit you in your home either before or after surgery. Since they have experienced similar surgery, they offer practical tips and may be able to share your feelings.

There are many support programs in the community, such as Wellspring, Braz for the Cause (financial support) and the Canadian Cancer Society Peer Support Program. Doctors, nurses, clergymen, counselors, volunteers, and friends are all potential support people for you to turn to when you need help coping. You don't have to be alone.

In the event you need follow up therapy at the Cancer Clinic, a doctor, nurse, or social worker will be able to answer your questions.

DISCHARGE INSTRUCTIONS MASTECTOMY and /or AXILLARY LYMPH NODE DISSECTION (ALND) or SENTINEL NODE BIOPSY

CARE OF THE SURGICAL SITE

- Your sutures will be dissolvable. The incision may be covered with a plastic film (Tegaderm) and paper tapes (steri-strips). Remove the plastic dressing in 48 hours unless told otherwise and the steri-strips in 10 days (sooner if the ends curl up).
- You can expect a small amount of bleeding along the incision line for 24-48 hours. Check your incisions daily for increased redness, drainage and swelling.
- You may have 1-2 drains (hemovac) in place. **SEE DRAIN CARE** – next page.
- Keep the incision dry for 48 hours. Then you may shower with your back to the water. If you get it wet, gently pat dry with a towel. Avoid soap, deodorant, or powder around the incision area.
- If clothing is irritating to the incision, you may cover it with gauze bought at your pharmacy.
- Wear soft loose clothing for 1-2 weeks after surgery to decrease pressure on the chest incision.

PAIN MANAGEMENT

- You may have a combination of mild to moderate pain, and numbness along the incision line and under your arm. The numbness usually goes away in 6 months.
- Take your prescription pain pills as directed regularly for the first 24 - 48 hours.
- For less pain, **instead of** your prescription pain medication, you may use Acetaminophen (Tylenol) plain or extra strength or Ibuprofen (Advil/Motrin) as instructed on the package.
- Prescription pain medication can cause nausea or constipation.

DIET

- **To prevent constipation often caused by prescription pain pills:**
 - Drink 6-8 (8 oz) glasses of fluids (water, milk, juices) daily.
 - Increase your fiber intake (fruits, vegetables, bran).
 - Use stool softeners (Colace, Sofflax) as long as you are taking prescription pain pills.
 - If your bowels have not moved in 2 days, take a gentle laxative like Milk of Magnesia.
- You may feel sick to your stomach for 24 hours after a general anesthetic. For relief, eat light and try Dimenhydrinate (Gravol). This may be bought without a prescription.

ACTIVITY

- **You must have an adult take you home by car or taxi. If you are an outpatient you must have someone stay with you overnight at home. You should not drive for at least 24 hours after surgery due to the effects of surgery and drugs you have received.**
- It is normal to feel tired or weak for 1-2 weeks after surgery. Take planned rest periods but avoid napping longer than 1 hour during the day so that your night time routine is not affected.
- How quickly you resume your usual activities, will depend on the type of surgery you have had and on your doctor's orders. Do gradually increase your activity with daily walks.
- When you are lying or sitting, raise your arm on a pillow for added comfort.
- **For Mastectomy surgery only:**
Use your arm on the operative side to do normal activity. Do not lift anything heavier than 5 lbs. for 1-2 weeks.
Start the Range of Motion Exercises (**see instruction sheet**) within 24 hours after surgery. Continue until full use of arm and shoulder returns and you have seen your surgeon and had an appointment at the London Regional Cancer Program.
- **For Mastectomy surgery with Tissue Expanders:**
Use your arms to do everyday activities, but **do not** lift your elbow(s) above shoulder level for 2 weeks.
2 weeks after surgery, start the Range of Motion Exercises (**see instruction sheet**) and continue until full use of arm and shoulder returns and you have seen your surgeon and had an appointment at the London Regional Cancer Program.
- If you had a sentinel node biopsy, your urine and stool may be green for 24 hours after surgery.
- Most of your clothes will fit when your incision has healed. If you want to buy special swimwear or brassieres, refer to the list in your binder.

FOLLOW UP

- It usually takes 10 days or longer for the pathology report to return. Keep your follow up appointment with your surgeon (usually 2 weeks). If you do not receive an appointment or need to change it, please call the surgeon's office to make other arrangements.

CALL YOUR SURGEON OR GO TO EMERGENCY DEPARTMENT IF YOU HAVE:

- bleeding, redness, foul smelling discharge, or hard swelling around the incision
- increased pain that is not relieved by your pain pills
- fever 38.5°C (101°F) or greater, or chills, lasting longer than 24 hours
- nausea/vomiting lasting longer than 24 hours that is not relieved by Dimenhydrinate (Gravol)

After hours call: LHSC – 519-685-8500

**Ask for the General Surgery Resident on call for your Surgeon OR
Go to Emergency Department at LHSC Victoria Hospital**

