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## Gynecomastia surgery (male breast reduction)

Gynecomastia (enlarged male breasts or *man-boobs*) is a benign condition where the male chest adopts a more female breast shape and often leads to issues of lost self confidence, particularly when wearing fitted garments or during activities such as swimming. Gynecomastia surgery can help restore the flatter male chest and thereby rebuild self-confidence. It usually requires removal of skin and breast tissue and sometimes this is combined with liposuction.

Enlarged male breasts vary with age and most of the time no obvious cause can be found. Certain known causes that should be ruled out before undergoing surgery include medication (for high blood pressure, heart disease and prostate cancer), other drugs (such as marijuana and anabolic steroids), some diseases (such as liver failure and some cancers) and other rare birth disorders. Mr Misra will discuss this with you at your consultation.

### **The surgical procedure**

The operation for gynecomastia is performed under general anaesthesia and normally takes 2 hours to complete. When enlargement is due to fat, liposuction alone, can be very effective. However, when the breast gland is large, tissue removal becomes necessary. This is done by making an incision around the nipple disc (areola) and further incisions beyond, if needed. Mr Misra will explain if this applies to you at your consultation. Commonly, liposuction and breast tissue excision are utilised, in combination, to get the best results.

### **What to expect**

Following surgery, dressings are placed around each nipple so they can be checked regularly, in the immediate post-op period. Drains (tubes that drain tissue fluid by connection to suction bottles) are placed, during surgery, in each side of the chest, and remain for the time of your hospital stay. This is usually for 2-3 days after which the drains are removed, in the ward. With liposuction, small dressings are placed over the multiple skin incisions. A pressure garment, similar to a vest, is fitted over the dressings to support your chest tissues, while they heal. Mild discomfort in the chest is well controlled by local anaesthetic that is used at the time of surgery for many hours after and later by oral pain-killers, when required.

### **Aftercare**

Once you are fit for discharge home from the ward, you will be given advice about your follow-up clinic appointment with Mr Misra, at 1 week. You will be asked to keep

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the dressings intact and dry until then and to wear the vest continuously (day and night) for 6 weeks. Dissolving stitches will be used in the majority of cases and therefore the first clinic visit will be a wound review, after which Mr Misra will advise about showering etc. depending on the type of job you do, it may be safe to return to work after 2 weeks. It is advisable to refrain from activities such as exercise for at least 6 weeks.

### **Risks and complications**

The potential complications of the surgery are relatively rare.

#### **Bleeding (haematoma)**

If excision surgery is performed, rather than liposuction, a blood clot (haematoma) can form that may need to be drained at a second operation. This usually occurs in the first 24 hours and will be monitored in the ward by the nursing staff. Bruising and swelling may last longer as a result, but there is normally no long-term consequences to this.

#### **Infection**

This will be checked for at your wound check and is not common. If this is suspected, you will be prescribed a course of antibiotics, which usually clears up the problem. Wound healing may occasionally be delayed as a result.

#### **Nipple sensation**

With excision surgery, nipple nerves are likely to be cut and don't usually recover. A permanent loss of nipple sensation results.

#### **Contour irregularity**

Minor contour irregularities are possible and noticeable from liposuction and excision or both. This is noticeable by appearance and feel. Occasionally, this can be from internal scarring or fat dying (fat necrosis). Massage may help.

#### **Asymmetry**

Measurement differences on each side of the chest are normal to find. This will be explained by Mr Misra, during the pre-op consultation. Surgery aims to minimise the asymmetry as much as possible, but will not be able to fully correct it.

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### Scarring

Most scarring with liposuction usually is not noticeable as the skin incisions are very small. However scars following excision surgery may become lumpy (hypertrophic / keloid) and sensitive. If symptomatic, bad scars can be modified by massage, steroid injection or other scar therapies, but may be difficult to completely correct.

### Revision surgery

Depending on what this relates to, revision surgery may be needed due to unsuccessful removal of breast tissue, uneven chest contour or bad scarring. This will not be attempted until 6 months post-op, or thereafter, as the situation can continue to change many months after surgery. Mr Misra will explain this during your consultation.

### Further information

If you are interested to know more about gynecomastia surgery, please call: 01753 66571 / email: [surgeon@alokmisra.com](mailto:surgeon@alokmisra.com)

**Disclaimer:** This information leaflet is designed to supply useful information but is not to be regarded as advice for a specific case. It does not replace the need for a consultation with Mr Misra and in this regard he accepts no liability for any decision taken by the reader in respect of the treatment they decide to undergo.