INVERTED NIPPLE CORRECTION

Background

Inverted nipples are a relatively common problem and can cause a significant amount of anxiety and distress. Correction may be achieved using both non-surgical and surgical means. Most ladies would have tried proprietary methods available to improve inverted nipples but if these are unsuccessful then consultation with a plastic surgeon may be indicated.

The treatment

A variety of surgical techniques may be employed most of which involve cutting the milk ducts. Usually two incisions are made at the base of the nipple, the ducts cut and then the nipple everted and suspended into position. Sometimes a nipple piercing can be used to keep the nipple in place. The whole procedure is performed under a local anaesthetic and Mr Banwell prefers to use anaesthetic cream prior the procedure too – expect to come along 30 minutes early.

The benefits

The inverted nipple(s) can be corrected which can have a significant effect on well-being. Unfortunately recurrence can occur though.

Duration of Surgery

Surgery takes about an hour.

Complications of Surgery

Unfortunately complications can occur following any surgery and patients need to be fully aware of this. Mr Banwell does his utmost to minimise the complication rate and likes to practise in a safe manner. The commonest complications are scarring, hypertrophic scars, bleeding, infection, nipple necrosis, inability to breast feed, asymmetry in the healing and the final result, alteration in nipple sensation and recurrence necessitating further procedures.

After Surgery

Following surgery, a protective sponge dressing remains in place for 1 week. The stitches around the nipple are removed at 2 weeks.

Recovery

It is important to take things easy for a week or so and it is recommended that you refrain from exercise until the sutures are removed. Otherwise recovery is rapid and patients usually experience few problems

Success and satisfaction

This is an operation with a high satisfaction rate and can have a major effect on patient well-being.

Important Notice

Mr Banwell strongly advises you stop smoking prior to surgery as this can affect the outcome of surgery and increase complication rates. Nutritional supplements, anticoagulant medication and blood thinners (eg. aspirin and brufen) all increase the risk of bleeding and should be stopped prior to surgery unless otherwise instructed.



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NOTES & QUESTIONS



SURGERY TIME 60 minutes

HOSPITAL STAY Outpatients

ANAESTHETIC ASSESSMENT No

PRE ADMISSION TESTS

SLEEPING POSITION Sleeping on back recommended for 4 weeks.

REASONABLY MOBILE Immediately

WASHING Shower after 1 day. Bath after 2 weeks.

DRIVING 1 week

EXERCISE INCLUDING GYM 8 weeks

SEXUAL ACTIVITY Restricted activity after 4 weeks

FULL RECOVERY 2 weeks

TIME OFF WORK None

BRAS & GARMENTS Sports bra worn for 8 weeks. Wired bra after 2 months



