In this information leaflet we explain some of the aims, benefits, risks and alternatives of having areola micropigmentation. Please speak to the Macmillan Advanced Nurse Practitioner about anything you do not fully understand or wish to have explained in more detail. Contact details are at the end of the leaflet.

What is micropigmentation?

Micropigmentation is a procedure whereby pigment (colour) is implanted into the dermal layer of the skin. This is done using a state of the art machine, designed specifically for the cosmetic and medical market. The machine and pigment is very different to conventional tattoo machines and inks used in tattoo parlours. The treatment lasts around 3-5 years and is carried out in line with strict health and safety protocols. The pigment does not go as deep into the skin as tattoo ink, which is why it fades over time.

The chosen colours will replicate your natural nipple and areola after your breast reconstruction.

How is the micropigmentation carried out?

A trained and experienced practitioner/technician will perform the procedure, usually during an outpatient clinic appointment. The pigment (colour) is applied using a pen-like device, which contains several small needles. The needles move up and down really quickly, penetrating the outer and inner layers (epidermis and dermis) of the skin, and implanting the coloured pigment. This can feel like a scratching sensation.

Depending on how sensitive your reconstructed breast tissue is, you may want to use a topical anaesthetic (in the form of a cream). This is applied at least 30 minutes before the procedure is carried out, and will numb the area. You can get topical anaesthetic from your GP on prescription or over the counter at
most pharmacies. You should apply it before you arrive for your appointment. The numbing effect will last for between 15-20 minutes after it is removed.

**Equipment**

All the micropigmentation equipment is sterile. Disposable sterile needles and small disposable pigment pots are used for each individual procedure and disposed of immediately after use.

**What are the benefits and risks?**

We aim to find as realistic a colour match for your nipple areola as possible and will try to match it to your remaining nipple for a more natural appearance. If you have had a double mastectomy, you will be able to choose a colour which you feel comfortable with.

Nipple and areola micropigmentation can provide the final touches after your surgical procedure, to give a sense of normality and boost your confidence.

However, micropigmentation is an invasive procedure and is not without risk. The main risks include:

- not achieving an exact colour match
- fading of colour over time
- scarring
- pigment migration or spreading of the colour
- uneven pigment colour
- slight skin irritation
- risk of infection, if the area is not kept clean.
Is there an alternative?

You can choose not to have micropigmentation; it is purely for cosmetic reasons and it is your choice whether to go ahead. There are other methods you could try, which include using makeup to draw on or henna to stain the skin to create the look of a nipple, but these can be fiddly to achieve and don’t last more than a few days at most.

How many treatments will I need and how permanent is it?

Most people need two treatments. The tattoo should last for up to three years or longer, but this can vary. Some people require further follow-up treatments every year to achieve and maintain the result that they want.

What factors may affect the results?

The results of micropigmentation can depend on the skin type that you have. It can also be affected by:

• oral medication (tablets or liquids)
• your natural skin tones
• sunlight
• your skin’s characteristics (dryness, oiliness, sun damage, thickness, colour)
• the PH balance of your skin (how acid or alkaline your skin is)
• alcohol intake – alcohol dehydrates the body, causing drying and flaking of skin. This can cause the pigment to break down more quickly.
• smoking – this also dehydrates the skin and can make the pigment break down more quickly
• how well you normally heal
• illness – this can affect the pigment and cause it to be broken down more rapidly
• swimming (chlorine can bleach the colour from the tattoo).

We cannot carry out the micropigmentation if you have recently tanned skin (including fake tan), as this makes it very difficult to match the colours of your areola. We would need to wait for your tan to fade and for your skin to return to its natural colour.

If you have a heart condition, epilepsy, haemophilia or other clotting disorder, or if you have had hepatitis over the past 12 months, you must tell your practitioner/technician before you come for the procedure.

Allergy test

Before you come for the micropigmentation will be offered a skin patch test. It is advisable to have the test if you have a history of any type of allergy. The purpose of this test is to detect allergies or other reactions to the pigments used during the procedure.

If you wish to have an allergy test please contact the Macmillan Advanced Nurse Practitioner, to make an appointment to come in before your treatment date. This appointment shouldn’t take more than a few minutes.

You will need to wait a full 24 hours after the skin test to see if any allergies occur. If you have a reaction to the pigment we will not be able to go ahead with the procedure.

How long does it take?

The micropigmentation procedure usually takes 60 minutes, depending on your individual requirements. This varies according to:
• the position, width and depth of the nipple areola area
• the depth of colour to be matched.
What to expect after the procedure

You will experience slight swelling and redness after the procedure and the skin which has been tattooed may feel tight. These symptoms will subside within 1-7 days, depending on how sensitive your skin is.

You should be able to carry on with your normal activities immediately after the procedure, but avoid the use of moisturisers until the area is fully healed.

You should also avoid excessive perspiration and exposing the affected area to the sun until it is fully healed. In addition, if you swim or the area comes into contact with chlorine or saltwater during the healing phase, the pigment may become bleached and will fade.

Healing consists of three phases:
1) Heal – your body’s natural defences will create a fine scab to protect the area while it is healing.
2) Peel – after a few days the scab will start to flake away. Picking at the treated area as it heals will result in pigment loss.
3) Fade – after the fine scabbing has fallen away you will see a lighter hue to the pigment, which is more realistic. After 4-6 weeks the colour that you see will be your new healed colour.

To help protect the pigment, you should wear UV protective swimwear and high factor sun cream/block when you are on holiday or exposed to the sun.

Skincare instructions

The morning after your treatment you can have a shower or bath. If you wish to shower, you will need to stand with your back to the water jets, to stop the water from directly hitting the treated area. For the next 7-10 days you will also need to avoid getting shampoo, conditioner, shower gel or soap on the treated area, while it is forming the scab and healing over.
If you wish to have a bath, please avoid soaking in the bath water or using any bath products, as this can irritate the treated area and can also draw the pigment out of the skin, causing it to fade.

Take care not to rub the treated area when you are towelling yourself dry. Use gauze to blot dry the treated area.

If you have any leakage of fluid or blood, gently clean the area with saline solution (salt dissolved in cool boiled water) or plain cool boiled water, using sterile gauze and blotting gently dry to remove all moisture.

If possible, leave the area to air dry for as long as possible. Try and wear loose fitting clothing as this will be more comfortable. You may find it more comfortable to wear a supportive top or sleep bra when you go to bed. It is recommended to place a piece of gauze over your breast when putting on your bra, rather than a taped dressing. This is to stop any leakage of fluid or blood from getting onto your underwear and also allows the area to air dry as much as possible.

You can apply a thin layer of Vaseline over the area each day, for the first 5-7 days, which should help to relieve any itching or dryness. You can also add a fine layer of Vaseline if the area treated feels tight. Lightly apply and then gently blot excess off with gauze.

Applying too much Vaseline and preventing air from getting to the treated area can slow down healing and may cause an infection. This can cause the pigment to either fade or come away completely.

**Signs to look out for**

Signs of infection include redness or swelling of the area (not including immediately after your treatment). The area also will be warm to touch and may start to feel very sore. If this happens please contact the Macmillan Advanced Nurse Practitioner for advice.
How to contact us

Macmillan Advanced Nurse Practitioner
Tel: 01865 234 193
(8.00am to 4.00pm, Monday to Friday)

Mobile: 07796 155 127
(8.00am to 4.00pm, Monday to Friday)

Email: sarah.jackson@ouh.nhs.uk

Outside of these hours, please call the main John Radcliffe Hospital switchboard:
Tel: 01865 741 166
Ask to bleep the Senior House Officer, Registrar On-Call or bleep number 6521 (for the member of staff co-ordinating the Specialist Surgery Ward).

More information

If you have any questions about the procedure or any of the information in this leaflet, please speak to your hospital doctor or the Macmillan Advanced Nurse Practitioner.

If you have a specific requirement, need an interpreter, a document in Easy Read, another language, large print, Braille or audio version, please call 01865 221 473 or email PALSJR@ouh.nhs.uk

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With thanks to the Royal Berkshire Hospital, Reading, for permission to use their leaflet to create this information.
October 2015
Review: October 2018
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OMI 12545P