

Physiotherapy advice after breast reconstruction surgery (DIEP or TRAM flap)

Information for patients



The aim of this booklet is to answer some of the questions you may have about recovering from your breast reconstruction surgery. It will also outline the physiotherapy exercises you can do, to help you recover from your surgery as quickly as possible.

Contents

Why do I need to exercise after my reconstructive surgery?	4
After your operation – Day 1 to day 7	5
Exercise Plan – Stage 1	6
Exercise Plan – Stage 2	8
What can I do to aid my recovery?	11
Can I still exercise after a seroma?	15
How do I know if I need further physiotherapy?	15
How to contact us	16

Why do I need to exercise after my reconstructive surgery?

It is important that you follow the exercises in this booklet, as they will:

- prevent shoulder stiffness and help you to regain and maintain full movement in your shoulder
- encourage your circulation and healing of your scar tissue
- prevent or ease any back pain caused by the surgery
- encourage flexibility and movement of your back, as well as increase your abdominal (stomach) muscle strength
- help you to get into the required position for radiotherapy (if needed), within a short period of time.

AFTER YOUR OPERATION

Day 1 to day 7

Do not push or pull yourself onto or off the bed with your operated arm. Instead, use the roll technique to get in or out of bed. You will be shown this by your physiotherapist or nurse.

The roll technique:

Roll over on to your side and lower your legs off the side of the bed. Using your non-operated arm, push up your upper body so that you are sitting upright. If you have had surgery that has involved both of your arms, use your least painful side to push upright.

Exercises

Start to move your arm, keeping within a pain free range (as described in the Stage 1 exercises).

There are two stages to your exercise plan:

Stage 1: Start these exercises the day after your operation. You will be given help and instructions by your physiotherapist. Continue to do them for two weeks (unless advised otherwise by your physiotherapist or doctor).

Stage 2: Start these exercises in the third week after your operation, unless advised otherwise by your physiotherapist or doctor.

We recommend that you continue to do the Stage 2 exercises, even when you have regained full movement in your shoulder. By linking them with something you do every day (e.g. at meal times), they will soon become part of your routine.

Exercise Plan – Stage 1

Do these exercises for the first two weeks after your surgery, unless otherwise instructed by your physiotherapist or doctor. You will be shown how to do them by your physiotherapist.

Complete the following exercises 5 times a day, with 5 repetitions of each.

1. Lying down or sitting. Clasp your hands together in your lap. Gently lift your arms up straight in front of you, letting your stronger arm lead the way. Take it as far as feels comfortable and then return to the starting position.



2. Lying down or sitting. Hold one hand in the other with your elbows bent to 90 degrees. Guide your arm out to the side, away from your body, as far as feels comfortable. Return to the starting position. Repeat with both arms.



3. Lying down, place your hands and arms by your ears. Gently let your elbows relax out to the side, until you can feel a stretch along the front of your chest. Hold for a slow count of 5 and return to the start position.



4. Sitting or standing. Place your operated arm behind your back, reaching up towards between your shoulder blades. Stop when you feel a stretch and return to the start position.



5. When sitting or standing, keep your arms by your side, push your shoulder blades forwards then pull them backwards, squeezing them together.

Complete the next exercises 3 times a day, with 5 repetitions of each.

6. Lying on your back, gently bend your knees up one at a time and place your feet flat on the bed. Tighten your tummy muscles, pulling your tummy button towards your spine. Keep breathing! Hold for 5 seconds. Then slowly relax.



7. Lying on your back, gently bend your knees up one at a time and place your feet flat on the bed. Tighten your tummy muscles, pulling your tummy button towards your spine and gently lifting your bottom off the bed a small amount. Keep breathing! Hold for 5 seconds. Then slowly relax.



Developing a seroma

A seroma is a collection of fluid, which can develop in the area where tissue has been removed from your abdomen and or/breast.

If you develop a seroma, reduce all the Stage 1 exercises to 2 times a day and stop any overhead exercises.

Exercise Plan – Stage 2

Start these exercises in the third week after your operation. It is fine to feel a stretch while you do these exercises, but they should not be painful.

Complete the following exercises 5 times a day, replacing the Stage 1 exercises.

1. Standing, lying or sitting. With your elbows straight, move your arms upwards in front of you. Raise your arms until your fingers are pointing to the ceiling and then lower them back down again.



2. Standing, lying or sitting. With your elbows straight, raise your arms away from your body out to the side, with your thumbs pointing upwards. Continue to raise them until your fingers are pointing to the ceiling, and then gently lower them back to your sides.



3. Stand facing a wall and 'walk' your hands upwards, moving closer to the wall the higher your hands get. You can stick something on the wall as a reference point to see how you are progressing. Hold this for 10-30 seconds and then gently lower down. You should feel a stretch but no pain.



4. Lying down, place your hands and arms by your ears. Gently let your elbows relax out to the side, until you can feel a stretch. Hold for a slow count of 5 and return to the start position.



5. Sitting or standing. Place your hands behind your back, reaching up towards your shoulder blades. Stop when you feel a stretch and return to the start position.



6. Lying on your back, gently bend your knees up one at a time and place your feet flat on the bed. Tighten your tummy muscles, pulling your tummy button towards your spine. Keep breathing! Hold for 5 seconds. Then slowly relax.



7. Lying on your back, gently bend your knees up one at a time and place your feet flat on the bed. Tighten your tummy muscles, pulling your tummy button towards your spine and gently lifting your bottom off the bed a small amount. Keep breathing! Hold for 5 seconds. Then slowly relax.



If you develop a seroma, reduce these exercises to 2 times a day and also restart the Stage 1 exercises. Also stop any overhead exercises.

What can I do to aid my recovery?

Follow your exercise programme.

- Complete your exercises slowly and gently.
- Do not do any painful stretches. You should feel a gentle stretch when exercising. If you feel pain when exercising then take painkillers 30 minutes before you are due to do them again. It is important to follow the instructions provided with your pain relief and not to take any more than is recommended. If you have any questions, speak to your nurse or doctor.
- Reduce 'cording'. After your operation, tight bands or 'cords' can develop in your armpit, along your side or down your arm. This is often called cording. You may experience a sharp pulling sensation or pain when you try to stretch your arm, which is just the 'cord' stretching. It does not cause any harm.

Exercise will help stretch and relieve these cords, allowing your arm to move freely. Although they will gradually get better, please speak to your physiotherapist if you have any questions or concerns about cording. It is especially important that you contact your physiotherapist if you are unable to reach your hand above your head and keep it there for radiotherapy or have difficulty in completing daily tasks as a result of cording.

- Be aware of your posture. Remember to keep your shoulders level and try not to slouch.



- Move your operated arm as naturally as possible. This will help with the healing process.
- Continue with your exercises until you can use your arm as you were previously able to. You might have days where your arm feels stiff and days when it does not. Continuing to do the exercises will help reduce shoulder stiffness and prevent scar tissue from tightening up.

Massage

Massage your scar to increase skin suppleness.

Once your scar has healed, massage it using a non-perfumed cream such as aqueous cream. Using the palm of your hand or fingers, move the top layer of skin over the underlying layers, in a circular motion or away from the scar. This will make your skin more supple and will help you to move your arm as well as you could before the surgery.

Do not forget to include your tummy scar and belly button scar.

Gentle stroking and tapping can ease discomfort. Following breast surgery, you may experience changes in sensation over your breast and inner arm (such as numbness, tingling or extra-sensitivity). These sensations are normal and often disappear a few months after your surgery. Sometimes gentle stroking or tapping of the affected area may ease the discomfort, but you may still be left with some numbness.

Lifting and housework

- Avoid lifting anything heavier than a kettle of water for the first 2 weeks after your surgery. Gradually increase this weight, as you recover.
- Avoid heavy activities and lifting for the first 6 weeks after your operation (such as vacuuming and ironing). Your physiotherapist can give you more specific advice about this.
- Avoid activities that will cause a strain on your tummy muscles, such as carrying heavy loads or contact sports.
- Think about any activities that you do during the day which might cause a seroma to develop. These activities include:
 - static exercises or repetitive movements (e.g. sitting at a computer)
 - knitting or writing, which is usually done for long periods of time without moving around
 - small and fast movements, such as dusting and light housework.

Try to reduce these activities if they are causing an increase in fluid where you have had your operation.

Sport and leisure

Begin some form of gentle exercise, such as walking. This can help maintain a good fitness level.

It is normal to feel tired after surgery and/or treatment, such as chemotherapy or radiotherapy, so be sensible and don't push yourself too hard. It is difficult to put a timeframe on how long you might feel tired, as it will depend on the type of treatments you have. Ask your physiotherapist or doctor for advice.

After 6 weeks you can start building up to more advanced upper body and abdominal exercises. Start by doing more active walking and using an exercise bike. Build up your tolerance step by step. Your physiotherapist can advise you further with this.

You can return to swimming from around 4 to 6 weeks after your surgery, once your wounds have healed. Start gently, with breast stroke and side stroke, working up to freestyle (front crawl), butterfly and backstroke at around 6 to 8 weeks post-surgery.

Six weeks after your operation you should be able to return to your normal activity levels. This includes lifting and exercise with weights. Please ask your physiotherapist for further exercises and information.

Driving

We advise you do not drive for 6 to 8 weeks after your operation. Before you start driving again:

- Check with your doctor that it is alright to do so. You can do this at your first outpatient clinic appointment.
- Check with your insurance provider to make sure you are covered.
- Make sure you are confident that you can handle the car in an emergency situation and can carry out an emergency stop.

Returning to work

When you return to work depends on what your job involves. Your ward doctor will be able to issue you a sick note before you are discharged from hospital. If you need more time off work, your GP will be able to provide a further note. Your doctor or nurse will be happy to discuss your work with you and give you more specific advice.

Can I still exercise after a seroma?

A seroma is part of the healing process, but if it is severe, it will need to be drained. Your surgeon or breast care nurse will be able to do this during an outpatient appointment.

If you develop a seroma, you should:

- contact your breast care nurse
- stop overhead exercises
- reduce your stage 2 exercises down to twice a day and restart your stage 1 exercises.

How do I know if I need further physiotherapy?

You may need further physiotherapy if:

- you cannot reach the radiotherapy position, due to cording, scar tightness or a painful shoulder
- your shoulder movement is restricted and impacting on your daily activities
- you develop lower back pain after the operation
- you have reduced tummy strength.

How to contact us

If you have any problems or further questions, please speak to your ward physiotherapist or breast care nurse.

Hands and Plastic Surgery Therapies Department,
John Radcliffe Hospital

Tel: **01865 231 181**

(Monday to Thursday, 8.00am to 4.00pm)

(Friday, 8.00am to 12.30pm)

Email: **handtherapy.jr@ouh.nhs.uk**

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 **PALS@ouh.nhs.uk**

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