Nipple reconstruction

This leaflet has been written to help you answer any questions you may have about nipple reconstruction. It aims to provide information to you and your family to gain some understanding of the operation and what to expect.

Why consider nipple and areola (the coloured area around the nipple) reconstruction?

Nipple and areola reconstruction represents the final stage of breast reconstruction. This procedure is offered to patients who have undergone breast reconstruction.

It is usually postponed until 6-12 months after breast reconstruction or following completion of surgery to the other breast to allow any post-operative swelling to subside. The new nipple can then be positioned correctly on the reconstructed breast. Nipple reconstruction is however an optional procedure and patients who are happy with their breast reconstruction alone may decide not to have one.

What does the surgery involve?

The type of surgery you have will depend on your preference and the surgeon’s technique. Your surgeon will discuss with you the options, risks and benefits in order for you to make an informed decision. Nipple reconstruction can be safely performed as an outpatient day procedure under local anaesthetic or general anaesthetic if you prefer.

The surgeon will use some tissue, known as a ‘flap’ from the reconstructed breast and will stitch this together to form the projecting nipple. This will produce the nipple shape but the colour will be the same as the colour of the reconstructed breast.

The areola can be reconstructed using skin from a donor site; usually the upper inner thigh as the skin here is slightly darker and is a better colour match for your areola than the breast skin. This would leave you with a scar at the donor site, where the areola skin is taken. The scar will be a straight line about 5-6cm long and will fade with time.
Figure 1

Figure 2
Tattooing of the nipple areola complex

Nipple areola tattooing on to the skin can be performed following a nipple reconstruction or on its own to produce a good appearance and colour match for the nipple areola complex. If you do not want a scar at the donor site tattooing alone can be performed to produce the areola colour.

Stick on prosthetic nipples

A silicone stick-on prosthetic nipple can be custom-made as an exact mould of your original nipple and areola. This is an option for some women who do not want further surgery.

Are there any risks?

No surgery is free of risk, but problems can be minimised by good patient care and good communication between your surgeon and yourself. Most women are very happy with the outcome.

Although this is a minor procedure there is a small risk of bleeding. If you are worried about this, speak to your breast care nurse.
There is also a small risk of infection at the wound site; this can delay wound healing and a course of antibiotics may be required to clear the infection.

Sometimes the blood supply to the new nipple is not adequate and the tissue used to produce the nipple may not survive. In this case the nipple must be removed and an alternative option will be offered to you to recreate the nipple.

The nipple projection will flatten over time to some extent. Sometimes another reconstruction will be required to improve the projection.

Tattooing of the nipple areola complex can fade with time and top-ups may be required to improve colour match.

**The operation**

You will be asked to read and sign a consent form for the operation and have a chance to ask any remaining questions you may have. The operation can be safely performed as an outpatient day procedure under local anaesthetic and takes around 30 minutes. If you are having another breast procedure under general anaesthetic the nipple reconstruction can usually be done at the same time.

You will be asked to come to the hospital on the morning of the operation and will be seen by the surgeon who will mark up the position of the new nipple on the breast skin and make adjustments until you are happy with the location.

The surgical nurse practitioner usually performs the nipple and areola tattooing at an outpatient clinic and you may need to see the nurse a couple of times until you are happy with the colour, although an exact colour match cannot always be guaranteed.

**After the operation**

The wound will be covered with a special dressing to help prevent infection and to soak up any bleeding which may occur. The area should be kept clean and dry while the dressing is in place.

If you become aware of any change in colour of the nipple, severe pain, swelling or redness you should contact your breast care nurse for advice. Pain relief will be available to you in hospital if you require it and you will also be given some paracetamol to take home with you.

A follow-up appointment will be arranged for you one week after your operation to remove the dressing and check that the wound is healing properly. Another appointment will be organised in order to have your stitches removed.
Healing can take several weeks, but you should be able to resume your normal activities after a few days or as soon as you feel ready. Scarring may be quite visible for some time but this will fade over time. Massaging a moisturising cream into the area may help this.

**Any other questions**

This leaflet should provide you with some of the answers to the questions you may have. If you have any other questions about your surgery you should talk to your breast care nurse or surgeon at your next appointment. They will be happy to discuss any concerns with you.

**References:** Nipple reconstruction with a new local tissue flap. Thomas SV, Gellis MB, Pool R. *Plast Reconstr Surg* 1996;97:1053-6

**Useful telephone numbers and additional information**

- Surgical Care Practitioner information: Laura Fopp Tel 01223 245151 or bleep: 156 2015.
- Ward telephone number: 01223 245151 ext: 58522/ 58524.
- Plastic Surgery Unit, level 3, ATC: 01223 245151 ext: 58509.

We are now a smoke-free site: smoking will not be allowed anywhere on the hospital site.
For advice and support in quitting, contact your GP or the free NHS stop smoking helpline on 0800 169 0 169.

**Other formats:**

If you would like this information in another language, large print or audio, please ask the department where you are being treated, to contact the patient information team: patient.information@addenbrookes.nhs.uk.

Please note: We do not currently hold many leaflets in other languages; written translation requests are funded and agreed by the department who has authored the leaflet.

**Document history**

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