

# SAMPLE



Blackpool Teaching  
Hospitals  
NHS Foundation Trust

## Physiotherapy Following Breast Reconstruction Surgery

Physiotherapy Department  
Patient Information Leaflet



# Physiotherapy Following Breast Reconstruction

Breast reconstruction involves complex surgery which can affect the movement and sensation at the shoulder joint, shoulder girdle and the thoracic spine.

The aim of physiotherapy is to regain movement at the shoulder and achieve functional use of the arm.

You will be seen post operatively on the ward by the inpatient physiotherapist. An outpatient physiotherapy appointment will be arranged for approximately 3 weeks after your surgery date.

It is recommended that in view of effects of the surgery on sensation, the application of extreme hot or cold should be avoided to prevent damage to the skin.

# Tissue Expansion and Implant Reconstruction

A temporary tissue expander or permanent implant may be placed in a pocket below or above the chest muscle.

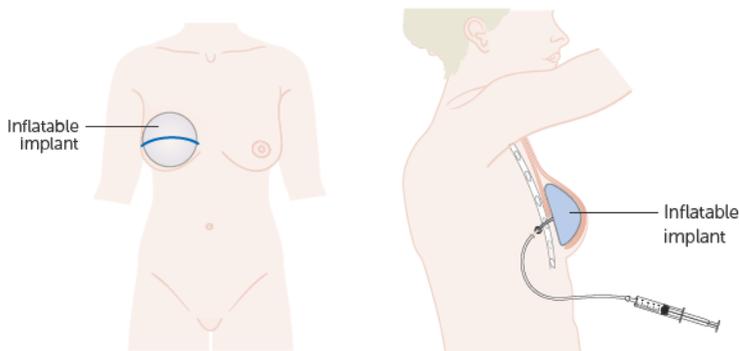
Movements that involve using or overstretching this muscle should be avoided post operatively. These include:

- heavy lifting
- pushing
- pulling
- reaching with the affected upper limb.

The implant position dictates the duration of time this muscle should not be used or overstretched, and for how long upper limb movement should be restricted to shoulder height.

Your surgeon, breast care nurse or physiotherapist will inform you of the time frame but this is usually either **2 or 3 weeks**.

Driving may be commenced at approximately **3-4 weeks**, under the instruction of your consultant.



<http://www.cancerresearchuk.org/about-cancer/breast-cancer/treatment/surgery/breast-reconstruction/using-implants>

## Acellular Dermal Matrix

An acellular dermal matrix (ADM) surgical mesh is a soft tissue substitute taken from a human or animal donor which is either attached over or attached to the chest muscle. An implant can be placed beneath it. The ADM acts as a scaffold for your tissue to eventually grow into.

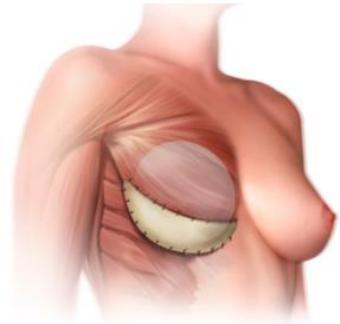
As with implant reconstruction, movements that involve using or overstretching the chest muscle should be avoided post operatively. These include:

- heavy lifting
- pushing
- pulling
- reaching with the affected upper limb.

The position of the ADM dictates the duration of time this muscle should not be used or overstretched, and for how long upper limb movement should be restricted to shoulder height.

Your surgeon, breast care nurse or physiotherapist will inform you of the time frame but this is usually either **2 or 3 weeks**.

Driving may be commenced at approximately **3-4 weeks**, under the instruction of your consultant.



<https://www.aestheticplasticsurgerypc.com/breast-reconstruction/implant-reconstruction/acellular-dermal-matrix>

# Partial Reconstruction Using Perforator Flap

Partial breast reconstruction using a perforator flap harvests skin and fat from a donor site to fill the void created by the removal of the cancerous breast tissue.

Movements that involve using or overstretching the breast tissue should be avoided post operatively and until your consultant review. These include:

- heavy lifting
- pushing
- pulling
- reaching with the affected upper limb.

Upper limb movement should be restricted to shoulder height for a **2 week** period.

Driving may be commenced at approximately **3-4 weeks**, under the instruction of your consultant.

# Latissimus Dorsi Flap Reconstruction

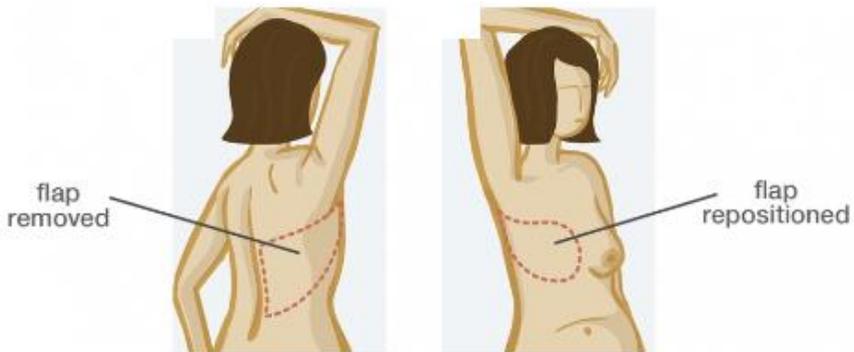
When a latissimus dorsi flap is used the muscle is removed from the back and attached to the chest. This means movements that involve using or overstretching the chest muscle should be avoided post operatively for **4 weeks**.

These include:

- heavy lifting
- pushing up off the bed or from a chair
- pulling up with the affected arm
- reaching with the affected side
- pushing a trolley or pram

Movement of the upper limb should be limited to shoulder height for the first **4 weeks**.

Driving may be commenced at approximately **3-4 weeks**, under the instruction of your consultant.



<https://www.breastcancercare.org.uk/information-support/facing-breast-cancer/going-through-breast-cancer-treatment/surgery/types-breast>

# Exercises Day 1

# SAMPLE

These exercises should be completed the day following your surgery.

## 1. Pendula swings

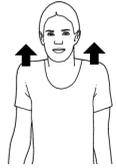
Stand leaning on a table with one hand. Let your other arm hang relaxed straight down. Swing your arm as if drawing a circle on the floor. Change direction.



## 2. Shoulder Shrugs

Sit or stand. Lift your shoulders - relax.

2



## 3. Shoulder rolls

Sit or stand. Roll the circles forwards and then backwards.

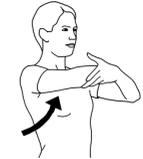
3



## 4. Shoulder flexion

Stand or sit. Lift your arm forward assisting the movement with your other hand, observing the restriction to range of motion.

4



## 5. Shoulder Abduction

Stand or sit. Lift your arm to the side, assisting the movement with your other hand, observing the restriction to range of motion.

5



## 6. Shoulder External Rotation

Sit or stand. Keep upper arms close to the sides and elbows at right angles. Turn forearms outwards.

6



## 7. Shoulder blade retraction

Sit or stand. Tighten the muscles between your shoulder blades.

7



## 8. Trunk rotation

Sit on a chair and clasp your arms on your chest. Rotate your trunk to one side and then the other.

8



Repeat each exercise 5 times, as your pain allows. Practice 3 times a day.

# Other sources of information:



**Blackpool Victoria Hospital Physiotherapy Department:**  
Telephone: **01253 953512**



**Hospital switchboard**  
Telephone: **01253 300000**

## Patient Relations Department

The Patient Relations Department offer impartial advice and deal with any concerns or complaints the Trust receives.



You can contact them via tel: **01253 955589**  
or by email: **bfwh.patientrelations@nhs.net**

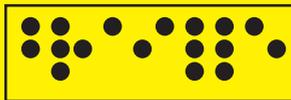


You can also write to us at: Patient Relations Department, Blackpool Teaching Hospitals NHS Foundation Trust, Blackpool Victoria Hospital, Whinney Heys Road, Blackpool FY3 8NR



Further information is available on our website: **www.bfwh.nhs.uk**

If you'd like a large print, audio, Braille or a translated version of this booklet then please call: **01253 955520**



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