

## **DIEP / TRAM Flap Reconstruction**

# Department of Plastic Surgery Division of Surgery



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#### **DIEP / TRAM Flap Breast Reconstruction**

The purpose of this leaflet is to explain the procedure of your breast reconstruction and to give you advice.

#### Introduction

This type of reconstruction uses your body's own tissue to recreate the breast mound after mastectomy; this is a major operation.

After consultation with your plastic surgeon, you may have decided on one of the following types of breast reconstruction.

#### DIEP (deep inferior epigastric perforator) Flap

This operation uses skin and fat from the lower abdomen containing it's own blood supply (deep inferior epigastric artery and veins). The tissue that is taken is called a free flap which is transferred to the chest and shaped into a breast. The artery and veins are connected to

chest and shaped into a breast. The artery and veins are blood vessels between the ribs or in the armpit.

#### TRAM (transverse rectus abdominus muscle) Flap

This operation uses the large muscle that runs from the lower ribs to the pelvic bone in the groin. There are two types of TRAM flap operation:

- Free Flap in this operation the muscle, fat and skin (flap) are removed from the abdomen and formed into a new breast shape. The blood vessels that supply the flap are reconnected to blood vessels between the ribs or in the armpit
- Pedicled Flap this operation uses a flap of skin, fat and muscle from the abdomen. The flap is then moved with its own blood supply, tunnelled upwards and placed on the chest wall to create a new breast shape

#### Before your operation

A short time before your operation you will be sent an appointment to attend the pre-operative assessment unit to see the nurse. This appointment is to assess your fitness for surgery by carrying out health checks including blood tests.

Please feel free to bring a list of questions for the nurse if you have any concerns regarding your forthcoming surgery.

#### The day of your operation

You will be seen by the doctor to make sure you understand your operation and possible risks and asked to sign a consent form.

The surgeon may use a pen to mark the areas of your operation.

You will be given a gown to change into and special stockings to wear to prevent blood clots in your legs.

Your operation may take between five and eight hours depending upon your surgeon and techniques used.

You can expect to stay in the hospital for seven to ten days.

#### After your operation

- You will have an intravenous infusion (drip) in your hand / arm which provides your body with the required fluid, until you are drinking satisfactorily (usually 48 hours)
- You will also have a PCA (pain controlled analgesia) pump in your hand / arm which is controlled by you, by pressing a button.
  This is to provide pain relief when you feel discomfort, but cannot be overdosed.
  The pump is usually discontinued after 48 hours and you may have tablet pain relief
- There will be approximately four plastic drainage tubes attached to bags or plastic bottles; two into the new breast area and two into the abdomen. These will drain excess fluid and blood away from the operation sites and will be removed once the amount in each drainage container is below 30 ml (1 ounce)
- You will have a dressing over the new breast and the abdomen
- You may have a tube going into your bladder (catheter) to collect urine for the first 48 hours, this is to prevent discomfort from getting out of bed to use the toilet
- Stitches are dissolvable, however non-dissolvable stitches may be used around the navel and should be removed after seven days
- You will be nursed in an upright position with the arm on your reconstructed side resting on a pillow.
  You will have pillows under your knees to keep your legs at a 45 degree angle to prevent strain on your abdomen
- You will be kept warm to allow good circulation to the breast flap and regular observation (flap checks) will be carried out by the nursing staff. This monitoring will also carry on through the night
- A physiotherapist will visit you on the ward to give advice on exercises

#### Advice on leaving the hospital

On leaving the hospital, you will be given an appointment to attend the plastic surgery dressing clinic to check the healing of your wounds.

- If necessary you can be given pain relief tablets to take home
- Off work for six weeks
- No driving for six weeks
- No heavy lifting for at least six weeks
- The dressing clinic will advise you when you can shower and bath
- Wear high support pants to support the abdominal area
- Wear a good fitting bra with at least 15% elastane and no wires for at least six weeks, or until you have had your outpatient check-up appointment (6 to 8 weeks after your surgery).
  If you find it more comfortable (especially at night) you may wear a lycra crop top which should have 20% lycra

#### Important information

- You will not be offered surgery if you are smoking
- Avoid smoking after your operation as this constricts the blood vessels to your reconstruction and could cause it to fail
- The hospital does not supply bras or support pants, these can be bought from a good department store

#### Benefits of operation

- You will no longer have to wear a breast prosthesis
- You will be able to wear the clothes you like
- It may help to increase your confidence regarding body image and femininity
- You should not normally require a breast implant with this type of reconstruction
- At a later date, usually three months after your wounds have healed, you may have a nipple tattoo / reconstruction and any necessary secondary revision to the flap may be done at this time

#### Risks of operation

- Surgical site infection
- Flap failure
- Abdominal hernia
- Wound healing problems
- Seroma (fluid collection around wound sites)
- Congestion / haematoma (collection of blood around wound sites)
- Very occasionally patients have to return to theatre if any of these problems occur
- Breast reconstruction will leave you with permanent scarring

### **Example Before & After Photographs**



**Patient Notes** 

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