

Sultan Qaboos Comprehensive Cancer Care & Research Centre Breast Cancer Program

Mastectomy

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Mastectomy

The aim of mastectomy is to remove all the breast tissue and involves removal of some of the skin over the breast including the nipple. A cut is made above and below the nipple and all the breast tissue down to the chest wall muscle is removed. Sufficient skin is removed so that at the end of the operation there will be no loose skin and a flat straight scar is left on the chest wall. The exact direction of the wound scar depends on where the tumor is situated but the most common scars are horizontal or diagonal. If all the lymph glands are being removed (axillary node clearance) or some of the axillary lymph glands are being removed (axillary node sampling) then this is usually performed through the same cut (incision) used to remove the breast. At the end of the operation, two drains are placed. These come out below the wound and are usually removed the day after surgery. In some cases, they stay little longer, in which case you can go home with the drains in place.

Problems that can occur after mastectomy

- The edges of the mastectomy wound may not heal because of problems with blood supply. If this happens the edges may become inflamed and can scab. This usually settles without any specific treatment.
- You sometimes find you are left with lumpiness at the outer edge of the scar under the armpit. This lumpiness and swelling usually settles over a period of time. Occasionally this extra tissue (the common name for this is a dog ear) needs to be trimmed at a later date.
- Infection. Any operation site can become infected. It affects about 4 in every 100 women after mastectomy. The wound becomes red, swollen and very tender and there can be a discharge through the wound.
- Even though all bleeding that is visible is stopped during the operation, bleeding form the cut edges of the breast tissue can occasionally start after the operation and cause blood to collect in the wound. This is uncommon and happens in about 1 in every 100 patients. The normal time for this to develop is within the first 12 hours after the operation. This is the reason why your wound is checked following surgery. If a large amount of blood collects this need draining by a second operation.

• Sometimes fluid can collect underneath the mastectomy scar and produce a swelling called a seroma. It does not usually cause too much discomfort but may require removal with a syringe and needle when you come back to the clinic. Because the area near the wound does not have proper feeling this is usually a painless procedure. Fluid can build up before you return to the clinic, in which case you will need to contact our clinical nurse specialist or the ward to make arrangements to come in and have this drained. Some people need this fluid drained on a number of occasions but this is not an important problem and it usually settles within a few weeks of surgery.

The length of time spent in hospital following this operation is routinely overnight. In some cases this may be longer on the advice of the medical team.