

Physio Exercise and Advice after Breast Reconstruction Surgery

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Patient Information

Physiotherapy Department

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Aim of leaflet

The aim of this booklet is to give you some general advice following your breast reconstruction surgery. It will also explain appropriate physiotherapy exercises to do to help you recover after your surgery.

Early recovery advice

- Do not lift your operated arm(s) above shoulder height, in order to protect the new blood supply to your breast(s)
- Do not push or pull excessively with the operated arm(s)
- If you've had an abdominal scar, support the scar as needed when coughing, sneezing or taking deep breaths.
- Walk around as much as you are able to. Ask for assistance if required.

Reasons to exercise after breast reconstruction





- To prevent shoulder stiffness and help to regain and maintain your normal movement in your shoulder
- Encourage circulation and healing of your scar tissue
- Help to reduce the risk of lymphoedema





What exercises should I be doing?

Following your operation, you may begin gentle exercises after 24 hours and increase them each day. You should continue with these exercises as you have been advised in the

hospital. Whilst your lymph drains are in, it is important to only exercise in a pain free range.

It is advisable to do no more than 5 repetitions of each exercise, 4 times a day.

<p>1.</p> 	<ul style="list-style-type: none">• Sitting or standing• Turn your head to the side until you feel a stretch, hold position for approximately 5 seconds.• Then return to your starting position• Repeat to the other side
<p>2.</p> 	<ul style="list-style-type: none">• Sitting or standing• Raise your shoulders, hold position for approximately 5 seconds• Then relax and return to your starting position
<p>3.</p> 	<ul style="list-style-type: none">• Sitting or standing• Roll your shoulders forward then roll your shoulders backwards
<p>4.</p> 	<ul style="list-style-type: none">• Sitting or standing• Pull your shoulders back and down as if you're holding something between the bottom tips of your shoulder blades, hold position for approximately 5 seconds• Then return to your starting position

<p>5.</p> 	<ul style="list-style-type: none">• Lying on your back• Using your unaffected arm to support your affected operated arm• Keeping both your elbows straight, raise your arms up as far as you can over your head• Slowly return to your starting position
<p>6.</p> 	<ul style="list-style-type: none">• Sitting or standing• Raise your arm forwards with a bent elbow, do not exceed 90 degrees• Slowly return to your starting position
<p>7.</p> 	<ul style="list-style-type: none">• Sitting or standing• Raise your arm to the side with a bent elbow, do not exceed more than 90 degrees• Slowly return to your starting position
<p>8.</p> 	<ul style="list-style-type: none">• Sitting or standing• Reach both your hands to the back of your neck• Slowly return to your starting position

9.



- Sitting or standing
- Reach your hands behind your back, you can use your good arm to assist your other arm, hold position for approximately 5 seconds

If you have problems with delayed wound healing, infection or worsening pain, please ask for advice from your doctor or out-patient physiotherapist about whether to continue your exercises and when you can restart them.

Once your drains have been removed, it is essential to progress your exercises to regain full range of movement under the guidance of your Out-patient Physiotherapist.

After a couple of months, if you have recovered your normal movement, you do not need to continue with these exercises. Please get in touch with your out-patient physiotherapist if you think your movement is not improving and your physiotherapist will review you to arrange further therapy if necessary. You can self-refer to outpatient physiotherapy by phoning 01942 482260.

Reasons to stop exercising

Stop exercising and speak to your doctor or breast care nurse if you have:

- Seroma (a collection of fluid under the arm, in the breast, or chest wall)

- A wound infection or healing issues
- Worsening pain

When can I get back to my usual exercise regime?

A gradual return to activity is recommended. You will have to wait at least six to eight weeks before returning to most high impact/strenuous exercise and at least 12 weeks for competitive, racket or contact sports.

How much should I be using my arm?

By two weeks after your surgery we encourage normal light use of your arm. It is important to build up your activity levels gradually at your own pace. Everyone will be different.

For at least six to eight weeks you should avoid strenuous lifting, repetitive movements and putting full weight through your arm. Examples would be lifting more than 3 to 4kgs in weight (including lifting a baby or child), moving furniture, pushing up from a low chair, opening heavy swing doors, hoovering and window cleaning or digging in the garden.

When you do lift do it correctly. Place your feet apart, bend your knees, keep your back straight and tighten your tummy muscles. Hold the object close to your body and lift straightening your knees.

Posture

After surgery people often acquire a slumped posture. This may be due to discomfort or a

desire to protect the surgery. It is important that you try to avoid this.

Your first few days at home

For the first couple of days at home you should take things easy and follow similar routine to the hospital. You may walk around the house or go up and downstairs as necessary. You may find that you tire easily but do not worry about this. The return to your usual activities takes time and is a gradual process. It is important that you pace yourself.

Driving

Before returning to driving you should make sure that:

- You are comfortable wearing a seat belt
- You can manage all manoeuvres including the gear and handbrake
- You could perform an emergency stop if required
- You have checked that your insurance policy does not have an exclusion clause following major surgery. For further information contact your insurance company or the DVLA

General advice for home

1. It is quite normal for the arm, breast or chest wall to tingle, feel tight and for the breastbone and ribs to feel tender. This is sometimes more apparent two to three weeks after the operation. You may take ordinary “over the counter” pain

killers. If you have severe pain, please contact your breast care nurse.

2. Use the arm as normally as possible and continue the arm exercises twice a day for six weeks after the operation and for six weeks after radiotherapy if you have it.
3. If your arm aches or swells a little, lie down with your arm supported on pillows and your head slightly higher than your shoulder. If pain or swelling is severe, please contact your breast care nurse.
4. Wear normal clothing and a good supportive bra as soon as you can. If your breast or chest wall is tender and sensitive, a maternity bra, vest or camisole may provide a little support until you are able to manage a good supported bra again.
5. Avoid lifting anything heavier than a kettle of water for the first few weeks, e.g. carrying the vacuum cleaner, heavy shopping bags, walking large or unpredictable dogs on a lead. Light household tasks may be done in moderation. Start gently.
6. Try to go out every day, even if you only go to the garden gate. Light gardening tasks may be carried out but avoid heavier work until you feel able. Always wear gloves.
7. Drive only after complete healing of the wound (at six weeks post-surgery) or when your consultant has agreed to you returning to driving, in line with your insurance company policy. You also need to be able to tolerate the seat belt against your chest. Remember, in the event of an accident you should be able to cope with an emergency stop. Start with short distances, preferably with a companion until you feel confident with the gears and handbrake.

8. Nivea ®, E45 cream or aqueous cream may be gently massaged in to the scar and surrounding area when the wound has healed. **Do not use this during or for three weeks after radiotherapy.**
9. If you feel tired then rest. Listen to your body; you are probably fit enough to do most things that you want to do. **But, if you do not feel like doing it, then don't.**

Lymphoedema

A small number of women who have breast surgery may experience swelling of the arm. This condition is called lymphoedema. It is more likely to occur in women who have had lymph glands removed from under their arm or a course of radiotherapy after surgery.

Taking sensible care of your hand and arm on the side where you have had your surgery may help to reduce the risk of lymphoedema.

1. Use your other arm to carry heavy cases or shopping bags.
2. Raise your arm on pillows wherever possible, perhaps when relaxing or at night in bed, but ensure that this is carried out for a minimum of half an hour per day.
3. Offer your other arm for all injections, taking blood pressure or any blood transfusions.
4. Wear gloves if you are a gardener to protect your hands.
5. Rubber gloves should be worn when using harsh detergents or steel wool.

6. Thimbles should be worn when sewing.
7. Hair removal cream such as Veet® or electric razors should be used for shaving.
8. Cuts and scrapes should be well cleansed, an antiseptic applied and the area observed for inflammation, swelling and warmth. Please notify your doctor if this occurs.
9. Avoid getting sunburned.

Contact Details

If you are worried, please talk to someone about it:

Family or friends, GP, minister, district nurse or health visitor. The staff on the ward where you had your operation telephone 01942 822934 (**SAU**) or 01942 822016 (**Swinley Ward**)

Breast care nurses, telephone 01942 774720

Breast Care physiotherapist, telephone 01942 482260



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