The Patient Following a Modified Radical Mastectomy

Thank you for choosing us for your health care needs. This information is to help answer some of the questions you may have about your operation and to give you instructions to follow during your recovery period. If you have any other questions, please ask your doctor or nurse.

You have had a modified radical mastectomy. This means that surgery has been performed that removed both the cancerous breast tumor and the breast itself.

In addition, the lymph nodes located under the arm nearest to the tumor were also removed. Following their removal, you may notice that you have some swelling of your hand and arm on this side. This is because the lymph nodes act as a filtering system for excess fluid and bacteria. Their removal may increase the chances of swelling to occur. Also, you are at great risk for your arm or hand to become infected. Therefore, it will be important that you read the following instructions carefully, paying especially close attention to the ones that pertain to the care of your arm. Remember, since your lymph nodes will never grow back, you will need to take special care of your hand and arm for the rest of your life.

Diet:

- You may resume your diet as usual. A well balanced diet that consists of meat, fish, and/or dried beans, fruits, vegetables, and grain products (cereals and bread) will promote healing.

Activity:

- When resuming activities during your first days at home, you may want to take things slowly. No heavy lifting (more than five pounds) or pushing, strenuous exercise, or heavy housework for six to eight weeks. Objects that cannot be lifted with one hand are considered too heavy. You may walk and do light household activities, gradually resuming your normal schedule.
- Do not drive for approximately seven to 10 days after surgery, or until most of the soreness is gone. Do not drive while taking pain medication; it may make you drowsy.
- You may resume sexual activity when your pain is controlled and you feel ready to do so.

Arm Care

- Continue your exercises as directed by the Physical Therapist. These exercises will help to keep your arm from becoming “stiff” and uncomfortable. They will also decrease swelling of your arm.
- Elevate your arm on a pillow (or some other type of support) when resting. This will help decrease swelling.
- Other ways to take special care of your arm:
  - Do not allow anyone to take blood pressure readings, draw blood or give you a shot in this arm.
  - When cut, bitten or burned in this arm, thoroughly wash the area with soap and water and keep it clean. Watch for any redness and/or swelling. Call your physician immediately if you see any redness or swelling.
  - Avoid tight-fitting cuffs, watchbands, rings, etc.
Because of possible numbness in the upper arm from surgery, use caution if using a razor to shave the underarm. Electric shavers are recommended.

Wound Care

- You may begin taking showers on the day of discharge.
- You will probably be discharged home with one or more drains in place for a period of time. The nurse will show you how to do the following:
  - Empty the drain every 12 hours (or more frequently if full). Record the date, time and amount emptied for each drain. Bring this record with you on your return appointment.
  - Clean around the area where the drain enters the skin with soap and water twice daily. Apply antibiotic ointment, if prescribed. Cover the drains with a dressing, if desired.
- Your incision will not need a dressing. Gently wash the incision site using soap and water. If you have steri-stips (pieces of tape over the incision), remove them in two weeks if they have not fallen off on their own.
- You can expect some soreness and bruising. You may also note some numbness in the area of the surgery and underneath your arm where the lymph nodes were removed. This is expected. The soreness and bruising should become less each day. Some people experience numbness, tingling and burning in the upper arm. This tingling and burning usually lessens in six to eight weeks. However, it may never go away completely.
- At first you may feel more comfortable wearing loose fitting blouses or tops. If you have had only one breast removed, you can begin wearing a bra whenever comfortable. You may want to place a soft, cotton form in the bra cup on the side on which you had surgery. This may make you feel more “balanced” and will not irritate your incision while healing occurs.
- In approximately four weeks, you may want to be fitted for prosthesis. Prosthesis is an artificial breast form that is made of silicone, foam rubber, or fiberfill. You will need to contact a trained and experienced fitter to help you with this. You can contact one of the nurse in the MCG Comprehensive Cancer Center (706-721-6752) and ask for the name of a fitter in the Augusta area, or look under “Mastectomy” in the telephone book. You can also contact the American Cancer Society for fitting information and assistance.
  - To assist with insurance reimbursement, ask your doctor to write a prescription for your prosthesis and mastectomy bras. If you have private insurance, you may want to contact your insurance company. A representative can tell you if your insurance policy has any restrictions on this type of reimbursement. Also ask if your insurance limits where you must buy your prosthesis/bras in order to obtain full or partial reimbursement.

Medications

- You can expect to have some soreness around your incision and under your arm. You may take your prescription pain medication or over-the-counter pain medications for this discomfort.

Call your doctor if:

- You have a fever above 101.5°F.
- You have severe pain not relieved by your prescription pain medications.
- You have redness or swelling around your incision.
- You have bleeding, discharge, or drainage from your incision or if the edges of your incision opens.
• You notice that the fluid from your drains stop suddenly, and you have increased swelling and discomfort in your upper arm and armpit.

Follow-up:

Unless you have problems, your next appointment to see your doctor will depend on the amount of output noted in your drain. Usually a drain is removed when the output is less than one ounce in a 24-hour period. When you see this has occurred, contact your doctor and make an appointment to have the drain removed. If this occurs on the weekend or a holiday, contact the doctor on the next business day.

Remember, if you have more than one drain, contact the doctor each time a drain has less than one ounce output in a 24-hour period. This means that you may need to see your doctor more than one time to have all your drains removed.

With your permission, we would like to have a volunteer from the American Cancer Society’s Reach to Recovery to visit you. This volunteer has had surgery for breast cancer and may provide comfort by talking with you and sharing her experience. She also may be able to answer many of the questions that only someone who has had breast cancer can answer.

In addition, there is a Breast Cancer Support Group that meets monthly at the MCG Health System. This group is made up of women who have gone through much of what you are experiencing now. Your nurse can give you more information about the Support Group.

Both Reach to Recovery and the Support Group are completely confidential and free of charge. If you are not from the Augusta area, you can call your local chapter of the American Cancer Society for the name of a breast cancer support group in your area.

Some people feel that reading or listening to audiotapes about the impact that one’s mind has on the body help them to actively participate in the healing process. The power of spiritual support, and the practice of relaxation and visualizing effective treatment and wellness often aid in recovery. A suggested list of books and tapes is available upon request.

Finally, it is very important that you continue to perform breast self-exams on your remaining breast and/or the surgical area. Breast tissue changes occur after surgery so you will need to discuss with your doctor what is normal for you. Be sure and pick a date that is easy to remember each month and perform the BSE on that day. Women who are still menstruating should do their BSE approximately one week after their period has ended.

For information on how to perform a BSE, you may visit the following websites:

http://www.komen.org/bse/
http://imaginis.com/breasthealth/performbse.asp
http://www.vh.org/adult/patient/cancercenter/doityourself/

If you need to reach your physician, please call:

Comprehensive Cancer Center   706-721-6744
5-South Oncology Unit          706-721-1308
Oncology Service Office        706-721-4726

http://www.komen.org/bse/
http://imaginis.com/breasthealth/performbse.asp
http://www.vh.org/adult/patient/cancercenter/doityourself/