Breast Construction

*Most insurance does not cover this. Please check with Transgender Care Navigator to find out more.

Breast construction, or breast augmentation is a gender-affirming, feminizing, top surgery that creates or enlarges one’s breasts.

How is breast construction performed?

1. An incision is made under the breast or around the areola.
2. A temporary breast tissue expander is inserted to make room for the implant.
3. A few months later, the tissue expander is replaced, usually with permanent saline-filled implants.
4. The nipple and areola are then reconstructed to a typical feminine shape.

How long will my hospital stay be?

You will probably be released the same day as surgery.

What medications will I be prescribed after surgery?

You will likely receive painkillers and antibiotics to reduce the chance of infection.

What dressings and supportive garments will I need to wear?

Your surgeon may recommend a certain type of bra to wear after surgery to promote healing. You’ll also have surgical dressings for the first few days and steri-strips along the incision lines. Your surgeon will give you instructions about when to remove the dressings and when it is okay to shower. The steri-strips are usually left in place and will fall off on their own.

What should I expect as a normal part of the healing process?

- Upper body feels stiff and sore for the first 2-5 days following surgery
- Breasts feel tight and sensitive to the touch
- Skin feels warm or itchy
- Skin within 1-2 cm around your incisions is red (if it spreads beyond this, seek medical attention)
- Ability to see or feel the knot from your stitches at the end of the incision
- Bruising and swelling (will mostly resolve within a month)
- Feelings of sharp shooting pain, burning sensations, and general discomfort
- Scars will fade over time

**How many visits will be needed after my breast augmentation surgery?**

The number of check-ups needed varies from person to person. You'll likely have one or two check-ups with your surgeon. You can also see your primary care provider about any concerns in the post-operative period. When you visit your surgeon or primary care provider, they should check your surgical sites to make sure there are no infections or wound healing problems. They will ask questions about pain, bleeding, fever, and how you are feeling physically and emotionally.

**How long will it take for me to get back to my usual activities?**

Recovery time varies from person to person, so always follow the advice of your surgeon. Many people feel comfortable within a week following the surgery. You'll need to get plenty of rest in the first week. It is common to gradually return to your daily activities over the next 3-4 weeks. Some activities, such as driving, heavy lifting and exercise, may be restricted in the post-operative period. Your surgeon will give you advice about when it is okay to resume these activities.

**What complications are associated with breast augmentation?**

All surgical procedures involve some risks, including negative reactions to anesthesia, blood loss, blood clots and artery blockages. These complications can, in extreme cases, result in death. It’s important to discuss these risks in detail with your surgeon. Your surgical care team will take a wide variety of steps to prevent these problems, detect them if they arise, and respond to them appropriately. They will also inform you about what you can do to minimize your risks.

The list below includes some of the complications associated with breast augmentation in particular. It does not replace a thorough consultation with your surgeon.
Capsular contracture

This is when the scar tissue that naturally forms around the breast implant thickens and contracts. This causes the breasts to become extremely firm with a shape that may be unsatisfactory. Requires surgical removal of the thickened capsule and implant replacement or removal.

Hematoma

This is when blood collects in the surgical site, causing pain, swelling and redness. Smaller hematomas can be drained, but larger ones require removal through surgery.

Wound infection

Wound infection can occur when bacteria enters the wound. Small infections can be treated with antibiotics. Infections can lead to the formation of an abscess (a collection of pus). An abscess can be treated with antibiotics or drained by the surgeon. Infection of the breast implant pocket will require implant removal and replacement at a later time.

Seroma

This is when clear fluid accumulates in the surgical site, causing swelling. It may resolve on its own or it may need to be aspirated (sucked out) once or more by the surgeon.

Asymmetry

Asymmetry means something does not look the same on both sides. It is possible that the breasts could be asymmetrical in size, shape, or position. It is also possible that the nipples/areolas are asymmetrical in size, shape or position. Significant asymmetry may require further surgery.

Problems with the implant

The implant could rupture, causing a sudden change in breast shape. The implant could become exposed as a result of wound healing problems or infection. Sometimes the implant feels or looks wrinkly. These problems would require implant removal and/or replacement.

Unsightly scarring

May be correctable with various treatments, including additional surgery. Your surgeon will give you advice on what you can do to minimize scars.
Loss of sensation

Loss of sensation means that partial or permanent loss of nipple or skin sensation may occur.

What else do I need to know?

1. Denver Health cannot do elective surgery on patients using any form of nicotine as it increases healing complications. We will test for nicotine use in patients with a smoking history.
2. Use of stimulant drugs such as cocaine, amphetamines, meth, etc., can also cause wound healing problems and needs to be stopped prior to surgery. Again, we will test for those with a strong history. This is for patient safety.
3. Better results are achieved with BMI less than 30, but we can consider BMI up to 35 on a case by case basis.
4. While regular/heavy MJ use does not have known wound healing complications, it does create anesthesia issues, and should be minimized prior to surgery, and discussed with the anesthesia provider in detail to provide the safest experience.