Patient Advice and Liaison Service (PALS)

Please contact us if you need general information or advice about Trust services. www.bartshealth.nhs.uk/pals

Large print and other languages

For this leaflet in large print, please speak to your clinical team. For help interpreting this leaflet in other languages, please ring 020 8223 8934.

Te informacje mogą zostać na żądanie przedstawione w formatach alternatywnych, takich jak łatwy do czytania lub dużą czcionką, i w różnych językach. Prosimy o kontakt pod numerem 02082238934.

Macluumaadkan waxaa lagu heli karaa qaabab kale, sida akhriska fudud ama daabacaadda wayn, oo waxaa lagu heli karaa luqaddo kale, marka la codsado. Fadlan la xidhiidh 02082238934.

এই তথ্য বিকল্প ফরম্যাটে, যেম্ন সহটে পড়া োয় অথ্িা িড় বিন্ট এিং আপনার অনুটরাটে বিকল্প ভাষায় পাওয়া যেটত পাটর। অনুগ্রহপূ িকব যোগাটোগ করুন 02082238934।

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اس معلومات کو متبادل شکل، جیسے، پڑھنے میں آسان یا بڑے حروف، میں دستیاب کر ایا جا سکتا ہے۔ جا سکتا ہے۔ بار درخواست کرنے پر اسے متبادل زبان میں بھی دستیاب کر ایا جا سکتا ہے۔ براہ مہربانی 02082238934 پر رابطہ کریں۔

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Patient information

Gynaecomastia

It is important that you read and understand the information contained in this leaflet before you sign a consent form.

Department of Plastic Surgery

2nd Floor John Harrison House Royal London Hospital London E1 1BB

020 3594 7192 or 020 3594 7195



This information leaflet has been designed to help you understand your condition and how it is treated. It will also explain the types of surgery that are available to correct your condition and the risks that may be involved, to help you make a decision on your treatment. It is important that you take time to read this leaflet before you are asked to sign a consent form for your operation.

What is gynaecomsatia and how is it treated?

Gynaecomastia is a condition where breast tissue in men is enlarged. It can occur in one or both breasts and is usually treated with surgery to remove the enlarged breast tissue.

What happens before the operation?

You might be asked to come to the hospital, to the Pre-Assessment Clinic so we can review your medicines and medical history and make sure you have any necessary investigations and tests arranged before your operation. This is also an opportunity for you to ask questions and discuss, with the plastic surgeon or the pre-assessment nurse, any concerns you might have.

Asking for your consent

We want to involve you in all the decisions about your care and treatment. You will be asked to sign a consent form to confirm that you agree to have the operation and understand what it involves. It is your right to have a copy of the consent form. If you have not been given a copy, please ask us for one. When you sign the consent form you will have an opportunity to ask the plastic surgeons any further questions you may have regarding your treatment.

How is the operation carried out?

There are two types of surgery to correct your condition. You should discuss with your surgeon which type will be best for you:

When can I resume my normal activities?

Many patients return to work between one and two weeks after surgery. Lifting should be avoided for about 14 days. Sport, particularly contact sport, should be avoided for at least one month. This includes swimming. Gentle exercise such as walking is recommended after the first few days.

Will I have any follow-up appointments?

You will be given an appointment to return to the Plastic Dressing Clinic five-seven days after your operation for your dressings to be changed or checked by a nurse. You will also receive an appointment in the post to see the plastic surgeons in the clinic, usually eight weeks after your surgery.

Contact Numbers

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if you were starved prior to your operation. If you have a local anaesthetic you will be advised to take painkillers once the anaesthetic has worn off. There will be bruising, swelling and discomfort following your operation but you will be offered pain relief either by injections or tablets. You may have a binder (a special bandage wrapped around your chest area). This is used to prevent swelling after your operation.

When can I go home?

The surgeons will visit you after your operation or the following day. Depending on the type of operation you have had you may need to spend some time in hospital and this will have been explained to you, by the surgeons, before your operation. While you are in hospital you will be visited by the surgeons on a daily basis and they will be happy to answer any questions you have.

Going home

When you are going home you should either arrange for someone to drive you home or be collected by a taxi. You should not make your own way home on public transport or drive yourself.

When will I see the results?

Following treatment the breast tissue does not grow back but the swelling can take up to six months to settle completely. You may need to wear a binder for approximately one month around the chest area to help prevent bruising and swelling. It is important to remember that after breast reduction surgery there is a risk that the end results may not meet your expectations. You should discuss your expectations with the plastic surgeon before you agree to surgery.

- An incision is made around the areola (nipple). The excess tissue is then removed.
- Use of liposuction. A small incision is made under the armpits or breasts and the excess tissue is removed using the suction technique. As the incision is usually very small the wound heals quickly with less scarring.

Will I need an anaesthetic?

Yes. Your operation will be carried out under a general anaesthetic. This means you will be asleep during the operation. The anaesthetist will visit you before your operation and discuss your medical history and will be able to answer any questions you may have regarding the anaesthetic.

How long will the operation take?

The plastic surgeon will discuss how long your operation will take before you come into hospital. Some operations can take longer than others depending on the type of operation and your general health.

Are there any risks involved?

Most operations are straightforward however, as with any surgical procedure there is a small chance of side effects and/or complications. This list of complications is not intended to put you off having the operation but you need to be aware of any potential risks before you consent to having surgery.

Bleeding

There is a risk that you may experience bleeding from the site of the operation; this could result in a collection of blood beneath the stitch line. If bleeding occurs you could experience pain and swelling in the area, the collection of blood may need to be removed and this may mean another operation.

Wound infection

There is a risk that the wound could become infected. This can occur at any time following surgery.

The signs of infection can include, increased swelling, redness, fluid leakage and increased pain at the site of the operation. If your wound becomes infected you may need treatment with antibiotics, occasionally this will mean having to come into hospital for antibiotics. After a wound infection, it may take longer for your wound to heal and you may need to have dressings on the area for a longer period of time than normal.

Wound breakdown

There is a risk that your wound could break down following surgery. Wound breakdown can happen if the stitch line does not heal properly and the wound opens up or if the blood supply to the skin is interrupted.

The signs of wound breakdown are redness, swelling, tenderness and the skin around the wound becoming darker. If this should happen you will require dressings for a longer period of time than usual. If severe enough, you may need another operation to close the wound.

Chest infection

A chest infection is something that can occur following any general anaesthetic. You can reduce this risk by taking regular, deep breaths in and out following surgery. Sitting up and getting out of bed as soon as you are well enough will also help, providing you don't overdo it.

If you smoke you can reduce the risk of a chest infection by stopping smoking for at least a month before your surgery. You are

Deep Vein Thrombosis

Deep Vein Thrombosis (DVT) is a blood clot that can arise in the deep veins of the leg or pelvis. A DVT can happen if your mobility is restricted or if you become less active for a time following your surgery.

You can help to reduce the risk of DVT by wearing the elastic stockings supplied, during and after your operation, and moving your legs about while you are in bed. In certain cases, a DVT can lead to a blood clot in the lungs.

Risks and complications associated with anaesthetic

Your anaesthetist (the person who gives you the anaesthetic) will give you more information about possible risks and complications with you before your surgery.

What can I do to reduce the risks?

Smoking can seriously reduce the success of your operation. Nicotine narrows blood vessels which will reduce the blood supply to your wound. You are at higher risk of developing post-operative complications if you continue to smoke after your operation.

If you are concerned about the risks mentioned above or you have any questions, please do not hesitate to speak to your doctor or nurse.

What happens after the operation?

After your operation, the ward staff will check your wounds and blood pressure on a regular basis. You may have a drip in your arm to replace any fluid lost (such as blood) during your operation and/or