Oncoplastic breast reconstruction: guidelines for best practice

Information for patients

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This information was developed by

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Introduction

People with breast cancer are increasingly being offered a choice of procedures to restore their breast shape after surgery. These may take place either at the same time as a partial or total mastectomy (immediate reconstruction) or at a later date (delayed reconstruction). Combining breast cancer surgery with these procedures is known as oncoplastic breast reconstruction.

In November 2012, a mixed group of health professionals with expertise in oncoplastic surgery produced guidelines for UK teams providing breast reconstruction. The aim is to help ensure all breast cancer patients are well informed about oncoplastic breast reconstruction and can expect to receive the best possible outcomes, support and care, wherever they are treated.

This is a summary of the guidelines, produced with the help of patients affected by breast cancer, and information and support charity Breast Cancer Care. They have been sent to health professionals across the UK. The full guidelines are available from

www.associationofbreastsurgery.org.uk and www.bapras.org.uk.

This summary sets out what all breast cancer patients can expect from their breast reconstruction team. We hope it will be helpful if you are considering, are in the process of having or have had oncoplastic breast reconstruction.

Summary of the guidelines

The option of breast reconstruction Every patient offered a mastectomy as a breast cancer treatment option can expect that:

 the full range of breast reconstruction options will be discussed with them, regardless of whether or not they are all available at their local hospital

- if a specific procedure is not available at their local hospital, or if a second opinion is needed, they will be offered the option of being referred to another hospital that can provide the relevant services, and all necessary information will be shared between the two hospitals
- their suitability for breast reconstruction will be considered by experienced, trained staff who will take a range of factors into account, including their cancer diagnosis and general health, lifestyle and emotional wellbeing
- if they choose not to have immediate reconstruction, they will be able to have breast reconstruction surgery at any time in the future. There should be no time limit on the availability of delayed reconstruction after mastectomy
- decisions about the timing of any additional treatment, such as radiotherapy or chemotherapy, will consider the possible impact of breast reconstruction before or after these treatments
- if breast reconstruction is not possible, the reasons will be explained to them and recorded in their medical notes.

Patient information, support and decision-making

Decisions about breast reconstruction surgery are complex and can be difficult to make. Every patient can expect:

- easy access to current, reliable and balanced information relating to all the surgical options for which they are suitable, including the possible complications and risks associated with each option, longer term recovery and the number of procedures likely to be needed to achieve a satisfactory result
- access to all the information and support they need when making their choice, and throughout their treatment and recovery

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- information in languages other than English (and/or access to interpreters) if necessary, and in a variety of formats (for example leaflets, photographs, DVDs, face-to-face conversations, recommended websites)
- health professionals will avoid using emotive or persuasive language when discussing the possible options, and that all discussions about surgery will take place in a private setting
- additional support if they are finding it particularly difficult to make a decision about which operation to have
- sufficient opportunity to meet, discuss their options in detail with and ask questions of their surgeon and specialist breast care nurse before making their decision
- to be told about the possibility of additional procedures (for example nipple reconstruction or surgery to alter the size of the other breast)
- enough time to make their decision, taking into account national recommendations for timing of cancer treatments
- to be made aware of what they can realistically expect from breast reconstruction surgery, and what can and cannot be achieved since the look and feel of a reconstructed breast will not be the same as their natural breast
- access to a range of photographs of the result of operations carried out by their own surgeon, and of all the possible procedures they are considering (including scarring in the breast area and elsewhere if the procedure involves moving tissue from other parts of the body), and including results in people of different shapes, sizes and ethnicities
- data to be available about the results (such as rate of complications and satisfaction with cosmetic outcomes as reported by patients) of their own surgical team, in comparison with the results of other teams and with national published data

- to be told about the possible personal and emotional impact of breast reconstruction, including how long it can take to adjust to the look and feel of a reconstructed breast
- opportunities to learn from the experiences of other patients who have had similar surgery
- to be told when any surgery is likely to take place, which should be within timeframes that take into account national recommendations for timing of cancer treatments.

Before admission to hospital for breast reconstruction, every patient can expect:

- to be given information about their hospital stay including explanations of what assessments and procedures will take place before surgery, what to bring into hospital, what to expect regarding pain and pain relief after surgery, and the likely length of hospital stay
- to be given information about exercise and physiotherapy after surgery, approximately how long it will take to recover and return to their usual activities such as driving, lifting and sport, and advice on suitable clothing and underwear after surgery
- to be given details of whom to contact and how if they have difficulties out of hours or at weekends after leaving hospital
- to be invited to take part in local and national clinical trials and audits of breast reconstruction surgery
- to receive copies of any letters sent to their GP (local doctor)
- ongoing access for support and advice to a specialist breast care nurse with expert knowledge of breast reconstruction. If they might benefit from additional support, that they will be referred to more specialist services, with their agreement
- access to information and support for partners and family members, if needed.

Surgery

Every patient can expect:

- their breast reconstruction to be carried out by specially trained staff and in hospitals with all the necessary equipment and facilities, and where breast reconstruction is performed regularly
- to be admitted to a single-sex ward
- the process for giving consent for surgery to follow established guidelines
- to be asked to give their consent for photographs to be taken before surgery and during their recovery. These will be taken by a qualified medical photographer and stored securely, and copies of photographs placed in the patient's notes will only be seen by members of the breast reconstruction team. Images will never be used for teaching or publication without the patient's express consent
- to meet the anaesthetist to discuss options for pain relief after surgery
- to be drawn on (known as marking) by the surgeon to indicate where the surgery will be taking place, and that this will be checked with the patient and with their notes
- discharge plans to be discussed with them as part of the consent process before surgery, and a copy sent to their GP. This should include arrangements for nursing support and help with surgical drains and dressings.

After surgery

Every patient can expect:

- support and preparation for seeing the results of surgery for the first time
- their pain to be routinely assessed and to be offered the pain relief that was discussed before surgery

- a physiotherapist and specialist breast care nurse to see them, and provide advice and support before they are discharged from hospital
- a specialist breast care nurse to be available to provide support and explanations at the appointment when the patient is given the results from their surgery
- their opinions about the reconstruction and their satisfaction with the outcome of surgery to be recorded at regular intervals
- to be given information about the availability of longer-term support, including local and national support groups
- their need for additional psychological support following discharge to be considered with sources of suitable support identified and necessary referrals made
- systems to be in place for them to be referred for further surgery if needed.

A summary of the information patients can expect to receive and have discussed with them

- The different types of breast reconstruction and their individual suitability for each type.
- The risks and benefits of each procedure.
- The possible impact of lifestyle and risk factors, such as smoking and weight, on the outcome of surgery.
- The likely number of procedures involved to achieve a satisfactory result.
- The likely length of hospital stay for each procedure.
- The likely length of time it takes to return to normal daily activities after each type of procedure.
- The timing of breast reconstruction, and the pros and cons of immediate and delayed procedures.
- The effects of radiotherapy on breast reconstructions and implants.
- The influence of chemotherapy, and reassurance that there is no evidence that immediate breast reconstruction leads to delays in having chemotherapy.
- Reassurance that breast reconstruction does not impair future cancer detection.
- The likely position and length of scars on the breast and other parts of the body.
- Alternatives to breast reconstruction, including no reconstruction and the use of breast prostheses.
- The possibility of surgery to the other breast, including types, timing, risk and benefits, and possible outcomes.
- The possibility of nipple reconstruction, including alternatives to surgery such as tattooing and prosthetic nipples.
- Outcomes from surgery that can affect the appearance and feel of the breast such as hardness, position, movement, ptosis (droop), wrinkling and so on.
- Details of local and national support services.
- Assurance that breast reconstruction is available at a later date as a delayed procedure for people who do not choose immediate reconstruction.

Sources of support and information

Breast Cancer Care

UK charity providing information, and emotional and practical support for anyone affected by breast cancer (includes booklet on breast reconstruction and online animated guide)

www.breastcancercare.org.uk/reconstruction

Association of Breast Surgery

Represents health professionals treating breast cancer (includes links to a range of guidelines and information on new developments)

www.associationofbreastsurgery.org.uk

British Association of Plastic, Reconstructive and Aesthetic Surgeons

Includes a patient guide to breast reconstruction **www.bapras.org.uk**

Breakthrough Breast Cancer

Charity working to enable and ensure access to improvements in breast cancer prevention, diagnosis and treatment

www.breakthrough.org.uk

Cancer Research UK

Charity providing patient information www.cancerresearchuk.org

Healthtalkonline

Includes video clips of interviews with patients who have previously undergone mastectomy and/or breast reconstruction

www.healthtalkonline.org

Macmillan Cancer Support

Charity providing practical, emotional and financial help to people living with cancer and their carers

www.macmillan.org.uk

Maggie's

Charity providing emotional and psychological support for patients and their families affected by cancer

www.maggiescentres.org

A book for patients considering breast reconstruction

Breast reconstruction: your choice Dick Rainsbury and Virginia Straker. Class Publishing, 2008 If you have a breast cancer or breast health query contact the Breast Cancer Care Helpline on **0808 800 6000** (Text Relay 18001) or visit www.breastcancercare.org.uk





