



WATERFRONT

PRIVATE HOSPITAL

MALE BREAST SURGERY AFTERCARE

The advice below is general and will apply to the average patient. It should be a guide. All patients are different, and some will recover quicker than others.

Before you leave the hospital

Medications – You will be provided with painkillers before discharge. These may include strong painkillers such as dihydrocodeine.

Follow-up appointments for dressing clinics – You will be handed a card with details of your first follow-up appointment and contact details for the ward if you have any concerns once you get home.

Have someone to take you home and a **responsible adult with you for the first night** (if you have had a general anaesthetic).

Information on post-surgical compression vests

A well-fitting compression vest can provide support and comfort during the first few months following gynaecomastia surgery. It can also help to keep swelling down during the initial healing phase.

It is helpful to have a compression vest to bring with you for your surgery.

Recommended garments can be purchased through these links (use discount code QUABA). We have no affiliations with the companies:



[Macom Gynaefix vest](#)

[Lipoelastic MTm Comfort](#)

Sizing guides are available on the Macom and Lipoelastic websites.

When you get home

Week 1

Get plenty of rest.

Sleep in whichever position is comfortable (this is likely to be on your back!), and wear your compression garment.

You can shower but try not to soak your dressings too much. Stay calm if the outer dressing comes off. You will have paper tape (steri-strips) over the wounds, and you can get these wet. They will generally stay stuck on over your incisions.

Discomfort and Pain are typical in the first few days after surgery. You may experience some numbness around your nipples (if you required gland excision) and incision areas. Your chest may be sensitive to stimulation for a few weeks.

Bruising gets worse before it improves, especially if you have had a lot of liposuction.

Your chest may get **swollen**, and this can take a few weeks to settle down.

It is not unusual for one side to feel different or more painful than the other. If both sides of your chest are roughly the same size, then there is no reason to be concerned.

Take your pain medication as prescribed.

A little **blood staining** on the inside of your dressings is not unusual during the first week.

Your **mood** may fluctuate after surgery – this is normal!

Keep mobile, as this helps to reduce swelling and lowers the chance of blood clots.

Follow a balanced diet. Increase fluid intake. Decreased activity may promote constipation, so you may wish to add more raw fruit and fibre to your diet.

Avoid smoking for at least two weeks, as smoking delays healing and increases the risk of complications.

Avoid alcohol when taking pain medications. Even if you are not taking pain medications, it is advisable to avoid alcohol for three weeks as it can cause fluid retention, which may worsen swelling.

You can consider **driving** if you must towards the end of the first week if you are not taking strong painkillers and are confident performing an emergency break.

Nurse appointment at the end of week 1

You will have a nurse appointment to **remove the outer dressings** at the end of week 1. The nurses will check you are OK and have no problems. They can answer any questions.

The **paper tape (steri-strips)** covering the incisions **will be removed if it is still on.** Any non-dissolvable stitches will usually be removed at this stage.

Returning to work

Return to work may be an option at the start of week two if your job is office based/non-physical. If your job is more physical, you may need to wait until the end of week 2 before returning to work.

Week 2

Most patients will still take painkillers by the start of week 2, but some may feel they no longer require any medication.

Your chest may still be swollen and bruised, and this should improve during the second week.

You should be fine **going about your day-to-day business**.

Weeks 3 and 4

Moisturise your incisions with a plain moisturising cream (Aveeno, E45) or bio-oil.

You will feel more yourself, and most of the swelling (80-90%) will have settled.

You may still feel **firm lumpy areas** below the nipple which may differ on each side.

You may feel **shooting-type pains** as nerves knit back together.

When can I fly after surgery?

Check with your airline and insurance company before flying. It'll depend on your airline's regulations and the flight duration. If in doubt, please ask your surgeon.

Risk of DVT

If you're flying after recent surgery, especially when your mobility has been restricted, you're at an increased risk of [deep vein thrombosis \(DVT\)](#), a blood clot in one of the deep veins in your body, usually in your legs.

Guidance

For medium-haul (3-6 hours) and long-haul (6-12 hours) and as a guide, allow 2 weeks after gynecomastia surgery. You could fly around 1 week after surgery for short haul (less than 3 hours) flights. You can take steps to reduce your risk of DVT, such as drinking plenty of water, using your Ted stockings, and moving around on the plane. The risk of developing a travel-related DVT is low, even if you're classed as moderate to high risk.

Travel Insurance

Check your travel insurance policy carefully, as you may need to inform the insurance company you have recently had surgery.

From 1 month to 6 months

The last 10% or so of the swelling will settle over this period, and your chest will feel more natural.

Scars should fade but can still be red at 6 months. Please **continue moisturising and massaging** your scars with bio-oil or plain moisturiser.

Any **residual lumpiness** should improve gradually over this period – be patient!

Shooting pains and other pains may persist as nerves heal or after exercise. This is normal.

Any **Numbness** should gradually improve over this period.

Exercise

You can resume gentle exercise after 4 weeks and build up to more strenuous exercise by the end of week 6.

After 6 weeks, you should be able to get back to doing whatever you were doing before surgery.

When to call/ get in touch

- If you have increased swelling or bruising, which is not settling.
- If you notice swelling in one/ both of your legs or feel short of breath – this may indicate a clot in one of your veins/ lungs – Deep vein thrombosis/ Pulmonary embolism.
- If one side of your chest is much more swollen than the other.
- If you have increased redness along the incisions (this may be a sign of infection).
- If you have severe or increased pain not relieved by medication.
- If you have any side effects to medications, such as rash, nausea, headache, or vomiting.
- If you have a temperature over 38 degrees Celsius.
- If you have any **persistent** yellowish or greenish discharge from the incisions.

Further advice

If you are uncertain about anything or require further advice, please contact us at hello@waterfronthospital.co.uk