

Information provided is intended to inform clients of expected procedures and outcomes. However, not all patients, procedures or surgeons are the same, and information may not be applicable to all procedures. PIAC reserves the right to vary the way that a procedure is performed or which technique is used.

# Nipple Reduction

## Surgical/Procedure Name

Nipple Reduction

## Introduction

Long or large nipples are a cause of embarrassment for many people, both men and women. They can affect the way people look and feel whether undressed or fully-clothed. Breast feeding can permanently change the shape and size of nipples, making them longer and unattractive. Nipple reduction surgery is a safe way to permanently correct the problem and increase self-confidence. These days more and more people are electing for nipple reductions, sometimes in combination with a breast augmentation, lift or reduction, and sometimes as a single procedure.

## Surgical Procedure

The surgeon will start by assessing which part of the nipple needs to be reduced. The nipple could be reduced in length, width, or both depending on the shape and the desired result.

Nipples that droop down or project too far out will be shortened. This is done by removing the tip of the nipple and then closing the new tip with stitches. Sometimes the skin around the neck of the nipple is removed and the tip is stitched to the bottom of the nipple.

If the nipple is too wide or thick, but not too long, a pie-shaped wedge will be removed from underneath the nipple. This allows the nipple to be "taken in" and the circumference reduced. Dissolving sutures are used.

For some people the nipple may be too wide and too long. In those cases, both procedures are performed.

## Hospital Admission

Out Patient procedure. No admission necessary.

## Duration of Operation

One hour

## Anaesthetic

Local anaesthesia



## Pre-operative Care

Inform your surgeon of any allergies, all medical conditions, and any medication that you are taking (both prescription and non-prescription).

Avoid aspirin and blood thinning medication such as brufen for two weeks prior to surgery to eliminate the chance of post op. bleeding. You should not smoke for 2 weeks prior to surgery as this may affect your reaction to the anaesthetic and prolong the healing process. Patients that suffer from hypertension must inform the surgeon prior to surgery.

## Post operative care

You may need to return in about a week to have the stitches taken out, but usually this is not necessary as dissolvable stitches are often used.

You will be able to shower the following day. Most patients can return to work and resume their normal activities within a day.

## Results

Following surgery your nipple will be balanced and proportionate in size and shape to the rest of your breast.

## Risks and Complications

Risks are inherent to any surgical procedure. The most common risks are swelling, bruising, bleeding, infection, fluid, numbness, or a change in sensation to the nipple, however they are rare and almost always temporary.

The most common risks particular to this surgery are minimal pain and swelling. Your surgeon will administer painkillers and anti - inflammatory medication so that any soreness and swelling will usually disappear by the second or third day.

This treatment does not normally affect the ability to breastfeed.

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