

Breast Reconstruction Exercises After

- **PEDICLE or FREE TRAM**
- **DIEP Flap**
- **SGAP**
- **TUG Flap**
- **SIEA**
- **Tissue Expander/Implant**

Name: _____ Date: _____

Physical Therapist: _____

You may have stiffness of the back; shoulder and arm(s) after breast reconstruction surgery. To regain full movement and avoid complications it is very important to follow the exercises in this pamphlet to regain shoulder range of movement, relieve stiffness and decrease swelling.

The physical therapist (PT) will help you with the exercises shown in this pamphlet.

Exercises are started in the hospital and continued at home until you are using your arm(s) normally in household everyday activities. If you are unable to use your arm(s) as you did before the surgery, you may need to see an outpatient physiotherapist.

Activity Guideline

1. The first day after surgery you should use both arms as normally as possible within the limits of pain. You may use your arms for washing your face and eating meals.
Until breast drains are removed:
 - **Avoid** excessive arm movements past shoulder level.
 - **Avoid** pushing or pulling activities using your arm on the operated side.
 - **Avoid** lifting weight more than 4 kg or 10 lbs
2. The first day after surgery, you may be helped to sit on the side of the bed before getting up (TRAM and DIEP surgery). To do this, log roll onto your non-operated side, then use the arm under you to gently push your body up as you swing your legs over the edge of the bed. This will help prevent a sudden stretch to your stomach wound.
3. After **TRAM/DIEP/SIEA** surgery you will need to walk stooped slightly forward to avoid stretching the abdominal area. By the time you leave the hospital, you should feel more comfortable standing straight and swinging your arms gently at your sides when you walk
4. Walking daily is an ideal way to exercise and to avoid developing blood clots. You can gradually increase the distant and speed you walk every day when you feel you are able.

Exercises

- Each exercise is to be done 3-5 times daily.
- Repeat each exercise 10 times, unless instructed to do otherwise.
- Do your exercises in front of a mirror, if possible and check for equal arm movements.
- Avoid forcing any movements.
- Exercise gently the first week of surgery and progress to more active stretching by the second week.
- Abdominal exercises will be started when your plastic surgeon feels you are ready (approximately two months after surgery).

Day of surgery:

Deep Breathing

Keep shoulders relaxed. Breathe in deeply through nose filling out lower rib cage. Hold for 3 seconds. Breathe out slowly through mouth. **Start as soon as you wake up from surgery and do every hour you are awake for the first few days.**



Start the first day after surgery:

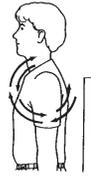
Shoulder Shrugs

Shrug shoulders up to your ears. Relax them down. Breathe in when you lift and breathe out when you lower.



Shoulder Circles

Roll shoulders backwards.
Repeat, rolling shoulders forward.



Start the second day after surgery:

Neck Stretch

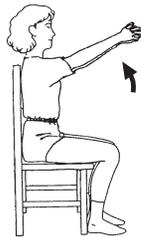
Tilt head to one shoulder to stretch opposite side of neck and hold for 5–10 seconds. Repeat to opposite side.



Start after the drain(s) is removed:

Arm Lifts

Clasp hands and raise arms overhead, keeping elbows straight. Lower slowly.



Elbow Circles

With fingers on your shoulders, draw large circles backwards with your elbows. You should feel a stretch in the front of your shoulders and chest.

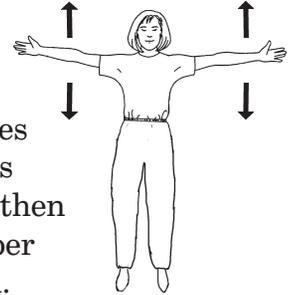


The following exercises are started 5 Days after the breast drain is removed.

- Each exercise should be done 3-5 times a day until the movement can be done easily and comfortably.
- Repeat each exercise 10 times.

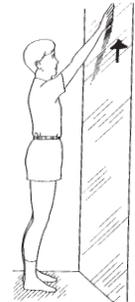
Wall Slides

Stand with your back against a wall with your feet 4-6 inches away and shoulder width apart. Keep your knees relaxed. With the backs of your hands against the wall, slide your arms up, then down the wall, making sure your upper back doesn't arch away from the wall.



Wall Walking

- a) Facing a wall, "walk" fingers up the wall as far as you can. "Walk" back down. (*Both arms together*)
- b) Stand sideways to a wall, and "walk" fingers up as far as you. "Walk" back down. (*Affected arm*)



What are the potential complications and how do you avoid them

What is Lymphedema?

Lymph nodes (glands) in the armpit are sometimes removed during breast cancer surgery (axillary node dissection). These nodes can give important information about how far the cancer has spread and can guide treatment.

Some swelling in the breast and arm area is normal during the first few weeks after axillary node dissection.

If you have ongoing tightness, aching/pain, heaviness, swelling, redness, less movement/flexibility of your arm, hand or wrist you may be developing a condition called lymphedema and you should report these symptoms to your doctor.

For further information about lymphedema call the Cancer Society information line at 1-888-939-3333.

The Following Recommendations May Help to Reduce Your Chances of Getting Lymphedema:

- After surgery, position your arm on a pillow. Keep the arm raised above the level of the heart for 45 minutes two to three times a day while lying down.
- It is important to prevent infection as this could lead to lymphedema. Wash cuts, scratches or burns promptly, treat them with antibacterial medication and cover them with a bandaid.
- Use insect repellent or wear long sleeves when possible to avoid insect bites.
- If signs of infection occur after injury or insect bite (redness, pain or swelling) see your doctor for treatment as soon as possible.

- Avoid getting a sunburn on the arm. Use sunscreen or protective clothing.
- Wear gloves when gardening or oven mitts when reaching into the oven or barbecuing.
- Have blood drawn, intravenous lines, injections or blood pressure measurement on the opposite arm if possible.
- Use an electric razor with a narrow head for underarm shaving.
- Eat balanced meals and try to maintain an ideal weight.
- It is important to use your arm in everyday activities.
- When your plastic surgeon says you are ready you can include swimming and other activities to stimulate lymph drainage.

What Is Axillary Web Syndrome (Lymphatic Vessel Cording)?

“Axillary web syndrome” is a hardening of the lymphatic vessels. It may occur after axillary node dissection and/or radiation treatment to the arm pit.

This condition is described as a stiffness or tightness in the underarm, forearm and wrist and may limit your range of motion at these joints. Fine cords (like violin strings) running down the inside of the arm and sometimes into the forearm may be noticed. Previously gained range of motion may be lost.

Axillary web syndrome usually resolves within weeks or months without treatment.

To limit your loss of function and range of motion do slow prolonged stretching (to maintain shoulder and elbow range). It is not recommended that the cords be snapped.

Physiotherapists who provide breast cancer rehabilitation may be consulted. Search <https://bcphysio.org/find-a-physio> and filter your search for physiotherapists who’s area of practice is breast health.



Making better
decisions together
with patients
and families

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