

## LATISSIMUS FLAP BREAST RECONSTRUCTION

### BEFORE YOUR SURGERY

*What can I expect during my consultation?*

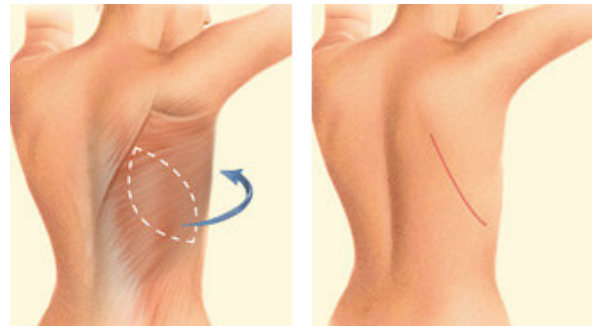
If you're entertaining latissimus flap reconstruction, Dr. Ellis and his team will want to know your journey to his office. It is important to document your previous breast surgeries, any previous implant surgery or reconstruction, and surgeries on your back or flank. Please recall any previous cancer care, such as chemotherapy or radiation therapy. Pre-operative photographs will be taken.

Based on your exam, Dr. Ellis will explain his rationale for selecting the latissimus flap as well as any secondary procedures. You may be eligible for simultaneous or delayed placement of an implant. There may also be a role for additional procedures that focus on shape or symmetry. future procedures. The expectation is to create symmetric breasts with natural shape and a size that fit your body proportions.

*What are the steps of this process?*

Latissimus flap breast reconstruction can occur either immediately after the mastectomy or in a delayed fashion – anywhere from weeks to months after the original surgery. This procedure is reserved for two types of patients. The most common indication is to replace poor breast skin, often damaged by infection or radiation. Another indication is for women seeking larger breast size or improved shape beyond the limitations of a small gel implant.

The latissimus dorsi is a large back muscle that has predictable size and blood supply. The overlying skin and bulk of the muscle are useful, local solutions in breast reconstruction. With this procedure, muscle, fat and skin are tunneled from the back, through armpit, to the mastectomy site. Often, a temporary implant, expander, is placed underneath the flap to help expand the breast pocket. The tissue expander is then exchanged for a permanent gel implant in a short, outpatient procedure.



As a result of this surgery, you will have a straight-line scar across your back. If possible, and depending on your reconstructive needs, the scar is oriented in such a way that it is hidden beneath your bra-strap. Patients have no functional deficit as a result of this surgery as there are many redundant muscles in the shoulder to compensate for the partial loss of the latissimus.

*How can I prepare for the procedure and my recovery?*

There are a few things that you can do to prepare for your surgery. First and most importantly, if you smoke you must quit smoking at least 6-8 weeks prior to surgery. Smoking has a great impact on your body's ability to heal and can negatively impact your surgical outcome.

One week prior to surgery, please stop taking any anti-inflammatory medications (Ibuprofen, Naproxen), aspirin, herbal supplements and certain vitamins as these medications can increase your risk of bleeding during the surgery as well as after. Prior to stopping any medications, make sure to discuss with the doctor who recommended these medications to confirm that stopping these medications temporarily will be safe.

At the discretion of your surgeon, you may be asked to get pre-operative clearance prior to surgery. Depending on your health status, these appointments are either on the phone or in-person.

The day before your surgery, you will receive a phone call to confirm your surgery time, the time you should arrive at the hospital, and which medications to take/not take the night before. Additionally, you will be counseled on what time to stop eating and drinking in preparation for anesthesia.

## **THE DAY OF SURGERY**

After you arrive at the hospital, you will be brought to our pre-operative room where you will meet your care team. First, a nurse will ask you series of questions about your health and review your medications list. The nurse will place an IV for you to receive the necessary fluids and medications before, during and after your surgery. You will then be seen by members of your anesthesia team, breast surgery team (if immediate reconstruction), and plastic surgery team. Each team will discuss their roles, answer any questions you may have as well as have you sign consent forms. Dr. Ellis will answer any remaining questions and make measurements of your chest and back.

## **AFTER YOUR SURGERY**

After surgery, you will wake up in the recovery room where you will be helped by one of the recovery nurses. One to two hours later, you will be transferred to a private room where you will spend the night overnight. The next morning, you will be seen by both the breast surgery (if immediate reconstruction) and plastic surgery team to make sure you are recovering well, and your pain is properly managed. Most patients are discharged after one night in the hospital. Instructions will be given on drain care, activity restrictions, routine care and follow up dates.

You will need somebody to pick you up from the hospital and bring you home. We recommend having continuous, in-home help for first 48 hours after surgery. Thereafter, most patients can manage with their dialy routine with minor assistance.

You should not drive while your drains are in place or while taking narcotic pain medication.

You can expect to have your drains for approximately 2 to 3 weeks. The more active you are, especially with your arms and upper body, the more fluid will collect in your drains. We recommend that you take things slowly after surgery and follow all activity restrictions given by your doctor.

Tissue expanders are not intended to look or feel like breast tissue. The sole purpose of the expander is to stretch the skin in preparation for a permanent implant. Expanders often feel bulky and uncomfortable – this is normal and expected. The spots where the expanders have been sutured to the chest wall can occasionally cause discomfort for the patient after surgery, but the discomfort tends to dissipate over time.

You will have your first follow-up appointment one week after your surgery. At this appointment, your doctor will assess how you are healing, manage any surgical drains and discuss next steps in the process. Make sure to bring all drain output logs to this appointment.

**Please call your doctor at 312-695-6022 if you notice any of the following:**

- Fever 101 degrees or greater
- Spreading redness from your incisions
- Excessive swelling
- Heavy bleeding
- Lack of pain relief from the prescribed pain medication
- Drain tube malfunction

If you need immediate attention, please go to your nearest Emergency Department.