FORM
CAMPUS

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POST-OPERATIVE INSTRUCTIONS

Brachioplasty (Arm Lift)

The following after-care information will help make your surgery safe and uneventful. It is important that you understand it all. If you have any questions, please ask your surgeon or our team. In some cases there will be variations to these instructions, and these will be discussed with you.

POST-OPERATIVE DRESSING

At the end of your surgery, your scars will be covered with a special skin glue and tape, and you will be wrapped with a comfortable tensor bandage to support your arms and/or chest. This dressing should stay in place until your first post-operative appointment (usually 3-4 days). At that appointment, the tensor bandage will be removed and the glue and tape will be left on. You can then start showering normally with soap and water. From this point, you will need to wear a supportive garment during the day and at night (this will be provided for you). You will continue with this support for 4 weeks.

Occasionally, blood seeps onto the dressings. This is no cause for alarm and will not irritate the skin. If blood is leaking out from beneath the tape, apply a clean gauze dressing. If the bleeding continues, contact us for instructions.

Once you begin showering, the glue and tape will slowly lift off on their own. They should all come off, or be removed by us, around the time of your three-week appointment. All the stitches are underneath the skin and do not need to be removed. Occasionally, there is a stitch knot tied along or at the end of the incision. This will dissolve on its own. If a visible stitch is still present after 2 weeks, you can pull the stitch lightly and cut it at the level of the skin with clean scissors.

PAIN PILLS

Most patients are pleasantly surprised by how limited their post-operative discomfort is. You have been prescribed Tylenol Extra Strength; Celebrex (Celecoxib), which is an anti-inflammatory; and Hydromorphone, which is a strong narcotic painkiller. The Tylenol should be taken on schedule, every 6 hours. For the first 3 days, the Celebrex is to be taken every 12 hours. The Hydromorphone is to be taken as needed, but not more often than every 6 hours. This combination of an anti-inflammatory (Celebrex) and an analgesic (Tylenol Extra Strength or a stronger pain pill) is now recognized as the most effective way of treating post-operative discomfort. Both can be stopped when the discomfort subsides.

Please note that all pain pills cause constipation. If you are prone to constipation, you should consider a stool softener such as Colace 200 mg twice a day, and a laxative such as Milk of Magnesia, 15 to 30 cc at nighttime. Drinking plenty of fluids and eating fruit also reduces constipation.

EATING AFTER SURGERY

Patients may experience nausea after a general anesthetic. It is therefore wise to drink clear fluids (apple juice, black tea, flat pop) until the stomach feels settled. Then try eating clear soup and a few crackers. A normal diet is usually possible the next day. On rare occasions, a patient may feel nausea for a few days after surgery. Gravol tablets may then be helpful.

HEMATOMA

On rare occasions, a hematoma (blood collection) can develop. This is due to continued bleeding underneath the skin. It presents as an enlarging, painful, firm swelling of the surgical area, typically in the first 24 to 48 hours after surgery.

> A hematoma may require surgery and needs urgent evaluation by your surgeon or one of the emergency room physicians at North York General Hospital.

BRUISING

Bruising is the typical "black and blue" appearance of tissue after any surgery. There is great variation in how much patients bruise: some bruise very little, some more. As noted in your pre-operative instructions, Aspirin, blood thinners, anti-inflammatories and vitamins can contribute to bruising and should be stopped for two weeks before surgery. These medications can be resumed the day after surgery. The bruising typically subsides within two weeks, but in some patients can last longer. As it dissolves and becomes more yellowish in colour, it may appear to be "spreading". This is normal and is no cause for alarm. It is common to have more bruising and swelling on one side than the other. This will even out with time.

EARLY FEVER

A low-grade fever (up to 37.8°C) is not uncommon the day after surgery. It usually occurs after a general anesthetic and results from small collections of mucus in the lungs. It is therefore important after a general anesthetic to take frequent deep breaths and to cough deeply. Coughing clears the lungs and corrects the low-grade fever. Failure to clear the lungs adequately can, on rare occasions, lead to a lung infection.

WOUND INFECTION

Wound infections are uncommon. Minor leakage of clear yellowish fluid from the stitches may occur and persist until the stitches have dissolved. This fluid is not an infection, and is managed with soap and water washes two to three times a day, followed by Polysporin ointment and a light dressing.

> If the drainage from the wound becomes "soupy" and smells, or comes with increasing redness, pain and swelling, a deeper infection may be occurring. Do not hesitate to phone the office or see your family doctor if this happens. You will need to be seen, as you may need antibiotics.

SLEEPING POSITION

The incision lines are very secure, and you can sleep on your back or on either side immediately after surgery. We suggest that you avoid sleeping on your stomach for 4 weeks after surgery.

SCAR CREAM

Once the tapes are off the scar line, a scar gel should be used. The gel is first massaged onto the incision lines. Additional scar gel is then placed on the scar lines, allowed to dry and covered with paper tape. This process should be repeated every other day. You can shower over the tape on the days in between. The scar cream we recommend is available in our office.

POLYSPORIN OINTMENT

Occasionally, there are small areas of drainage along the incision line. These small areas of delayed healing can open up slightly and a clear yellowish fluid may drain out. This is not an infection. These areas should be washed with soap and water twice a day, followed by Polysporin ointment and gauze. Avoid scar cream in these areas until they have completely healed, then apply scar cream there as well. While these small areas are healing, continue to use scar cream on the rest of the incision lines.

WOUND MASSAGE

As soon as you start applying scar cream, 10 to 14 days after surgery, you should also begin gentle massage of the incision lines. After another week, this gentle massage can become quite firm and vigorous, with deep rotary motions along the incision line and onto the arm itself. This firm massage helps to desensitize the scars, making them less painful, and also reduces the normal thickness and lumpiness seen in a scar after surgery.

SCAR REDNESS

All scars are initially reddish and thickened. This is part of the normal healing process, and they will eventually smooth out. It takes 9 to 12 months for scars to fully mature, becoming flat, light in colour and somewhat more spread.

TANNING

Fresh scars and areas that have been bruised should not be tanned for at least four months after surgery. Early tanning can cause permanent hyperpigmentation (darkening) of the scar and the surrounding areas. Normal tanning can resume after four months, but please remember that tanning causes premature skin aging and skin cancers.

SILICONE SHEETING

Some studies have suggested that silicone sheeting, available in most pharmacies and online, can improve the quality of the scar. To be effective, silicone sheeting needs to be on the skin day and night for at least six months. It is not recommended for routine use, as it appears to have little value when scars are healing normally. We do recommend silicone sheeting (Cica-Care or Scar Away) for wounds that show evidence of prolonged redness or abnormal scar maturation. This applies to fewer than 5% of patients.

MOBILITY

It is important to be up and walking the day of surgery, and prolonged periods of bed rest are discouraged. Lying in bed can increase the rare but ever-present risk of developing blood clots in the calves, which in turn can cause pulmonary emboli. It is good to go for short walks, and to have frequent naps if you are feeling tired. For the first two weeks there should not be any excessive stretching of the wound, but even the day after surgery you can gently raise your arms and comb your hair. Within 4 weeks, full exercise activities can be resumed.

DRIVING A CAR

You must not drive for at least 24 hours after a sedative or general anesthetic, or if you feel drowsy for any reason. Do not drive if you are having any pain, as the pain may cause you to jerk the steering wheel and lose control. You must also avoid driving if you are in any way restricted in your mobility, as this may compromise safe driving. For this type of surgery, we recommend avoiding driving for at least 1 week.

FATIGUE AND "FEELING DOWN"

While the results of plastic surgery are typically gratifying and uplifting, it is not uncommon for patients to have "down" times. Early on, there is the lingering effect of the anesthetic, along with discomfort, swelling and bruising at the surgical site. This is followed by the typically slow maturation of the scar itself. These frustrations can weigh on you and may make you question why you had the surgery in the first place. You are not alone with these thoughts, and they are entirely normal. Rest assured that well over 90% of patients are pleased with the results of their surgery, and the apprehension and "down" times are eventually replaced by feelings of satisfaction and confidence.

QUESTIONS OR PROBLEMS

Every effort is made to provide you with a surgical experience that is safe and as comfortable as possible. Any suggestions you have that might improve the experience are much appreciated. If you have any questions, concerns or problems, please call the office at 416-447-6176.

> If there is an urgent situation and we are not immediately available, please go to the emergency department at North York General Hospital or your closest emergency department.

We hope you have a speedy recovery from your surgery.