Information for patients

Breast reconstructive surgery – DIEP flap

What is a DIEP flap?

A DIEP (deep, inferior, epigastric perforator) flap is an operation, which involves removing an area of skin, fat and blood vessels from the lower abdomen (stomach), which is then used to make a new breast following mastectomy (removal of breast).

What happens before my surgery?

Before surgery, some patients attend a pre-admission clinic where the doctor will explain the surgery and you will sign a consent form.

At the clinic, the health care team will ask you about your health, medication and lifestyle. They may test your blood, take x-rays and an electrocardiogram (ECG).

Your doctor will talk to you about what medications to take before you come into hospital. It is important to tell your doctor if you are taking any blood thinning medications, such as aspirin, warfarin or clopidogrel (Plavix).

Please bring all of your medications to hospital with you.

If you use a dosette box or pill organiser to take your tablets, please ask your pharmacist to print out a list of your current medications so you can bring this to hospital.

If you do not need to attend a clinic, we will telephone and tell you when you are scheduled for your operation and what to bring to hospital. You may also receive a letter informing you of your time and date of surgery.

Please make sure you confirm your date of surgery.

The day before your surgery, the hospital will call you to inform you of the time you need to stop eating and drinking and what time to come to hospital.

You will need to bring to hospital some full brief

support underwear that helps to support your tummy and a 'crop top' type bra with no under wire that will provide your breasts with support.

What will happen on the day of my surgery?

We ask that you shower before you come to hospital and remove jewellery, make up, nail polish and fake nails. It is advised that you leave valuables such as jewellery and large sums of money at home to decrease the possibility of items being misplaced or stolen.

On the day of your surgery, please make your way to the St Vincent's Day of Surgery Admission (DOSA) area, which is located on the first floor of the Inpatient Services Building, Princes Street, Fitzroy.

When you arrive the nursing staff will check your pulse and blood pressure.

You will need an anaesthetic for your surgery. The anaesthetist (the doctor who will give you the anaesthetic) will meet with you before your surgery and talk to you about your health and the best anaesthetic for you.

A general anaesthetic (anaesthetic that puts you to sleep) is normally used for this surgery.

St Vincent's is a busy hospital so please be aware that you may need to wait up to three hours for your operation.

What happens during the surgery?

The DIEP vessels are first separated from the abdominal muscle, then cut and transferred to form the new breast (a flap).

Microsurgery is used to connect blood vessels from the abdominal tissue to the blood vessels in the armpit to create the blood supply for the new breast.

This type of surgery usually takes four to six hours.

What happens after the surgery?

You will wake up from the anaesthetic in the recovery room and be transferred to your ward shortly after. A nurse will monitor your blood pressure, pulse and temperature.

You will have an intravenous (IV) drip in your hand, an oxygen mask over your mouth and nose and a dressing over your breast and abdomen wounds. You will also have a catheter (tube) in your bladder to monitor how much urine you are making.

You will have drain tubes in both the breast and abdominal areas to help drain away any excess fluid and reduce swelling and infection.

Your new flap will be constantly observed for colour, warmth and temperature. These observations will be performed:

- half hourly for the first 24 hours
- hourly for the next 24 hours
- 2 hourly for the next 24 hours
- 4 hourly until discharge.

You will be unable to eat and drink until review by your doctors the following day, however you may be permitted to suck on ice.

You will remain resting in bed for one to two days, sitting up slightly with your knees bent and supported by a pillow to reduce the tension on your abdomen.

You are likely to have an epidural or a patientcontrolled morphine/fentanyl drip that will help control your pain. A nurse may also give you tablets or an injection to help you feel better.

Your drain tubes will be removed once the drainage output decreases and your doctor is happy for them to be removed. You may be discharged home with your drain tubes. Nurses will come to your house daily to measure and care for your drain tubes.

When can I go home?

Most people stay in hospital for seven days for this type of surgery. The nursing staff will show you how to care for your breast and abdominal wounds and arrange for nurses to visit you at home.

Patients are usually discharged at 10am so the room can be prepared for another patient.

Before you leave the ward someone will:

- make a follow-up appointment at St Vincent's Specialist Clinics for you
- send a letter from the hospital to your local doctor (GP)
- give you medication, if the doctor prescribes it
- give you a medical certificate if needed (you will need to ask).

Please remember to take all your belongings including x-rays home with you.

What should I do once I get home?

Your doctor will recommend another two to four weeks off work to give your body the best chance to recover.

Continue to wear your support bra and underwear at all times until your next appointment.

Protect the breast area from sunlight and do not wear any tight fitting clothes, apart from your sports bra and support underwear.

You're encouraged to take gentle walks two to three times a week.

Avoid doing any strenuous activity, especially lifting anything heavy (lift no more than 2-3kgs – roughly the weight of a bag of oranges) for four to six weeks. This includes no vacuuming, hanging out washing or cleaning the bathroom. You should also avoid sport for four to six weeks.

Refrain from smoking and limit your caffeine intake, as these stimulants can reduce blood supply to the reconstructed breast.

You can drive once you have clearance from your doctor.

If you experience any increased pain, swelling, or redness or any changes in the colour or look of your breast, go to your nearest emergency department or GP as soon as possible.

Contacts Liaison Nurse Tel: 9288 4853

Waiting List Officer Tel: 9288 2270

This information sheet is intended as a guideline only. If you have further questions or concerns, please speak to your doctor.



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