

# LET ME GET THIS OFF MY CHEST



AN ANXIOUS PERSON'S  
GUIDE TO  
BOOBOTOMY

by mandooks

# Hey!

I'm Zou

a 30-something non-binary  
person from Brussels

I recently underwent double  
incision mastectomy,  
aka **top surgery**

this is an account of my  
personal experience going  
through the whole process

I hope you'll find it helpful/  
thought-provoking/  
entertaining



## HOW I KNEW I WANTED TOP SURGERY

There's no perfect timeline, no "wanting it for long enough" before you go through it. And, crucially, you don't have to identify as "trans" or "trans enough" to pursue top surgery. You do you.

In my case, I knew I was trans for about 2-3 years before I knew I wanted top surgery. I have felt uncomfortable with my chest basically since it developed, but I didn't know I was allowed to feel this way for a very long time. Being socialized as a woman for most of my life, I got used to feeling like my body wasn't really mine. It's often hard for me to distinguish between that, gender dysphoria, and simply being a person in a slowly aging body.

Rather than trying to pinpoint dysphoria, I try to **aim for euphoria**, and understand what makes me feel euphoric. So far, not having boobs has been a bounty of gender euphoria.

I started watching youtube videos of nb and transmasc people who got top surgery and was very moved by their experience. Shortly after, I had multiple conversations with people I trusted about the possibility of me having top surgery. It took me a few months to realize that I was *allowed* to want it.

Before I made a final decision to start the process, I did a lot of research. I also took the space to grieve my chest. More accurately, to grieve the fact that I would never be ok with the chest I had, no matter how hard I tried.



**Try this if you want to be Extra Sure:** take a topless picture of yourself, then use an editing software like [photopea.com](http://photopea.com) to blur out your chest, and even (if you have the skills) superimpose top surgery scars onto your chest. See how the pictures make you feel. When I did it, it immediately felt like top surgery was the right choice.

## FIRST STEPS

For this type of surgery, in Belgium, you can go through a gender clinic, but there are very few, and it will take a while. However we do have informed consent laws, which gives you access to medical transitioning with a letter from a therapist.

In order to get the therapist letter I went through Genre Pluriels ([www.genrespluriels.be](http://www.genrespluriels.be)), an organization that supports, informs, and offers a variety of services for and to trans people. In Brussels, they are located at the Rainbow House ([rainbowhouse.be](http://rainbowhouse.be)).

I sent an email to ask for an appointment with one of their therapists. Because of my work schedule, we could only fit an appointment about 5 weeks later. The therapist I met with was very gentle. They gave me a lot of information (most stuff I already knew through research), and heard me out on my reasons for wanting top surgery.

It felt great to talk with a benevolent stranger about my gender identity and expression. I didn't feel judged or like I had to apologize for wanting top surgery. In the end they gave me the letter, as well as the contact information of a few surgeons.

Among the surgeons GP recommended, I decided to contact the one who practiced the closest to where I live. I had to call to make the appointment, which was stressful and a bit awkward (my deadname is still my official name). I got an appointment 2 and a half months later.



When I started taking the first practical steps to get top surgery, my chest dysphoria got worse. It got increasingly harder to deal with my chest and with sports bras/binders. The closer I got to surgery, the harder it became.

## SURGEON APPOINTMENTS

To prepare for the **first appointment** with the surgeon, Genre Pluriels helpfully provided me with a list of questions I could ask them about the surgery process, the recovery, etc. The surgeon took my medical history, explained the whole process, from preparing for surgery to the recovery, in broad strokes. They showed me before/after pictures, and quickly checked out my chest to see if I was meeting the requirements for drainless double incision mastectomy. The appointment lasted 30 minutes, and I left feeling reassured and excited.

What we call "top surgery" are actually different types of procedures (<https://www.topsurgery.net/procedures>), for which recovery can vary greatly. Double incision (DI) is a very common one, but you might qualify for periareolar, or choose another technique in order to retain some breast tissue.

There's a legally required month-long waiting period between the first and second surgeon appointment. Since I was planning to get surgery about 6 months later, I scheduled my second appointment 3 months after my first.

During the **second appointment**, you schedule the surgery and go over the practicalities of what needs to be done before and after the surgery. First, the surgeon confirmed that I really really *really* wanted to do this, and quickly talked me through the next steps. They explained how the first few weeks of recovery would go, and told me I could expect to be off work for 4 weeks. Surgery was scheduled 2 months after my second appointment.

## Planning for surgery

Keep in mind, when scheduling your surgery, that it's better not to have it during the summer, because sweat and incisions don't mesh well.

I chose to have top surgery at a time when I knew things would be slow at work, though this is by no means a requirement. In some countries, plastic surgery recovery is not covered by **medical leave**, but in Belgium it is. All

you need is a doctor's note. You don't have to care if it's convenient for your boss. I had to tell HR in advance when I was going to be off work, then send in my doctor's note when I got it after surgery. The doctor's note doesn't mention what kind of surgery you're getting, and you don't have to divulge that information to anybody.

The **Belgian mutuelle** pays for part of the surgery. It's the hospital's responsibility to deal with them; the patient has nothing to do in advance (except, of course, make sure that they are registered to a Belgian mutuelle and that their subscription payments are in order). The price given to you by the surgeon already takes into account the part that is paid by the mutuelle. I don't have hospital insurance, so I don't know how it works if you have it.

I am not going to give any specifics on the **cost of surgery** because it depends on your surgeon, taxes (VAT) and inflation. There are a lot of associated costs: visits to the surgeon's practice, the post-op binder, medication, etc. However, if you're really curious about how much I paid, feel free to ask me in private ([info@mandooks.com](mailto:info@mandooks.com)).

About a week prior to surgery, I received a phone call from the hospital in order to schedule a visit with the **anesthesiologist**. The appointment takes place a few days before the surgery. It was probably the quickest appointment I've had in my life; I just had to fill out a form containing my medical information and history. If you have questions about the process of one-day admissions for surgery, or worries about your possible reaction to anesthetics or pain medication, this is when you should voice them. The anesthesiologist will also tell you when to stop eating in preparation for surgery.

The surgeon told me to expect a call from the hospital's admissions department to confirm what time to show up on the day of surgery. That phone call never came, but since the surgeon had already confirmed the date and time with me twice, I just showed up when I was told and it was fine.

## PLANNING FOR RECOVERY

### Get help

You'll need to plan for the first few weeks after surgery, aka the **t-rex arms** period. If you're like me, you probably have a healthy dose of "I don't need help" energy. This is a good opportunity for growth: learn to ask for and accept help. There are ways to do this on your own if you have no other choice, but if you have friends and loved ones close by, ask for help.

If you live alone, the easiest thing is to have someone move in with you (or for you to move in with someone) for at least the first week. If you cannot deal with that, then have people check in on you and help you with tasks daily. I moved in with my partner for the first 3 weeks post-op.

If you plan to stay at your own place and have people come over to help you out with stuff, consider you'll need help with:

- **Food:** preparing it, plating it, possibly getting it cut up into small bites, doing the dishes, going for groceries, etc.
- **Hygiene:** putting on clothes/shoes/coats, definitely shampooing, possibly soaping up, maybe even wiping after number two (yes, that does happen to some people).
- **Cleaning up after yourself** (if you're a neat freak like me).
- **Carrying your own weight:** getting properly situated in bed, on the couch, getting up from the bed/the couch.
- **Medical stuff:** getting your post-op binder on and off, checking your bandages for blood, going on pharmacy errands.
- **Reaching for stuff** and carrying stuff.
- **Taking care of your pets**, if you have them.
- **Anything you might need to go outside for:** doctor appointments, errands, walks, ...
- **Loneliness, boredom, low levels of energy, possibly post-op depression.**

You can tough it out for most of these, of course. But my advice is: if you can afford to, don't.

## Transportation

Because we were in covid times, I was not allowed to have someone with me at the hospital, but I needed to have someone to come get me after I was cleared to go home.

Originally, I was planning on having my partner come get me in a cab, but in the end my family drove me back from the hospital. My sister had the brilliant idea of bringing a **really big pillow** to put between my chest and the seat belt, so it wouldn't press on my bandages.

## Medical supplies

After surgery, you're required to wear a **post-op binder** for 3 to 4 weeks in order to avoid swelling and seromas. The surgeon gives you the information on what type of binder to order and from which company. It's a good idea to do it a few weeks before surgery, though I received it 2 days after I ordered it. It's also a good time to stock up on light pain meds and antihistamines (*see Stash section*).

## Physical prep

The surgeon never said anything about physical preparation for top surgery, but since I knew I wasn't going to be able to be physically active for a while after surgery (4 to 6 weeks), I figured some exercise would do me good. I started working out a month before my surgery, but most people recommend starting about 3 months before. The point of these exercises is to develop your pecs, because apparently it helps if they are a bit more defined before surgery.

Here is a good workout video: <https://youtu.be/yleF4Fy8Wos>

## Cleaning (crying emoji)

Even when you graduate from t-rex arms, your upper body range of motion and strength will be limited for weeks. Do your future self a favor and clean your place thoroughly before surgery, even if you plan to stay

somewhere else for the first few weeks of recovery. At least, when you come back home, you'll find it tidy and only minimally dusty.

If you plan to stay home for recovery, don't forget to prepare your space to accommodate your limited mobility, making sure everything you might need is within easy reach. Sometimes, even opening the fridge can hurt after surgery.

## Mental prep

You're about to go through something big and stressful, something that will change the way you relate to your body, which can be a bit traumatic. It is important to prepare mentally for that, and most importantly, to prepare for the possibility of experiencing **post-op depression**.

Jackson Bird (<https://www.youtube.com/watch?v=RLgGOrl25DA>) talked about writing a letter to his post-op self in order to remind himself of why he went through all of it. I did it, mostly to deal with my pre-op nerves. Even though it's awkward and a bit corny, I would recommend doing it.

The truth is, even if your recovery goes well and you don't experience post-op depression, there will be moments when you feel like shit, because your body hurts, the post-op binder is a pain, you cannot shower as often or as thoroughly as you'd like, you cannot dress up to make yourself feel better, and you're not as independent as you'd like. Things just slow down for a while and you've got to adjust to the snail-like pace of recovery. It's a long and frustrating journey.

Another thing: your body will wake up from surgery and go through the major trauma of having a body part disappear. That's going to take some adjustment too, no matter how much you want that body part removed. It's important to take time away from planning it all and from being nervous about the surgery to truly consider your mental state and prepare for the crummy days of early recovery.

## YOUR STASH

Since I was not staying at my own place, I had a very specific inventory of things I needed for the first few weeks of recovery. Some stuff I bought or borrowed, but I had most stuff on hand already.

### Lots of pillows

You'll have to sleep propped up for the first few days, so make sure you have a lot of comfy pillows to accommodate you. A **neck pillow** is also very practical. Some people use a mastectomy pillow to rest their arms, but I found that I didn't need it.

### Clothes

Favor stuff that's easy to wear: sweatpants, comfy socks, easy zip-up shoes (bending over to tie shoelaces is going to be hard for weeks), large button-ups and zip-up hoodies. I couldn't put on a t-shirt or a sweater for about 3 weeks. My mom lent me a warm, fuzzy poncho to wear over my clothes if I needed to go outside for the first few days after surgery. Afterward I wore a large warm jacket, not too heavy.

Don't wear anything too tight under your armpits or across your chest, or anything that will fall off your shoulders and require you to shrug to keep on. Shrugging is going to be difficult for a while. Finally, a pair of warm slippers completes the chic hobo look.

### Straws

I didn't end up using them because I brought a plastic reusable bottle and preferred to drink from it, since it was less heavy and breakable than glass.

Hydration is super important in general, but even more so as you're recovering from general anesthesia, so make sure you have easy access to plenty of water.

## My favorite snacks/food

Have some quick snacks on hand so that your caretaker doesn't have to deal with your snacking needs all day. Plan to have your favorite foods easily within reach, ready to be popped into the microwave. Your caretaker having to cook full meals three times a day gets old really fast.

Keep in mind that for some people, using a knife is quite hard for the first few weeks, so either get your caretaker to cut your food up for you, or eat bite-sized food.

## Entertainment

I used my ereader (less heavy and easier to use than a book), my computer, my smartphone for social media, music, and podcasts. My partner lent me their Switch during recovery, which was honestly a life-saver.

**Ask your friends/the internet for recs** or get excited about binging that one show you've always waited to have a good reason to watch.

It might sound stupid, but I would avoid gory stuff for the first few weeks after surgery. While caring for my very new scars, I found that I was very sensitive to the sight of (fake) blood on TV, whereas I had never minded before.

## Fibers

I heard from multiple sources that laxatives were a big help after anesthesia, which tends to leave you backed up for a few days. I didn't end up buying laxatives beforehand, but I was fully prepared to send my caretaker to buy some for me at the first sign of trouble.

In the end, my caretaker strongly encouraged me to take fibers (**psyllium**) every morning for about a week, from the first day post-op. They helped a lot, and I didn't end up needing laxatives.

## Medicine

For the first few days, 1g of **paracetamol** was my go-to way to deal with pain. Don't wait until pain becomes unmanageable before you take painkillers (they are more effective if you take them before the pain really shows up), but wait at least 6 hours between each intake. I used paracetamol for the first 2 to 3 days, then stopped taking them.

I also took **antihistamines** for the first week or so: the bandages and the binder combined made me feel really itchy and taking half a pill of antihistamines every twelve hour for a week helped tremendously.

My throat was really scratchy for about a week due to surgery, so I got some throat ache pastilles that I would take throughout the day until it stopped being an issue.

It's useful to buy your own **compression socks** and bring them with you to the hospital, because the hospital will charge you for them if you don't have your own.

I'll talk in more detail about supplies to care for your chest in a later section.

## WORRIES

I was worried that post-surgery, the dizziness of pain medication and anesthesia would cause me to talk a lot of nonsense and make a fool of myself, wisdom-teeth-kid-crying-after-Beyoncé style. This did not end up happening at all. Honestly, I was a bit disappointed.

This was my **first surgery**/stay in a hospital ever. The process of going in for surgery was a mystery: I didn't know what the process was, what I would be asked to do, where I would need to go. It turns out, things are pretty smooth, and once you've been through admissions, people will just tell you where to go/wheel your bed around.

I was really stressed about **being left alone** even for one minute in the first few weeks post surgery. What if something went wrong suddenly while my caretaker was out getting groceries? It turns out my recovery went mostly fine and I felt able to take care of myself very quickly.

I was also worried about **being a burden** for my caretaker. What if I was completely helpless and they had to do absolutely everything for me, including helping me wipe my butt? Thankfully, it didn't come to that. But we had lengthy conversations about the caretaking process in the weeks preceding surgery. I wanted to make sure that they knew what it would entail and that they had space to take breaks when needed.

It never even occurred to me to stress out about the **negative outcomes** of undergoing a big medical procedure. This is... not very smart. Ask your surgeon about the risks of having this procedure, ask your anesthesiologist about the risks. Consider them. Do not yolo this. (Do not yolo anything, it's not 2012 anymore.)

## SURGERY TIME

I spent a lot of time worrying about it, but in the end, surgery is the part of the process that asks the least out of you. You're literally asleep the whole time. At some point you wake up and boom, no boobs. *Teet yeet.* It's awesome, and it is disorienting. It takes your brain a couple of days to adjust to your body.

Below is a step-by-step account of how surgery day went for me. Keep in mind, it might go differently for you.

1. Before going to the hospital, I took a long shower, washed my hair, took off all my piercings, brushed my teeth, and put on some fresh, easy to put on and take off clothes. Something I didn't do but should have done beforehand: shave my armpit hair. Do it at home if you can, otherwise they'll provide you with a razor to do it at the hospital.
2. When I got to the clinic, I went through admissions: I signed a bunch of paperwork, paid a deposit (**pro tip:** check that the name on the receipt is your own and not some other patient, or you might have a surprise when your hospital bill shows up a few months later), and put the hospital bracelet on my wrist. They then directed me to the nurse's office on the floor my room would be in.
3. I waited in front of the nurse's office until a nurse showed me to my room and gave me explicit instructions on where to put my stuff and how to put on the hospital gown and hairnet. I didn't have my own compression socks, so they measured my thighs and gave me some.
4. The nurse gave me half a Xanax for nerves and told me to wait on the bed. I waited for over an hour, trying to read and not think too much (the Xanax helped).

5. Finally, my bed was wheeled down to the recovery room. I had to leave my glasses in my bedroom. Being extremely myopic, everything was extra blurry onwards.
6. In the recovery room, a nurse attached an IV to my right arm and stuck pads (EKG leads) to my back. I waited some more.
7. The anesthesiologist (a different doctor than the one I had met with a week prior) checked on me briefly. Soon after, the nurse walked me to the OR.
8. The OR is absolutely not as fancy as the ones on TV. Try not to let the disappointment show on your face.
9. The surgeon was there with their assistant. They took off the top part of my gown and started drawing lines on my chest. They do this while you stand up to make sure that the scars and nipple placements look as well-proportioned and natural as possible. They then take some "before" pictures.
10. A nurse and the anesthesiologist helped me lie down on the OR table and hooked me up to a bunch of machines. Before I could really start panicking, the anesthesiologist said "We're gonna go on a little city trip. Where do you want to go?" Before I could answer "Barcelona", I was out.
11. Boobotomy happens here. 
12. My earliest memory after waking up was nurses putting the compression vest on me back in the recovery room. I remember that it was hard to talk and to breathe. They asked how I was feeling and they gave me more meds for the pain. I didn't feel *too* bad, just completely out of it. I noticed that everyone was super nice to me. The machine I was hooked on kept beeping because I wasn't breathing fully under the weight of anesthesia, bandages and the compression vest. It took about an hour before I could keep the machine quiet.
13. After about two hours of falling in and out of consciousness, I was deemed stable enough to be wheeled back to my room.

14. In the room, a nurse brought me a food tray with sandwiches and a Coke, which is supposed to help with the queasiness of anesthesia. They told me that as soon as I was able to go pee on my own, I was good to go. The nurse also brought me my doctor's note signed by the surgeon.
15. I spent more time napping and tried to eat a bit of bread. I texted my loved ones. I was tired and a bit woozy, but I already felt pretty much like myself. I noticed my upper lip was numb because of the oxygen mask. After I'd peed and the nurse came back to check on me, I called my mom.
16. I waited for my mom to help me put my clothes back on (**pro tip:** keep the compression socks on), then passed by the nurses' office to tell them I was leaving. I left about 2 hours after I was wheeled back to my room.
17. My sister drove me back to my caretaker's. I had a really big pillow between me and the seatbelt, which was more than welcome.
18. As soon as I got home, I took some paracetamol, planted myself on the couch, and didn't move for several hours. I felt mostly ok for the first few hours after surgery, just really tired. I napped for a while.
19. In the early evening, I started feeling increasingly bad, nauseous and feverish. I thought I was going to pass out but in the end I just threw up, which is a common reaction to anesthesia. Afterward I immediately felt better and was even able to eat a very simple meal.
20. I went to sleep early, and slept profoundly until the next morning.

## RECOVERY: THE FIRST THREE WEEKS

### Sleeping

The nurse at the hospital told me I had to sleep propped up for the first few days “until I felt like I could sleep horizontally”, whatever that means. In an overabundance of caution, I ended up **sleeping propped up** for 2 weeks, but reducing the number of pillows under me progressively until I was mostly horizontal.

I'd say I started at about a 50 degree angle, then took out a pillow every 2 days. Sleeping at an angle forces you to sleep on your back, and can be painful for your butt or your lower back. Thankfully I was knocked out from the painkillers and the trauma of surgery, so I slept really well the first few nights.

I kept the compression socks on for the first 2 nights and days post-op, because I wasn't moving a lot. I took them off when I felt well enough to walk around the apartment easily and do some light leg exercises.

### T-rex arms

Because I had heard so much about t-rex arms, I thought it would be hard to move my arms post-op. It wasn't. Though I experienced some soreness and was somewhat limited in my movements because of the binder, I could move my arms relatively easily, as well as carry things (mostly my own weight when I needed to reposition myself in bed/on the couch). But Jurassic Park is right: just because I could, didn't mean I should.

T-rex arms, aka **keeping your elbows at your sides** at all times and avoiding carrying anything heavy, is more a principle to live by for the first few weeks rather than an absolute physical necessity.

You've got to limit your movements as much as possible because:

1. Your body experienced significant trauma and needs rest.
2. You don't want to put any undue stress on your very new wounds and sutures.
3. Your chest muscles need to take it easy too.
4. Too much movement could cause fluid build up, swelling, or even seromas.
5. Your skin rubbing against the binder when you're moving is not great for skin grafts (aka your nipples).

## Diet

I've read that it's better to eat **collagen-rich foods** after surgery, because they help with scarring. Since I'm a vegetarian, I didn't eat much of that. I mostly ate vegetable soups, bread, cheese, pasta, rice and lentils. I made sure to eat plenty (a bit more than I usually would, because I was hungrier than usual) and to eat fresh produce and plenty of protein.

I also took vitamin supplements for the first 4 weeks of my recovery, in the hope it would help with my energy levels.

## Fatigue

During the first week post-op, I was really tired. Even when I wasn't, I didn't feel like I was in the right mental space to do anything. When I wasn't napping, I usually spent my time watching Youtube or Netflix, playing Mario Kart, reading or listening to podcasts.

The second week, I became a bit restless. I spent some time mending holes in clothes and going on short walks. The third week, I was able to help out with chores a little bit. I'd still try to nap at least once a day.

I was frustrated that I couldn't use my 4 weeks off work to do something creative with my time, but I underestimated how much of my time would be spent **recovering from surgery**. I was tired, worried, in pain, and dealing with a big physical change. In this situation, it's okay to just be and do nothing for a while. My body and my brain needed rest. So please, listen to yourself and take it easy.

## Finding answers

During the early days of recovery, I felt quite isolated, being the first person in my immediate group of friends to undergo this surgery. Though everything seemed to be going well recovery-wise, I wanted to be as informed about the healing process as I could be, in all the gory details. And I wanted to find a community.

There is a top surgery subreddit ([www.reddit.com/r/TopSurgery](http://www.reddit.com/r/TopSurgery)) where I found answers to my most practical worries, but also people in the same situation, with the same questions and the same hopes for their recovery. Though I didn't interact much, I would spend a pretty significant part of my day browsing through people's posts, looking at recovery timelines, reading comments, just being an internet creep.



**Obvious disclaimer:** do not believe everything you read on the Internet (including this zine). Every person's recovery is different and each surgeon has their own way of doing things. If you are worried about anything relating to your own recovery and have questions, your surgeon is the best and only qualified person to help you out.

## Back pain and physical activity

I've seen a lot of people online complaining about back pain in the first few weeks of recovery, and I definitely wasn't immune. Back pain is primarily caused by the binder, the weird sleeping position, and the fact that you're spending a lot of time in the same position and not getting much exercise.

Try to take stock of your body when possible. Do some very gentle shoulder stretches when your binder is off (you can find some good post-mastectomy stretches videos on Youtube). In the first few days, I would also do very mild leg stretching and muscle reinforcement exercises for 15 minutes a day.

As soon as I felt like I was strong enough, I started **going on walks**. First very short walks around the block, then longer and longer. My caretaker would accompany me in the beginning, just in case, but after about 10 days, I felt confident I could walk on my own safely, being very careful not to bump into people on the street.

Don't hesitate to use warm/cold patches if needed. And if your caretaker is willing to provide neck massages, you're basically the luckiest person in the world.

## RECOVERY: CARING FOR YOUR NEW CHEST

### Long term care

I was so worried about being “trans enough” to get the surgery and other people's reactions, or about something happening that would prevent me from getting the surgery, that I had never truly considered how long and complicated recovery would be.

I was prepared for the pain and inconvenience of the first few weeks, but I hadn't thought about the fact that scars take one to two years to completely heal. **Recovery is a long, difficult, worrisome process.** You're going to have to take care of big, annoying scars for months post-op. And the scars are going to be on your body forever. Is it worth it? For me it was. But it's still annoying, and something I wish I had been better prepared for.

### Ten days of bandages

After surgery, the surgeon (or their minions) put bandages on your incisions and nipple grafts, then seal them off with a waterproof bit of adhesive plastic. This is supposed to stay on your chest for about ten days, until your next appointment with the surgeon, who changes your bandages and assesses your recovery.

On the morning of the day after surgery, you'll need to take off the compression binder (some help might be needed), and check that the bandages haven't been soaked with blood overnight. I asked my caretaker to do this for me, since they had a better point of view than mine. They took pictures of the bandages for reference, and we checked every day to see if the situation had evolved or not.

On that first day, you then call your surgeon to tell them about the state of your bandages (and your overall state as well). If they're soaked through, the surgeon will see you the same day to change them. That didn't happen to me, and I didn't need to change the bandages until day 10.

This bandaging technique allows you to take showers; you don't have to stay smelly until your bandages are changed. I took a shower every other day with the help of my caretaker, mostly for hair washing. It took about 2 weeks for me to be able to wash my hair on my own.

At my surgeon appointment on day 10, they took off the bandage, cleaned up the incisions and nipples, and let me check out my new bespoke chest in the mirror. They also took some time to explain how to take care of the incisions and nipples for the next few weeks and which products to buy.

## Compression vest

You'll have to wear a compression vest non-stop for a few weeks after surgery. It's annoying as fuck, but it can also feel like a security blanket. After your chest undergoes major trauma, it can feel nice to have that extra layer between your hurt body and the rest of the world. Also, it helps prevent seromas, reduces swelling, and gives you that flat feeling you're craving. That said, it sucks. Oh my god it sucks.

I found it particularly tight and chafy under my armpits, where I was experiencing some swelling. I had to readjust it often, too, because it would ride up a little bit when I would hunch over. I did most of my recovery in February, so I liked that it kept me warm, but it would have been uncomfortable during the warmer months, I think.

At the start of my recovery, I couldn't fasten the vest on my own because it required me to move my elbows away from my body. My caretaker did it for me until I was able to fasten it myself, after about 2 weeks.

I was supposed to wear the vest non-stop (unless, of course, I was showering or taking care of my scars) for 3 weeks, but I didn't receive any instructions on how to keep it clean. So we just put it on an express cycle in the washing machine while I was in the shower, then let it air dry over a radiator, every 2-3 days.

## Incisions

Everyone is different: sometimes incisions will look like thin reddish lines, sometimes they will look puffy and dark. That's just how your body heals. As long as you keep them clean and use the treatment your surgeon recommends, things should be fine.

After my day 10 appointment with the surgeon, I was instructed to put **Cicaplast** on my incisions 3 times a day every day. In the beginning, I would apply it gingerly, then as weeks passed and the incisions transformed more and more into scars, I would gently massage it into my skin with one or two fingers.

How do you know when the incisions have fully transformed into scars? It usually takes about 4 to 6 weeks, though it might take a while longer for some people. A good rule of thumb is: if you're not sure the incisions are definitely scars, they probably aren't. Even when your incisions have become scars, they're still very new and fragile. Be gentle with them.

Scar care can feel very slow and sometimes you might experience some setbacks. Don't get discouraged. Scar care can be one of the scariest parts of recovery, because you can do everything right and your scars might still not look awesome, or take a really long time (actual years) to fade. Some might not really fade at all. Scar healing is mostly affected by genetics, the one thing you cannot do anything about. Don't compare yourself to others too much.



In order to feel more in control of my scar care and get to know my new body, I decided to name my scars. I gave them silly names and asked them how they were doing each time I would do scar care. Yeah, it's cringe, but it made it more fun, and therefore less of a chore. Find little things to make this process less unbearable. Enjoy your new body!

## Hurtsy pepperonis

If you underwent double incision mastectomy, your nipples are skin grafts. They're reattached to your body at the end of the surgery and they're basically decorative. This is important to know, because skin grafts have their own way of healing.

The first few weeks of a skin graft's life are the most important, because the graft needs to develop new blood supply, essentially "reattaching" itself to the skin. It should be left alone and kept clean as much as possible, so it doesn't get infected.

Clean your grafts in the way your surgeon recommends and leave them be. **Don't touch them**, don't check on them every hour, just leave them to do their own stuff. For the first three weeks, they're going to completely scab over, and then the scabs will fall off in their own time. The skin underneath the scabs will be entirely new, and in my case, a bit achy.

My nipples have been the most challenging part of my recovery. On my day 10 appointment, the surgeon noticed that the top layer of skin on both my nipples seemed "burned". He told me to cover them with non-sticking gauze and apply a small amount of Cicaplast once a day. The burned layer would slough off after a while and leave a shallow wound. I should leave it alone until it scabbed over, and eventually new skin would appear.

That whole process took about 5 weeks. Not gonna lie, when the burnt skin came off, it was pretty gnarly and gross. It was stressful not knowing for sure if the healing process was going well or not.

Covering my nipples with gauze was also quite complicated: it took a long time to do it properly, and the adhesive would irritate my skin and leave rashes on my chest. After about 3 weeks of using the same medical adhesive, I discovered that there is a special brand made for sensitive skin you can buy at the pharmacy.

## Skin

Between the surgical trauma, the swelling, the bruising, the bandages and the binder, the skin of your chest is going through a lot. Your skin can often feel brittle and dry. Some people experience bouts of acne after surgery, especially if they're on T. As I said above, it's possible to have allergic reactions to medical adhesive. Stretch marks can also appear on your chest, due to the pulling of your skin as your incisions heal.

In order to take care of my skin, I used my usual hydrating aloe cream in the first few weeks, making sure to rub it into my skin veeeery gently. Later on, when I felt like massaging my chest was possible, I used **Bio Oil** (or Bi Oil, in France/Belgium).

Bio Oil is very well recommended on top surgery forums. You can buy a small amount and it will last you a long time. It's very easy to massage into the skin, and it helps with stretch marks, scars, dehydrated skin and rashes. Some people are put off by the smell of it, but I thought it smelled kind of bland and pleasant.

## A WORD FOR THE CARETAKERS

Some advice, from a grateful t-rex:

**Be prepared** for the job ahead of you: you'll be someone else's arms for at least a week. You'll have to feed that person, help them with basic tasks, check on bandages and scars, and also, most probably, provide a lot of comfort and stay chill while they angst about their recovery.

Make sure that you have the **time and space** to accommodate another person's needs.

If possible, **schedule breaks**: moments when someone else (a friend, a parent, etc) can come in and take care of the t-rex while you go do something fun and just for yourself.

Don't wait for the t-rex to ask you for what they need, **anticipate**. Leave some objects they might need within easy reach, make sure they have water and some snacks at hand, make sure to have plenty of food ready on fixed times. Be close and available when they're taking a shower/doing a thing that you know will require help. If you know your t-rex has trouble taking care of themselves or asserting their needs, suggest nap times, movie nights, shower times, short walks, ...

Do not let the t-rex do the dishes or other household chores for at least two weeks, no matter how much they want to help.

Do not forget to **clean the binder**.

**Communicate** with your t-rex: discuss meal prep plans with them so that they feel involved in the process, for example. But also don't hesitate to let them know when you're tired or feel like you need alone time, or when you cannot fucking cook yet another meal and want to get takeout.

## RECOVERY: THE NEXT FEW MONTHS

### 3 weeks post-op

After 3 weeks at my partner's, I felt well enough to go home. They helped me go through my apartment in order to put all the stuff that was previously on high shelves at shoulder level. I felt fine living alone for the most part; the main difficulty was getting something from a high shelf in the grocery store. I was really tired, and I had a hard time not obsessing over my recovery, wanting to speed the process along and make sure I did everything right to have the best results possible.

I could finally **stop wearing the compression vest**. It was a relief, but it was also hard letting it go, because it made me feel safe. Since I was still having issues with my nipples, I kept covering them with gauze until week 5, until they could rub against a shirt without hurting.



If you're going to put on a (t-)shirt right after doing your scar care, be prepared for your shirts to have grease marks where you put ointment. If you wait a while for the ointment to dry, it probably won't be an issue, but I was too cold/not patient enough to wait an hour before putting on a shirt. I lived with the grease stains and hoped that they weren't too noticeable. Thankfully, the stains came off most shirts after a wash.

### 4 weeks post-op

At this point, my medical leave was over; I had to go back to work. I was still quite tired, which made things difficult. Finding a clean, private place to do my scar care at work in the middle of the day was also challenging. Since I wasn't out at work, there was a lot of speculation from my colleagues about my medical leave. But I didn't owe them any explanation, and I managed to evade most questions by being vague and executing strategic retreats.

I started being able to sleep on my side again, though it was still a bit tender. It took about 2 months until it was completely fine.

## 5 to 6 weeks post-op

A bit after the 5 week mark, I started using silicone strips, adhesive strips of silicone that stick to your scars. The Internet tells me that science doesn't know exactly why silicone helps healing scars, but it does.

You don't have to use silicone strips. My surgeon never recommended I use them. There are lots of ointments and oils you can use instead. You can also choose to keep using Cicaplast for 2 to 3 months until you run out, and stop there.

But I wanted to minimize my scarring as much as possible, so I thought I would try them out. Turns out I love silicone strips. They weren't easy to come by: I ended up buying them in bulk on Amazon (CEO entrepreneur born in 1964 etc etc). The brand I use is **Elaimei Silicone Scar Sheets**. They come in a roll that's pre-cut every 5 centimeters. I cut up strips of ten centimeters, then cut them in 2 lengthwise. After a shower, I stick the strips directly onto my scars, making sure to hunch a little bit as I do so, so that the strip doesn't fold too much when I inevitably hunch my shoulders later on while wearing it.

When I started using them, I would keep the strips on for about 12 hours, then take them off in the evening to massage my chest with Cicaplast or Bio Oil. When it became clear that I wasn't allergic to them, I started keeping them on for up to 5 days. I would shower with them, sleep with them, no problem. I have noticed they don't fare super well against sweat, so it's been more challenging wearing them in the summer.

For best results, it is recommended to use silicone strips for at least 3 months. Some people might stop after that, some might wear them for up to 2 years, simply because it makes them feel more at ease with their body. You do you.

Reasons why I love silicone strips:

1. I feel like my scars are kept moisturized the whole time they're on.
2. I feel like they make my scars look less red and more flat.
3. I don't know if that's actually true or not, but I feel like they keep my scars from widening.
4. The silicone strips' color is pretty close to my skin color, and they hide my scars when I have them on, which mitigates the dysphoria I have from my scars.

To me, silicone strips feel like the lowest effort/highest reward care. They are expensive, they're not for everyone, and I am not 100% sure that they really help that much. But it feels worth it to try, if only for the peace of mind they bring me.

At the 6 week mark, the **second post-op appointment** is scheduled with the surgeon. Mine went by fairly quickly. They asked me how I was doing, checked that everything was on track for best healing, and gave some recommendations for scar care.

During the first few months post-op, dissolvables stitches are still dissolving. You might have "pimples" developing on your scars, which are actually the stitches coming out. This is perfectly normal and not an infection. Keep these "pimples" clean, don't pop them (but do not worry if you do), and put a band-aid on them until they resorb or scab over.

## 2 months post-op

It took about 2 months before I stopped feeling tired all the time. By that point, I had regained all of my upper-body mobility and could do most things on my own. I still was careful not to stretch my scars when reaching upwards. If I had been into sports, this is when I would have **resumed all physical activity**.

Around this time, I did a sensation check on my chest with a small paintbrush. I gently brushed it against my chest in order to see where I had kept or regained sensation, and where I hadn't. This has no other purpose than knowing my body. Most of the skin under my nipples and over my

scars, as well as patches of skin under my armpits, were numb. I had pressure sensation in my nipples, but not much else. The rest of my upper chest was fine. I don't know if I'm regaining sensation with time or not. It's hard to tell at this point.

### 3 months post-op

This is when I felt like my life was basically back to normal. My chest was looking a lot better, though I had some swelling left. My nipples were still not in optimal shape and I felt my skin pulling awkwardly when I reached upward a bit too much. At this point, scars usually start the very long process of fading. Things settle down.

My **third post-op appointment** went much the same as my 6 week one. The surgeon took some pictures of my chest and told me I could stop scar care. I was still wearing silicone strips and massaging my chest with Bio Oil regularly, and planning to keep it up at least until month 6. Massaging your chest is great for your skin and scars, but also to prevent scar tissue buildup and muscle inhibition. Some muscles under the skin can feel as hard as rock post-op, and it's a good idea to loosen them up a bit with regular massage.



If you haven't already by this point, start paying attention to your posture. Ye olden days of hunching over are behind you. Your spine and shoulders need a break, and you finally have a cool chest to show off. Which is easier said than done. Again, I found that there's a plethora of YouTube videos with daily exercises to help with that issue.

### 6 months post-op

If your recovery is going well by this point (no more swelling, no pain, scars in good shape), you probably don't need to schedule another surgeon appointment. However, if you are worried about your recovery, or think you might need a revision, this is the time to schedule it.

Revisions can usually be done directly at the surgeon's office, with local anesthesia. Some surgeons charge you for them, some surgeons include the price of the revisions in the overall top surgery bill.

I haven't gotten a revision (yet), though I will probably get one for dog ears (bits of extra skin in a triangular shape at the extremity of your scars), so I cannot give you more information on that process and its recovery.

## 1 year post-op

\*Beastie Boys voice\* **No! Sun! Til One Year!** Keep your scars out of the sun as much as possible for at least a year, possibly longer if you can bear it. Direct sunlight on scars is apparently very bad if you want them to fade as much as possible.

Your scars might still be changing at the 1 year mark, fading or widening or flattening. This is normal and good. It can take up to 2 years for them to look the way they're always going to look. You gotta let the soft animal of your body love what it loves and the soft skin of your scars heal how it heals (Mary Oliver don't sue me).

The 1 year appointment with the surgeon should be a simple check in, an opportunity for them to know how things have been going and take some photos for the before/after pictures.

## A LIFE WITHOUT BOOBAGE

At the time of writing this, I am 7 months post-op. I'm just beginning my life without boobage. People say "time flies", but I don't feel that way. Though I was very fortunate through my entire top surgery process, I can relive every stage of it like it was yesterday. I remember vividly how much care and worry went in to reach this point.

Though I am incredibly glad that I am boob-free, especially since summer arrived, I am not in love with my results and have conflicting feelings about the lack of sensation in parts of my chest. When I look at myself in the mirror, the scars look incongruent on my body, like they have nothing to do there.

I found it very helpful to have an AMAB partner who was gracious enough to let me compare our chests. From where I'm looking, my chest still looks too big, so being able to compare mine with a naturally "male-presenting" (iykyk) chest settled down a lot of anxiety.

Having a flat chest changed the way I relate to my body. There was no immediate boost in self-confidence, but I do feel more comfortable in my body now. I feel like I look more like myself. Sometimes I put on an outfit and it's exactly right in a way it hasn't really been before.

I feel more comfortable with my gender presentation, more asserted in my identity. More me. And yeah, I still get misgendered all the time. I am called "madam" every day. I still experience dysphoria. Top surgery didn't "fix" things for me; I still struggle with many facets of being trans. But it sure did fix the "having boobs" part of my trans problems.

*mandooks.com*

thank you Xavier for being my caretaker and my endless cheerleader <3