

*The* ROYAL MARSDEN

NHS Foundation Trust

---

# Exercises and advice following your DIEP / TRAM operation

---

**Physiotherapy**

**Patient Information**



**NHS**



# Contents

Introduction	1
Set A exercises	2
Set B exercises	4
Set C exercises/stretchers	5
Abdominal exercises	6
Regaining and maintaining shoulder movement	8
Advice following your DIEP / TRAM operation	8
If you have had an immediate reconstruction	10
General physical activity	11
How much should I do?	12
Is it safe for me to exercise?	12
Setting achievable goals	13
Contact details	14



## Introduction

This booklet gives advice about arm and abdominal exercises to help you recover after your operation. This applies to both delayed and immediate reconstructions.

If you have had an immediate reconstruction, please see page 10 for additional information.

## Arm exercises

After you have had an operation on your breast and axilla (armpit), you may feel reluctant to move your arm. In order to regain full use of it as soon as possible, it is important to do the exercises in this booklet.

There are three sets of exercises:

**Set A** – start the first day after your operation

**Set B** – start one week following your operation

**Set C** – start 10–14 days after your operation

## Abdominal exercises

Surgery to your abdomen (stomach) may affect your general mobility for the first few weeks. The advice and exercises included here will help you to recover at a safe and steady rate.

The abdominal exercises should only be performed once your abdominal wound drains have been removed.

In addition to the exercises, this booklet also provides general advice about activity levels and what to expect in the weeks and months following your operation.

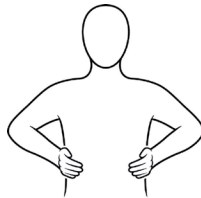
## Set A exercises

**Start these exercises from the first day after your operation.**

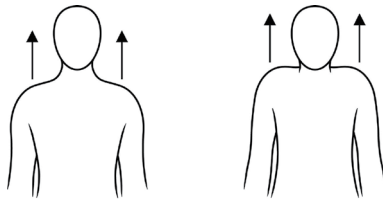
They should be performed three times a day, sitting on a chair.

**Repeat each exercise 5 times per session.**

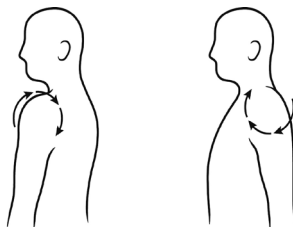
1. Sitting upright with your arms relaxed by your side, take a deep breath in using the lower part of your chest to feel your lower ribs and abdomen expand. Hold for count of 3 then gently let the breath out.



2. Sitting upright with your arms relaxed by your side, shrug your shoulders up towards your ears then slowly return to starting position.



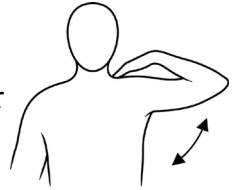
3. Sitting upright with your arms relaxed by your side, slowly rotate your shoulders up, back and down in a continuous motion.



4. Place your hand on your shoulder (same side).  
Raise your elbow forwards to shoulder height  
and then down.



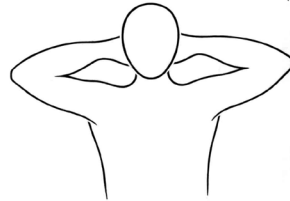
5. Place your hand on your shoulder (same side).  
Raise your elbow out to the side up to shoulder  
height and then down back to your side.



## Set B exercises

After one week, continue Set A and start the following Set B exercises. These should be performed three times a day, sitting or standing up. **Repeat each exercise 5 times per session.**

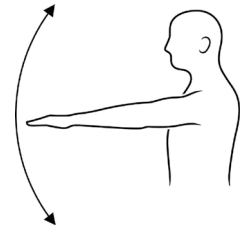
1. Clasp your hands behind your neck. Keeping your head up, push your elbows out to the side and then back to the middle.



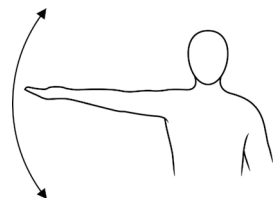
2. Place your hand behind your back, reaching up as far as possible between your shoulder blades.



3. Place your arm by your side with your elbow straight. Raise your arm forwards and up above your head. Then slowly bring it back down, keeping your elbow as straight as possible.



4. Place your arm by your side with your elbow straight. Raise your arm out to the side away from your body, turning the palm of your hand upwards, and continue up towards your head. Then slowly bring your arm back down again.

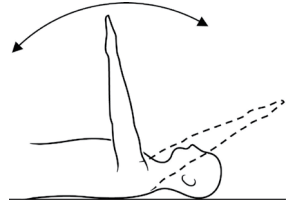




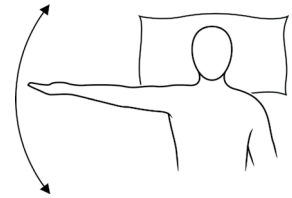
## Set C exercises/stretches

**10–14 days after your operation, start Set C stretches.** You may continue with Set B exercises as a warmup. Set C should be performed at least twice a day, lying flat on the bed or floor with a pillow under your knees. **Repeat each exercise 5 times per session.** You may experience some discomfort with your exercises but they should not be painful.

1. Starting with your arm by your side and your elbow straight, raise your arm forwards and up above your head. Hold it in this position for a count of 10 and then slowly bring your arm back down to your side.



2. Starting with your arm by your side and your elbow straight, raise your arm out to the side away from your body and continue up towards your head. (Do not allow your arm to creep forward). Keep your arm in this position for a count of 10 and then slowly bring it back down to your side.



3. Clasp your hands behind your neck, with your elbows pointing towards the ceiling (ensure your head remains on the pillow). Stretch your elbows out to the side, trying to touch the bed or floor with them. Keep them in this position for a count of 10 and then slowly bring them back in so that they are pointing at the ceiling again.



## Abdominal exercises

Try and do these exercises twice daily starting when your abdominal wound drain has been removed. If you do not have any drains, start these exercises three days after your operation.

### 1. Pelvic tilting

Lie on your back on the bed, knees bent and shoulder width apart

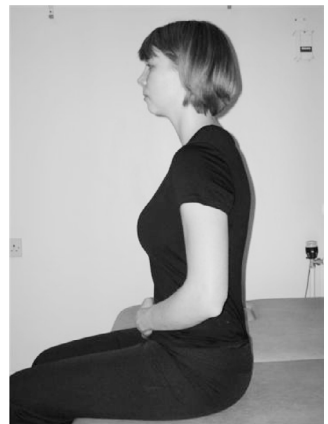
- gently tighten your abdominal muscles
- flatten your lower back into the bed
- hold for 1–2 seconds breathing normally, then release gently
- **repeat 10 times**



### 2. Abdominal bracing

Lie on your back or side or sit upright in a chair

- place one or both hands below the level of your navel (belly button)
- breathe in through your nose and as you breathe out, draw in your lower abdomen gently away from your hands towards your back
- relax
- **repeat 5 times**

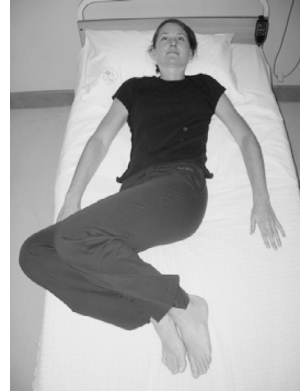


As this exercise becomes easier, keep your abdominal muscles drawn in for 3–4 seconds whilst you continue to breathe in and out normally. When you can do this exercise easily, try to do it when you are standing and moving around, in particular, before and during lifting or bending.

### 3. Knee rolling

Lie on your back on the bed with your knees bent and together, arms by your side and feet on the bed.

- draw in your lower abdominal muscles as described above
- slowly lower both knees to the right as far as is comfortable
- bring them back to the middle
- repeat on the left side
- **repeat 5 times to each side**



### To start after six weeks

#### Knee bends

Lie on your back on the bed, knees bent and shoulder width apart, arms relaxed by your sides.

- draw in your lower abdominal muscles as described above
- keeping the abdominal muscles drawn in and your hips level, lift one foot slowly off the bed
- **hold for 10 seconds**
- lower the leg so that the foot is back on the bed
- **repeat 5 times with each leg**



If you would like to review your abdominal exercises after six weeks, please contact the Physiotherapy Department (contact details on page 14).

## Regaining and maintaining shoulder movement

### Continuing exercises

If you go on to have radiotherapy to your breast and/or axilla, continue Set C exercises / stretches indefinitely following the end of your treatment. Radiotherapy can cause a subtle tightening across the chest wall which may result in shoulder pain and stiffness at a later date.

If you are not having radiotherapy, continue your exercises until you feel your arm is back to normal.

### Radiotherapy class

An information session for patients having radiotherapy to their breast is held every three to four weeks. This provides information on exercise, lymphoedema and skin care. Please ask the radiographers if this is appropriate for you.

## Advice following your DIEP / TRAM operation

This includes information and advice to help your recovery from your operation. Your rate of recovery will vary, according to your age, previous fitness and other treatments you are undergoing.

### Posture

For the first few days after your operation you will find it difficult to stand up straight due to the tightness of the wound and dressings. Most people are able to stand more upright after 7–10 days. It is easy to continue adopting a poor posture due to a combination of discomfort and apprehension when moving around. However, it is important to regain good posture to help prevent muscular pain and back problems. Avoid long periods of stooping or sitting slumped in a chair as this may cause back pain later on.

### Using your bowels / going to the toilet

When opening your bowels, it may be helpful to lean forward and to rest your feet on a small step or stool (4"– 6" high). Avoid straining, as this will put pressure on your wound. It may help to breathe out as you pass urine or open your bowels. Drink plenty of fluids. Walking may help to prevent constipation.

## **Daily activities and lifting**

Do not be surprised if you continue to feel tired when you go home – your body needs time to recover. Aim to gradually increase your activity. Continue to take your painkillers, as prescribed, so that you are able to move around more easily, breathe deeply or cough.

The general rule is to go gently for the first six weeks after your operation while your wound and muscles have time to heal. Do not lift anything heavy in this time. You can use your affected arm for light activities, as soon as you feel comfortable to do so. It is advisable to use your unaffected arm for heavier and more repetitive tasks for the first 4–6 weeks.

Try to avoid activities such as carrying heavy shopping, vacuuming and lifting children for the first six weeks. After this time, introduce these activities gradually and slowly build up the amount you do.

From six to 12 weeks you may gradually increase your activity until you are back to your normal level. Stop if you notice any pain.

You can discuss your individual needs and any concerns at your first outpatient appointment.

## **Driving**

It is advisable to wait six weeks before driving again following your operation. Check that your car insurance is valid after major surgery before starting to drive again.

## **Returning to work**

Allow at least six weeks before returning to work. You will need to consider your particular level of recovery, your occupation and the effects of other treatment. Discuss your own situation at your outpatient clinic appointment.

## **Wound massage**

After your wounds have fully healed, start gently massaging around the scars to help keep the area supple.

## **Sport and leisure**

You may be able to resume swimming six weeks after surgery if your scar has fully healed.

Competitive sport and high impact activities should be avoided for at least 12 weeks.

Discuss your individual needs at your outpatient clinic appointment. When you do resume, start slowly and build up exercise gradually. If you have difficulties, stop and seek advice.

If you need further advice about your particular sport or hobby please contact your physiotherapist (see contact details on page 14).

## **If you have had an immediate reconstruction**

The following advice is relevant to patients who have had immediate reconstruction and have had lymph nodes removed from under their arm.

1. Following breast surgery you may experience changes in sensation over your breast and inner arm, for example numbness, tingling, or extra-sensitivity to touch. These sensations are quite normal and often subside a few months after surgery. Sometimes gentle stroking or tapping of your inner arm may ease the discomfort. However, you may be left with some residual numbness.
2. You may notice some soft swelling in your armpit or around your wound (called a seroma) a few days after your discharge home or removal of your drains. This is caused by a collection of fluid. If this happens, reduce your exercises to Set A only, and contact your hospital doctor or GP for further advice. You may find that this takes several weeks to settle, so it is important to progress your exercises gradually, as you feel more comfortable.

3. After your operation, tight bands or cords may develop in your armpit, sometimes stretching down your arm. You may experience a sharp pulling sensation, or pain, when you try to stretch your arm or do your exercises. Whilst it may seem difficult, exercise will help to stretch and relieve these cords, allowing you to move your arm freely again. However, holding your arm in a static position for long periods may worsen the cording effects and discomfort. In most cases, cording will gradually improve but if you are experiencing severe pain and/or restriction of your movement, please contact your physiotherapist for advice or review.
4. It is important that you avoid any lifting that places a strain on your affected arm in the first six weeks. After this point you can gradually build up to your normal activity. Lifting too much in the early weeks may increase your risk of developing lymphoedema. This will be different for each individual, depending on previous lifestyle. If you would like support in building up your strength, please call the physiotherapy department (contact details on page 14).

## General physical activity

Studies have shown that physical activity tends to decrease significantly for many people after cancer diagnosis and treatment. This tends to lead to an increase in symptoms such as fatigue as your body loses fitness.

Overall, this can affect your quality of life by impacting on the things that you enjoy doing. Exercise and physical activity can be one way to help overcome this.

There is also evidence highlighting that regular physical activity may help you to lower the risk of recurrence of some forms of breast cancer.

Being physically active can help lift your mood, giving you a focus to help improve your confidence.

It can also help reduce the risk of other problems such as osteoporosis, heart disease, weight issues and joint problems which are known side effects of some of the cancer treatments themselves.

Regular exercise and physical activity can also help you to regain and maintain your strength and stamina after treatment.

## How much should I do?

Being physically active means moving your body and using energy at an intensity that makes you warm and slightly out of breath (such as brisk walking). **You should aim to take gentle walks after being discharged from hospital.** The current recommendation is that we should all do moderate exercise or activity five times a week for 30 minutes each time. During and immediately after your treatment you may feel this is too much for you. However, you can still benefit if you break the 30 minutes into three lots of ten minute sessions. You will have to wait a few weeks after surgery before starting more vigorous exercise, particularly if it involves your affected arm.

## Is it safe for me to exercise?

If you are at all unsure whether you should be exercising during any of your treatments, such as chemotherapy or radiotherapy, ask your doctor at the hospital. As a general rule, you should avoid more vigorous exercise for 24 hours following chemotherapy.

Do not exercise until you have seen a member of the medical team or if you have any of the following:

- Heart condition or an irregular pulse
- Chest pain
- Difficulty breathing
- Altered blood cell counts
- Dizziness or blurred vision
- Feeling sick
- Recent or 'new' pain.



Persistent pain must not be ignored; if there is injury, you must stop exercising and take medical advice.

It is important to remember to drink plenty of fluids before and after exercising. A healthy diet will help you gain the maximum benefit from exercise and is an important aspect of your recovery. If you are planning to increase your activity levels, you should also increase your energy and protein intake to maintain your weight.

If you have any concerns about your diet, extra information can be found in The Royal Marsden booklet *Diet and breast cancer*.

## Setting achievable goals

It is important to set a goal or target to motivate yourself to increase and maintain your physical activity. For instance, you could increase the time you walk by an extra five minutes, or getting off the bus a couple of stops earlier to walk back home.

Setting short, realistic goals will help you keep going. Think about what might help you keep active, for example, you may be more motivated if you arrange to walk with friends or family or play golf with a colleague. Using a step counter (pedometer) may help you check your progress when walking, or think about the distance you cover. Keeping a diary of your activity is a great way to challenge and reward yourself for your progress.

## Contact details

If you have any questions about the exercises, or if you have any problems with stiffness or pain in your shoulder or arm, please contact:

Breast care physiotherapist

**Chelsea**      020 7808 2821 (answer phone)

**Sutton**      020 8661 3098 (answer phone)

### **The Royal Marsden Macmillan Hotline: 020 8915 6899**

You can ring the hotline 24 hours a day, 7 days a week.

Call us straight away if you are feeling unwell or are worried about the side effects of cancer treatments.

This service provides specialist advice and support to all Royal Marsden patients, as well as to their carers, and both hospital and community-based doctors and nurses caring for Royal Marsden patients.

## References

This booklet is evidence based wherever the appropriate evidence is available, and represents an accumulation of expert opinion and professional interpretation.

Details of the references used in writing this booklet are available on request from:

The Royal Marsden Help Centre

Telephone: Chelsea 020 7811 8438 / 020 7808 2083

Sutton 020 8661 3759 / 3951

Email: [patientcentre@rmh.nhs.uk](mailto:patientcentre@rmh.nhs.uk)

No conflicts of interest were declared in the production of this booklet.

Should you require information in an alternative format, please contact The Royal Marsden Help Centre.

The patient information service is generously supported by The Royal Marsden Cancer Charity.

[royalmarsden.org](http://royalmarsden.org)

Registered Charity No.1095197



Revised December 2023. Planned review December 2026  
© The Royal Marsden NHS Foundation Trust RS-1042-07



Radiotherapy and  
Chemotherapy Services  
F538021 & F538022

