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Treatment of Gynaecomastia / Male Breast Reduction

Gynaecomastia is an excessive enlargement of male breasts. It is a medical term that originates from the Greek words for "women-like breasts." This is a common condition that affects an estimated 40 to 60 percent of the male population. It may affect only one breast or both. It can be a normal occurrence in some male teenagers and men.

Causes of Gynaecomastia

Breast tissue development is influenced by hormonal levels of Oestrogen, which is naturally low in males. Hormonal imbalances at puberty may give rise to tender gynaecomastia. Most cases normally improve within a few years or by the age of 20.

Gynaecomastia can also be caused by the use of anabolic steroids, medications containing oestrogen, alcohol, marijuana, etc., and medical conditions including cancer and impaired liver function. However in most cases the causes of gynaecomastia are unknown.

Assessment: Examination and Diagnosis

Enlarged breast tissue in men is composed either predominantly of fatty tissue, glandular tissue or a combination. Thick and excess skin also makes the breasts look larger.

In some cases Dr Pham may request an ultrasound to further evaluate the breasts before surgery. Breast cancer in males may be detected but this is highly unlikely.

Management of Gynaecomastia

Options of treatment include

1. Observation – if the enlargement is mild or during a hormonal change period such as the puberty years. Dr Pham recommends that teenagers and young men with gynaecomastia wait for 2 years after the onset, as most cases will improve without intervention.
2. Non-medical – changing certain medications, cease heavy use of alcohol, marijuana or anabolic steroid. Obese men can lose weight by dieting and exercise.
3. Medical – hormonal treatments
4. Surgical

MAKING A DECISION TO PROCEED WITH SURGERY

You should be informed as much as possible before making a decision to proceed with breast surgery.

Men of any age who are healthy and emotionally stable are considered good candidates for male breast reduction surgery. The best candidates are those who have firm, elastic skin that will reshape to the body's new contours.

Indications for surgery

1. Failed non-surgical treatments
2. Cosmetic or psychological reasons – some men are self-conscious of their enlarged breasts.
3. Breast discomfort – tenderness and soreness
4. Suspected malignancy – in rare cases.

Male breast reduction surgery is an elective procedure, which means that it is a personal choice and not necessary for maintenance of good health. It is important to understand that neither Dr Pham nor any other surgeon can predict the exact outcome of the breast size and shape, nor can they guarantee to satisfy all of your expectations. There will be always some minor asymmetry between the two breasts after the procedure.

A good rapport between you and Dr Pham and realistic expectations are prerequisites for successful outcome. You are most likely to be pleased with the results if you have a realistic idea of what surgery can and cannot do.

You can expect a thorough explanation from Dr Pham regarding the procedure's risks and benefits. Dr Pham will inform you of the best methods of anaesthesia, the surgical facility where your procedure will take place and the cost of surgery. Following a joint decision by you and Dr Pham to proceed with surgery, photographs of you will be taken and Dr Pham will further discuss the options available. You are encouraged to seek the opinion of other surgeons if you are uncertain.

The goal is for a natural, aesthetically pleasing and balanced look.

Private Health Insurance Rebate- Male breast reduction for medical or functional reasons is usually partially covered by Medicare and Health Insurance Funds. There will be an out of pocket or gap fee. You will be given a quote from Dr Pham (surgeon's fee only) and you should contact your health insurance fund to find out the amount you can expect to be rebated.

Understanding the Procedure

Surgery for gynaecomastia is performed under general anaesthetic or under sedation with local anaesthetic. Modern anaesthesia is safe but does have side effects and you should discuss these with your anaesthetist.

Specific techniques selected for your male breast reduction will depend on your individual factors and Dr Pham's preferences. In all cases there will be scars, which become less noticeable with time.

Techniques and Incisions

Enlarged male breasts can be reduced by:

1. Liposuction / liposculpture – to remove fatty tissue. One or two small incisions are made and a cannula is used to remove fat under suction.
2. Excision – to remove excess glandular tissue. A semi circle incision is made at the lower edge of the nipple areola. A small drain is sometimes used and removed the next day. The scars generally heal very well.
3. Combination of liposculpture and excision.
4. Additional procedure – may be required in certain cases. If the skin, fat and breast tissues are excessive then the skin may be removed to restore the appearance of a flat chest wall. Fat flap sculpture is sometimes used to prevent a large crater forming.

How long is the procedure? The procedure takes an average of 1 to 1 ½ hours, usually as a day case at our **Churchill Day Surgery**.

Results of surgery

Results are permanent, although subsequent obesity can create a gynaecomastia-like effect. Some of the benefits of surgery include a firmer, flatter, more contoured chest which may give the male patient a boost in self-confidence. There is little downtime, and you may return to work within one week unless you are involved in strenuous activities.

Initial Consultation

The majority of Dr Pham's patients are from referrals by General Practitioners or other Specialists. However, many patients are now seeing Dr Pham because of *word of mouth* referrals from previous patients. These referrals are often the best referrals. Friends, relatives or coworkers who have had facial and cosmetic plastic

surgery are often willing to share their experiences. It is often helpful to talk to these people before contemplating surgery.

Facial and cosmetic surgical procedures can help increase self-confidence because, generally when people look better, they feel better. However certain aspects of facial plastic and cosmetic surgery, which cannot be ignored, are the patient's mental and emotional attitudes. An initial consultation gives you and Dr Pham the opportunity to discuss your intended procedure/s in full.

Some of the questions you may wish to ask are:

- Am I a good candidate for this procedure?
- What is a realistic outcome for me after surgery?
- How long will the operation take?
- What is the recovery time?
- What are the risks involved?
- Is post-operative medication necessary?
- What is the charge for the procedure?

It is a good idea to write down the answers Dr Pham provides so that you can review these carefully later. The consultation also provides you with an opportunity to meet Dr Pham to determine whether your personality and his are compatible and that you feel comfortable with him as your surgeon.

Medical History

It is important that you are candid with Dr Pham and his staff regarding your medical history so that he can plan the best possible treatment. This information is strictly confidential. Please inform him of any:

- Previous facial and/or cosmetic surgery (nose, eyelids, breasts etc.)
- Past and current medical conditions such as heart, lung and kidney disease, prolonged bleeding or excessive bruising, blood clots in the legs or lungs, or gastric reflux.
- Current medications especially Aspirin, Anti-inflammatories, Warfarin, blood thinners, Insulin, and oral contraceptive pills. Over the counter products such as vitamins and herbal medications may also be important.
- Allergies or adverse reactions to antibiotics, anaesthetic drugs or other medications.
- Psychological and psychiatric illnesses
- Past keloid scarring or poor healing
- Connective tissue disorders such rheumatoid arthritis, lupus erythematosus, scleroderma or similar
- Previous radiotherapy to the head, neck or breast areas.

PREOPERATIVE (Before surgery) INSTRUCTIONS

- Please cease Aspirin, Aspirin-containing products, Plavix and non-steroidal anti-inflammatories (such as Ibuprofen) for 10 days prior to and two weeks following your surgery. If you are on any medications that affect bleeding (such as Warfarin) please notify Dr Pham.
- Smoking tobacco and alcohol increase anaesthetic and surgical risks. Please cease them for one to two weeks prior to and three weeks following surgery. They cause delayed wound healing, skin redness and other complications.
- Please notify us of all your routine medications and significant health history. You can remain on your daily medications, except for blood thinners unless instructed otherwise.
- Arnica, a natural herb that significantly decreases bruising, can be taken before and after surgery along with Vitamin C (ascorbic acid), which helps promote healing.
- If you are having a morning procedure you must not eat or drink after midnight the evening before. If you are having an afternoon procedure you must not eat or drink after 6.00am on the morning of surgery. You may, however, take your normal medications and brush your teeth.
- Please shower and remove any make-up and nail polish before arriving for your procedure.
- Unless you are remaining in hospital someone will need to drive you home after surgery and stay with you that evening.
- If you have any concerns please call the office. Remember, we are all here to give you the best possible care.

POSTOPERATIVE (After Surgery) INSTRUCTIONS

During surgery, dressing and bandages will be placed on the wounds and breasts. Immediately after surgery, you will be transferred to the recovery room for monitoring. Once awake and when it is safe to do so, you will be transferred to your room. Patients usually go home the same day if staying with a responsible adult but may stay overnight occasionally. You should not drive for 24 hours.

Breast swelling, bruising, tightness and pain are to be expected, especially in the first few days. You can use ice packs for 30 minutes every few hours. If there are drains they will be removed after 1 to 2 days. Keep dressing tapes dry and intact until they are removed in the next few days. Most sutures are dissolvable and any remaining ones will be removed during the first postoperative review 1 week after surgery. An elastic pressure garment is recommended to be worn continuously for 2 weeks then nightly for 4-6 weeks.

Some patients may have mood swings, feel depressed, anxious or elated after the procedure. These feelings usually resolve but if they persist then please inform Dr Pham.

Medications- Dr Pham will prescribe pain relief to be used as directed. Usually Paracetamol +/- Codeine, Tramadol or Oxycodone is sufficient. Most patients complain of discomfort rather than pain. Do not take additional pain relievers other than what Dr Pham suggests or prescribes and start any antibiotics when you get home.

Diet- You should take plenty of fluids and eat nourishing food as tolerated. You may feel nauseous for the first 24 hours especially after general anaesthetic.

Activity- You should rest for the entire day after surgery. Sleep on your back with the head of your bed elevated or use two to three pillows for one week after surgery. You can resume most light daily activities after a few days. You should avoid heavy lifting, exercise and activities such as running for 3 to 4 weeks after surgery. You can shower the next days. Sexual intercourse can usually resume after 1 to 2 weeks. You can drive after 1-2 days or sometime longer depending on the extent of surgery.

Most people can resume work after 1- 2 days, but occasionally longer if patients prefer more privacy or depending on your type of work. Most of the swelling and bruising will subside after 4 - 6 weeks.

Contact sport should be avoided for 6 weeks. Always protect your chest from sun exposure as this may affect skin pigmentation and colour.

Scars management Scars usually remain red and raised for 6 - 12 weeks. They will gradually fade and flatten. You can massage the scars with two fingers and should use moisturiser and sunscreen. Avoid direct sunlight for at least 6 months.

Final results following breast reduction are not apparent for up to 3 - 6 months following surgery. We request that you please follow-up with us for at least one year for assessment and postoperative photographs.

Please Inform Dr Pham's office or the hospital where the procedure was performed if you have the following:

- High fever, chills or a temperature of more than 38 degrees
- Heavy bleeding from the wound
- Severe pain or tenderness
- Significant redness, or discharge around the incision
- Significant swelling of one or both breasts

If you have any concerns you can contact Dr Pham's office. Remember, we are all here to give you the best possible care.

Risks of Surgery

Modern surgery is safe but does have risks. Complications can occur despite the highest standards and world's best practice principles used by Dr Pham.

It is not possible to list all the risks but you should be informed of the common side effects and benefits so that you can make an informed consent. Dr Pham will discuss these in greater detail at consultation. You should write down any particular questions or specific concerns.

The potential risks are

General risk of surgery

- Wound infection or breakdown – may require antibiotics
- Bruising and swelling
- Bleeding, blood clots or seroma
- Chest infection
- Sore throat from the breathing tube
- Heart problems, blood clots (lower legs or lungs) or breathing difficulties due to anaesthesia and surgery in some patients
- Scars that become raised (hypertrophic or keloid)

Specific Risks

- Swelling and numbness or tingling and needle like sensations around the nipples and side walls of the chest for up to twelve months.
- Fluid accumulation.
- Asymmetry of the breasts or nipples.
- Flattening of the breasts.
- Excess skin remains after the large amount of breast tissue is removed. It may require further skin excision.
- Loss of nipples and areolas – partial or complete in rare cases especially in smokers.
- Recurrence of breast growth in some cases when surgery is performed before the breasts have fully grown.
- Lumps or cysts.
- Painful or unattractive scarring.
- Subjective dissatisfaction with the final outcome.
- Permanent pigment changes in the breast area.
- Allergic reaction to sutures, tape adhesives and others.

FEES

The cost of is:

Surgeon fee	4000-5000
Anaesthetist fee	1200-1500
Hospital	3000-3500 (Covered by private insurance)
Churchill Day Surgery (uninsured patient)	2000-2500

There may be additional cost for complex or combined case with other procedures.

If you have private insurance – you may be qualify for Medicare and Private Insurance rebate.

Please [contact us](#) for your consultation on

You can view our website www.perthcosmeticsurgery.com.au

- Information on a range **[cosmetic surgery and non surgical cosmetic procedures](#)** available
- **[Gallery / Before & After Photos](#)**
- Find answers to your most **[Frequently Asked Questions](#)** (FAQs).
- Fees and Private Health Insurance rebate

If you wish to learn more about cosmetic surgery and facial plastic surgery please [contact us](#) to schedule a [consultation](#) with our Facial Plastic and Cosmetic Plastic Surgeon, **[Dr Tuan Pham](#)** or Nurse Coordinator.