Surgery for primary breast cancer
This booklet is about surgery for primary breast cancer.

**Surgery** is when a doctor removes or fixes something inside the body. This is also called an operation.

In this booklet we will talk about your treatment team.

This is because it is best to treat breast cancer with a team of doctors and health care professionals that have different skills and knowledge.
You can find more information on treatments and side effects in our other booklets.

These may not be in easy read, and you may need support to read them.

Or on our website breastcancernow.org

You can also call our helpline and speak to our breast care nurses on 0808 800 6000
Surgery is usually the first treatment for people with primary breast cancer.

It tries to remove the cancer and some of the healthy cells around it.

This is to make it less likely the cancer will come back or spread to other parts of your body.

Cells are what your body is made of.
Cancer is made of cells that have grown in the wrong way.

If surgery is your first treatment, you should have this within 31 days of you and your treatment team agreeing to it.

The surgeon will try to remove the cancer without changing how you look too much.

A surgeon is the type of doctor that does surgery.
Invasive breast cancer can spread to other parts of the body. Most breast cancers are invasive.

There are two main types of breast surgery:

- **Breast conserving surgery** removes the cancer and some of the healthy cells around it

- **Mastectomy** removes all the breast and nipple
The type of surgery you will be asked to have will be decided by:

- The type of breast cancer
- The size of the breast cancer
- Where the cancer is in the breast
- If there is cancer in more than one part of the breast
Your treatment team will explain why they think the surgery is best for you.

- The size of your breast
Breast conserving surgery is where the cancer is removed and some of the healthy cells around it.

This surgery tries to keep as much of your breast as possible while making sure the cancer has been completely removed.

Some people have breast cancer surgery and plastic surgery at the same time.

This means it is less likely you will see a dent or a big difference between your breasts.
It is important that the cancer is removed with some of the healthy cells around it to lower the chance of any cancer cells being left behind.

The cells will then be tested to check if there is any cancer in the healthy cells.

If there is cancer in the healthy cells, you may need more surgery.

Some people may need the whole breast removed to make sure all the cancer has been removed.
A mastectomy removes all of the breast and nipple.

You might have a mastectomy if:

- The cancer takes up a large part of the breast
- There is cancer in more than one part of the breast

Your surgeon should explain why they think you should get a mastectomy.
Breast reconstruction is a type of plastic surgery that makes a new breast or remakes the shape of your breast.

If you are going to have a mastectomy, you will normally be asked if you want breast reconstruction.

Breast reconstruction is a type of plastic surgery that makes a new breast or remakes the shape of your breast.

If you choose to have breast reconstruction, you may be able to have it at the same time as the mastectomy.
If you want breast reconstruction, you might have another type of mastectomy:

- **Skin sparing mastectomy**
  Surgery that removes the breast and nipple but leaves most of the skin of the breast

- **Nipple sparing mastectomy**
  Surgery that removes the breast but leaves most of the skin of the breast and the nipple
Some people will be given a choice between breast conserving surgery and a mastectomy.

The chances of you getting better and of the cancer not coming back are the same for breast conserving surgery with radiotherapy as for mastectomy.

Radiotherapy is a treatment that uses strong x-rays to kill the cancer.

You may find it helpful to talk through your choices with your breast care nurse.
Some people who are having a mastectomy think about if they should have the breast that does not have cancer removed as well.

Research shows this is not normally needed.

You might need to have both breasts removed if you have a higher chance of getting primary breast cancer in the other breast.

Many people worry about getting cancer in their other breast. It is important to talk about your cancer with your surgeon.
Breasts have a lot of thin tubes that are connected to the glands under the arm called lymph nodes.

**Glands** are the parts of your body that makes and sends out things like sweat, chemicals and hormones.

If you have invasive breast cancer, your treatment team will want to check if any of the lymph nodes under the arm have cancer cells.

This helps them decide if more treatment will help you.
An ultrasound scan uses sound waves to take pictures of the inside of the body.

They check under your arm for cancer with an ultrasound scan before surgery.

If your scan does not look normal, you will have some cells taken from under your arm to check for cancer.

If the doctor finds cancer cells in your lymph nodes, they will normally suggest removing your lymph nodes at the same time as your surgery.
Chemotherapy is a cancer treatment that uses special drugs to kill the cancer.

Your treatment team might want to do another test on a special lymph node to make sure there really is no cancer in your lymph nodes.

The special lymph node is normally taken at the same time as your cancer surgery but may be done before.

Or they may suggest you have chemotherapy before surgery.
Some people may feel sick or get a rash because of the dye but this is rare and can be easily treated.

If they find no cancer cells in the special lymph node, the other lymph nodes will be clear too, so no more will need to be removed.

If they do find cancer cells your treatment team might suggest:

- More surgery to remove some or all the lymph nodes
No more treatment to under the arm if you are having other treatment

If you are having chemotherapy before your surgery, your treatment team may want to test the special lymph node before starting chemotherapy.

This can help with planning any more treatment to under the arm after chemotherapy.
If they find cancer cells, the surgeon may then remove more lymph nodes, so you will not have to have a second surgery.

If you have lymph nodes removed there is a chance you could get swelling of the arm, hand, breast or chest.

You should talk to your treatment team about this, and we also have more information about this.
Breast reconstruction is a type of plastic surgery that makes a new breast or remakes the shape of your breast.

You can have this at the same time as breast cancer surgery or months or years later.

Breast reconstruction is sometimes done over more than one surgery to give you the best look possible.

Reconstructed breasts that do not have a nipple can have a new one made with surgery or tattooing. You can also get rubber stick on nipples.
There are normally different options for breast reconstruction. Your surgeon and breast care nurse will talk to you about which one is best for you.

You should take your time to think about your options before deciding.

You may need more than one talk with your treatment team before you feel sure of your decision.

Some people are advised not to have a breast reconstruction because they have medical conditions that can make it more likely that there will be problems after surgery.
If you need radiotherapy, it might change when and how you can have breast reconstruction surgery.

Not everyone who has had breast surgery wants breast reconstruction.

Any decision you make about having a reconstruction should be about if it is right for you.

Having a breast reconstruction will not make it more likely that the breast cancer will come back.
More support

Helpline

Worried about breast cancer, or have a question about breast health? Our team are ready to listen on our free helpline. Call 0808 800 6000

Monday to Friday 9am–4pm and Saturday 9am–1pm.

To use our text relay service, call 18001 0808 800 6000

You can also email nurse@breastcancernow.org

Forum

We have online forum where you can talk about your experience of breast cancer with us and with lots of other people with experience of breast cancer.

breastcancernow.org/forum
You never have to face breast cancer alone. Talk to somebody who understands what you’re going through with Someone Like Me.

Call our Someone Like Me service on 0114 263 6490

Find information you can trust to help to understand breast cancer and order booklets at breastcancernow.org/publications

Everyone affected by breast cancer can turn to us for support. Our free services are always here for you.

breastcancernow.org/oursupport
About this booklet

This easy read booklet was made by CHANGE. The original booklet is Treating primary breast cancer. This was written by Breast Cancer Now’s clinical specialists, and reviewed by healthcare professionals and people affected by breast conditions.

For a full list of the sources used to research it:
Email health-info@breastcancernow.org

You can order or download more copies from breastcancernow.org/publications

We welcome your feedback on this publication:
Email health-info@breastcancernow.org

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