

Managing your wounds after surgery

When you wake up after your operation you will find bandages and dressings over the wound site. This will usually be a clear plastic dressing on the top, or a layer of soft foam strapping. Beneath this there will be some brown Micropore tape on the wound, and underneath this there will be either removable or dissolving stitches. If surgical drains have been required there will also be a small stitch holding them in place and a dressing over the top. The drains will be removed before you go home. The remaining dressings will stay in place until the first dressing change at 1 week.

It is usual to keep the dressings dry for the first week and not to wet the surgical area in a shower or bath. In certain circumstances a shower may be possible, you will be told this after your surgery by Mr Floyd, or his specialist nurse.

When you are discharged from hospital, if required you will be given pain-killers to take home and an appointment will be arranged for your first dressing change, which is usually 7-10 days following surgery. At this appointment you will meet the Plastic Surgery Specialist Nurse, who will remove your dressings, check the wounds and trim or remove any sutures.

At this first dressing check you will be given a roll of brown Micropore tape and advised to keep a strip of it on the wound 24 hours a day for a full month. This is designed to minimise stretching and movement at the incision and reduces the stimulation to generate more scar tissue. You can shower or bath with the Micropore tape on and it dries off fairly quickly afterwards. As it starts to peel off you can remove it and replace it with a fresh strip.

After one month the Micropore tape has done its job and it is time to start scar massage. This is done by moving the fingertip with firm pressure over the scar in a circular motion, using moisturising cream or Bio-oil. Lasting 5 minutes and repeated 2-3 times a day it will help to remodel and soften the underlying scar tissue. This should be continued while the scar is thickened and firm to the touch and can be stopped when scar has faded and softened.

Throughout this period you will be seeing Mr Floyd for follow up in the outpatient clinic, and he will be able to give you further guidance on managing your scars to get the best final outcome.

Scarring

It is normal for surgical scars to look like a fine thin line for the first month, but by the one month time point the body is starting to make more scar tissue and it becomes a little thickened, and you can feel a ridge under the finger as you massage it. This is entirely normal. The thickening in the scar usually persists for about 3 months. From 3 months onwards the scar will start to soften and fade and can take up to 2 years to reach full maturation. This whole process is helped by regular massage and the use of silicone.

Silicone treatment

When scars become raised and thickened, silicone appears to help them flatten and soften. It can be used as a cream that is applied to the scar twice a day (Dermatix or Kelo-cote) or as a sheet of silicone gel that is applied (Cica-care or Mepiform). It needs to be used all the time and takes a few months to have an effect. We can supply these for you if you wish or you can obtain them from your local chemist.

Keloid scarring

Some people have a genetic tendency to make thick, lumpy scars called keloid scars. This is particularly common in Celtic, African, Afro-Caribbean, Greek Cypriot and Arabic races. Mr Floyd will take this into account when planning your surgery and will guide you through the recovery period.