

# VCH Breast Reconstruction Program

## Complications of Breast Reconstruction

**Note:** This is intended for education of homecare nurses and medical personnel to help them recognize the rare but significant complications associated with various methods of breast reconstruction. **If you feel that you may be distressed by the contents of these pages, please do not scroll down.**

### Before and After Photos of Possible Complications of TRAM Flap Procedure

This patient has undergone a delayed right breast reconstruction with a TRAM flap and went to develop inadequate blood supply to the lower portion of the TRAM flap consistent with partial flap necrosis.

Partial TRAM flap necrosis



The partial flap necrosis after it has healed



## Delayed Breast Reconstruction with TRAM flap

This patient had undergone a delayed left breast reconstruction with a TRAM flap and went onto develop inadequate blood supply of the lower outer portion of her TRAM flap consistent with partial flap necrosis. This is uncommon in our experience but when it occurs may require prolonged conservative treatment or further surgery to debride the area. Occasionally due to the loss of volume of the reconstructed breast mound further reduction of the opposite breast may be necessary to optimize symmetry.



## Delayed Breast Reconstruction with TRAM flap

This patient who was centrally obese preoperatively underwent bilateral delayed TRAM flap reconstruction. She developed a bulge on her right lower abdomen four months post-operatively consistent with a hernia at the closure of the muscle donor site. This was treated with repair and surgical mesh reconstruction. The risk of this complication is higher in patients with central obesity and who have undergone bilateral reconstruction. If the tension at the time of surgical closure of the abdomen is great or the quality of the fascia is poor, surgical mesh applied over the primary repair may be placed during the original surgery. Our experience is that very few one-sided procedures require mesh but approximately 40% of bilateral procedures require meshing.



## Breast Reconstruction with TRAM flap

This patient exhibits a full thickness burn above the donor site incision in the abdomen. The surgery decreases sensation in the abdomen and mastectomy site for many months. Therefore it is recommended that no heating pads, packs or hot water bottles be used for symptomatic relief in the post-operative period. Similarly, sun exposure can lead to severe sunburns and sun bathing in a one-piece dark bathing suit can lead to heat conduction injury both in the abdomen or breast reconstruction site. It is therefore recommended for the year following TRAM flap surgery SPF 30 sunscreen is used and that wearing light coloured bathing suits are encouraged.

