Top 7 Breast Reconstruction FAQs

Many women choose to undergo breast reconstruction after breast cancer surgery for various reasons. When you work with a reputable doctor with many years of experience and training, you can reshape your breasts to look as closely as possible to their normal shape and size. But breast reconstruction isn’t for everyone, and there are plenty of variables to consider. Here are some of the most commonly asked questions about the breast reconstruction process.

What is breast reconstruction and why should I get breast reconstruction?

Breast reconstruction is a procedure to help rebuild the appearance and shape of the breast after breast cancer surgery. Many women choose breast reconstruction to make their breasts look balanced, regain their shape and be happier in general with their bodies after breast cancer surgery. It can be difficult to wear even minimally revealing clothing without reconstructed breasts to support the clothing structure. External breast prosthesis are available but can be limited, cause sweating, and feel heavy. Everyone has different reasons why they want to get breast reconstruction, so discuss all available options with your doctor prior to the procedure.

The DIEP Flap: What is it and how do I know if I’m a candidate for it?

The DIEP (Deep Inferior Epigastric Perforator) flap is when blood vessels, skin and fat are cut from your lower belly wall and used to reconstruct your breast. The procedure is also called auto-transplantation because the tissue from the abdomen is completely disconnected and then reconnected with the use of a microscope to reconnect the blood vessels and tissue. Not everyone is a candidate for the DIEP flap, however. If you have had a previous abdominal surgery or have a weakened abdominal wall, you may not be able to have the DIEP flap. The reason is because the blood vessels may have been damaged at some point, so your doctor will take a more extensive look to determine whether you are a candidate.

Also, women with a BMI between 25-35 are generally good candidates since the fat available is sufficient to donate for the procedure and create at least a B cup breast. A BMI of lower than 25 can still be effective, but is limited with regard to the reconstructed breast size and might require an implant for volume. Women with a BMI greater than 35 have a greater risk of experiencing complications with DIEP surgery.

Will I have feeling in my reconstructed breast?

Your reconstructed breast won’t have the exact same feel as your natural breast, but it won’t be completely
numb either. The affected skin could regain some sensation and become more sensitive over time, but never to the extent it was before surgery. The sensual sensitivity does not return to the breast.

**How long do I have to wait after a mastectomy or lumpectomy to have breast reconstruction?**

In most cases, you can have breast reconstruction done at the same time as your mastectomy or lumpectomy. However, you can also wait until many years later to have breast reconstruction if you choose. Many women are undecided at the time of their breast cancer surgery, so they choose to wait. The choice is completely yours with few exceptions.

**When can I have reconstruction done?**

Patients may choose to have their breast reconstruction process started while the breast cancer surgery is taking place, or they can choose to wait months or years later. Depending on the surgery and the amount of radiation required, you may choose to delay the reconstruction until several months afterward. Several factors can determine when the right time to have reconstruction is, so be sure to consult with your doctor before a decision is made.

**What is the difference between immediate and delayed reconstruction?**

Patients have the option of getting their breast reconstruction done at the same time as the surgery to remove the breast cancer, or they can choose to delay it. If immediate reconstruction is chosen, your doctor will use tissue expanders or flap immediately after the breast surgeon is finished. For delayed reconstruction, your doctor will wait until you have completely healed from your surgery before inserting the tissue expanders. Delayed reconstruction can happen years after the initial surgery.

**Will radiation affect my reconstruction?**

It’s possible that radiation can affect the success of your reconstruction. It’s also possible for radiation to delay the healing process afterward. Radiation tends to cause more firm scarring especially with implant reconstruction.

Dr. Renee Comizio is a board-certified surgeon who specializes in cosmetic and reconstructive procedures for the body, face, and breasts. Dr. Comizio sees every patient as an opportunity to improve their quality of life, and she does so by combining her training and experience to provide the best possible outcome for every patient. If you have any further questions about the process of breast reconstruction, contact us today to schedule a consultation.