



How A Breast Reduction Gave Me My Body Back

I wanted to stop identifying as my cup size. Surgery was my only option to change that.

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The first time I realized I had big boobs was in fifth grade. I'd just switched schools and my newest friend in class was reminiscing on the first day we met, a month before, when my parents set up a day for me to visit the new school. Apparently, I made a great impression on everyone: I seemed nice, smart, and, according to the boys in the class, was a lot more "developed" than everyone else. I was 11.

I wouldn't say I hated my boobs, but I certainly wouldn't invite them to a party if I had a plus-one. From the day my parents sat me down and told me it was time I get a training bra to this past November, I had one wish: smaller breasts. I wanted to be able to buy a bathing suit and know that the top half of the set would fit me in the same way the bottoms would. I wanted to be able to go shopping with my mother and not stare in the mirror, fixated on pressing my boobs against my chest. I always felt looked at, and observed, ever since fifth grade, when I wasn't known as Sam. I was known as the new girl with big boobs.

By the time I was 18, I was 5'1" and officially a 28G, but rarely actually owned a bra with that exact size. Most underwear brands didn't go that far down on the band or that far up on the cup, so I found alternatives — or just opted out of a bra altogether, which was as uncomfortable as it sounds. Eventually I visited a chiropractor after developing intense lower back pain. He confirmed that I had scoliosis, an abnormal curvature of the spine, and my breast size definitely wasn't helping the pain.

I felt validated: My boobs were exactly as much of a burden to my body as I believed them to be. Four years after that visit to the chiropractor, I decided to get a breast reduction. The first time I ever said it out loud was to my mom. A year, one round of general anesthesia, \$250 worth of post-op bras, and two new nipples later, I got my wish.

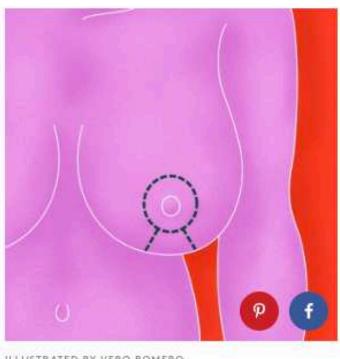
I love my OB/GYN. Tracy Brennan, M.D., has been with me since I first asked my mother if I could go on birth control when I was 15. I've known her for a long time, and she's known my family even longer. She was the doctor who gave my mother the breast exam that confirmed a lump that would soon be diagnosed as breast cancer. By the end of my annual check-up last April, Dr. Brennan agreed: If I wanted to get a breast reduction, I should do it.

That said, she was hesitant about supporting my decision for a few reasons, including the fact that most women don't undergo a reduction surgery until after their childbearing years are over, and I was only 24. She also recommended that I take a BRCA test — something I'd been putting off for years — ahead of consulting with surgeons. I declined. As the possibility of a reduction surgery grew more real, part of me was afraid that if I did test positive for the gene, I might consider a full double mastectomy to avoid a potential cancer diagnosis in the future. According to the American Cancer Society, only 5% to 10% of breast cancer cases are thought to be hereditary, but it's a scary prospect that I'm just not ready to face right now.

I thought finding the right plastic surgeon would be the easiest part of the process. But within the first few minutes of calling offices to set up a consultation, I found out that most of the surgeons within my insurance network were booked for at least six months. After calling countless offices, I finally got one on the calendar within two weeks near my parents' house in Connecticut.

The convenience wasn't worth the horrible experience I had. The surgeon spent much of the appointment drawing lines all over my chest that didn't even seem to be relatively straight or symmetrical; worse, he didn't listen to or respect the fact that I said — at least twice — that the way he was pinching and pulling my nipples made me physically uncomfortable. It only got worse when he asked what size I'd like to be. "Preferably a C," I said. "As small as physically possible." He scoffed, "But who would want to go smaller?" One of us obviously forgot we were in a consultation for a breast reduction — and it wasn't me.

I paid the \$100 consultation fee and broke down in tears, terrified by the possibility that all the surgeons I'd meet would be like this man. They weren't, but they weren't right for me, either. After months of searching, I felt hopeless. I had all but given up when I got an email about taking an inoffice meeting with Melissa Doft, M.D., a plastic surgeon here in New York, to chat about injectables. We met about a week later and, quickly, our conversation shifted from fillers to breast surgeries.



ILLUSTRATED BY VERO ROMERO.

I told Dr. Doft about my nightmarish experience with the doctor and she told me that, no matter how much she respected her male colleagues, they simply wouldn't ever understand how I felt because, well, they don't have boobs. I admitted that this part of the process had been difficult for me; even if I did find the right surgeon, I wasn't confident my insurance would cover the costs of a bill close to \$15,000. I'd been sent guidelines from multiple surgeon's offices about hoops I'd have to jump through to be considered eligible for a reduction. One noted that, for my surgery to be considered a medical necessity, I'd have to have previously undergone several months of physical therapy. That would serve as "proof"

that I did absolutely everything else in my power to make my physical discomfort bearable.

Here's the thing: Yes, I could make an active effort to improve my core muscles, to strengthen my back, but nothing could make the weight of my boobs disappear except surgery. To me, it was the only option. By the time my consultation rolled around, I finally felt hopeful. Dr. Doft told me that petite women like myself often find it difficult to convince surgeons and insurance companies to approve the surgery because of the perception that they simply want one more than they actually need one. She asked me every question the insurance company would ask her and made sure that I covered all my bases. I noted that I worked out regularly (at least three to four times a week), but found it difficult to wear sports bras or even do basic cardio due to the weight of my boobs. I woke up daily with back pain. I had scoliosis. I had terrible posture and sitting up straight was even more difficult, thanks to my top-heavy shape.

I couldn't talk about any of this without crying. As physically uncomfortable as it felt on the front of my chest, my extra-large cup size triggered more emotions than I knew how to put into words.

"Do you want me to do this surgery for you?" Dr. Doft asked at the end of our appointment. "If this is what you want, you deserve it." I agreed. We wrapped up our conversation after a quick look in the mirror and a few before photos. Then, Dr. Doft gently asked what size I wanted to be. I told her, as I did all the surgeons before her, that I would love to be a C-cup, but the smaller the better. She said she'd do everything she could.

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There was radio silence for two months after my first meeting with Dr. Doft, while her office corresponded with my insurance company. The next time I heard from her, it was to inform me that the surgery, and all related medical expenses, would be covered. And, just like that, my operation date was scheduled for five weeks later.

Aside from not eating or drinking anything after midnight, the only real pre-op requirement was to enlist someone to escort me home after the surgery. For me, that was my mother. I might be in my mid-20s, but there's nothing like undergoing a major surgery for your parents' true colors to show: My father, who incidentally found the lump in my mother's breast when she was 31, was as nervous as I was. On the other side of the spectrum was my mother, a naturally kind and nurturing woman who has had cancer and thought my recovery would be a piece of cake by comparison, a misconception that we argued about in an Olive Garden. Still, she's my mom, and her presence turned out to be exactly what I needed while sitting in the cold, sterile waiting room 45 minutes before my surgery.

I don't even remember the time of the surgery, how many people were in the room when I hoisted myself onto the surgical table, or how many times I asked for pain medication when I woke up. All I remember is watching my mom get lost on her way to the elevator after we said our goodbyes, and then waking up.

I came out of the surgery in a full-blown panic attack. I remember feeling like I was choking for air with what sounded like 50 voices hanging over me asking each other why I was reacting like my lungs were failing when my oxygen levels were at a clear 100. "She's having a panic attack," someone confirmed. Even while struggling with the physical manifestation of my own anxiety, I felt mortified.

After I was rolled into the recovery room, I napped for what seemed like hours. I'm not sure exactly how long I felt drowsy, but I do know that eventually a nurse came in and told me it was time to move to a smaller recovery room where I'd eat some jello, take some pills, and then get dressed to go home.

I spent a lot of time in bed the first two weeks after the surgery, with my entire chest wrapped in an industrial-sized Velcro bra. The pain was bearable, but unlike what I expected: Everything throbbed with a burning sensation that lingered until I was able to take more pain medication. I couldn't go anywhere that might be crowded, like a bar, or literally any public establishment that posed the risk of someone bumping into my chest. I took Ubers everywhere I could, even though I'd have to lay horizontal in the backseat, cupping the underside of my boobs every time the car hit a bump. Subways were off-limits because of how overcrowded they always are.

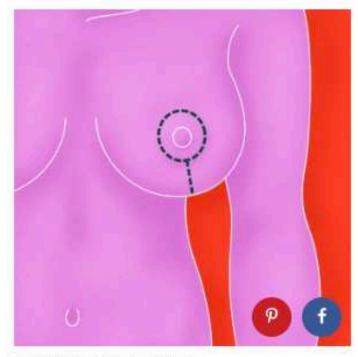
Sleeping was the most difficult part about the entire recovery process. Since I spent a lot of time laying down, I was never tired. I found myself taking painkillers every night to just fall asleep. Although I had flexibility to work from home, eventually I had to get back to my usual routine. Even in the days after I'd gone back to work, around 2 p.m., my chest would erupt in what felt like third-degree burns. The stitches took weeks to fully dissolve, and every day they made me very aware of the fact that I was still recovering.

It wasn't until I started taking <u>CBD pills</u> in the afternoon that the pain subsided. I could get on the subway and not fear that someone might accidentally squish me against a railing. Eventually, I'd find myself doing normal things again, like reaching for Tupperware on a top shelf without cringing, and realize how far I made it.

I visited my doctor for a post-op check-up two days after my surgery. Walking down the stairs from my apartment and hoisting myself into an Uber felt like a major accomplishment. As Dr. Doft removed the surgical bra she wrapped me in two days prior, she asked if I wanted to see them. I shook my head, "No, not yet." Instinctively, I looked down anyway. In what really was a half second, I saw it all: the stitches, the blood stains, and my new swollen nipples. I fell back immediately, resigned to the fact that I was either going to throw up or pass out. Dr. Doft gripped my arm, told me to breathe, and let me cry for a minute. "They look great. They look so good!" she assured me.

Now that I was officially recovering from the surgery, I knew it was probably time to tell everyone that I had one. Until that point, I'd been on a need-to-know basis — besides my parents, the only other people who were aware were my bosses, my roommate, and one friend who lived in my neighborhood (who would eventually prove that I made the right decision in telling her after she delivered tiramisu and homeopathic arnica pain relief pills to my apartment post-operation). Otherwise, the surgery was a secret. I knew that the more people I told would mean the more unsolicited opinions might cloud my decision.

After the surgery, I quickly learned that the second you tell someone you had a breast reduction, they suddenly feel compelled to tell you about their cousin's college roommate's sister who had the same surgery and felt totally fine in less than 24 hours. The more people I told, the more isolated I felt, because the harder it was for them to understand. When someone would ask if I was in pain, it was hard to explain how I wasn't in excruciating discomfort, but there was a constant searing sensation near and around my nipples, showering still felt like an Olympic sport, and no matter how much Colace I took, I'd been constipated for weeks.



ILLUSTRATED BY VERO ROMERO.

It's now been almost five months since my surgery. I don't have to wear a bra 24/7 anymore, I can sleep on my side again, my nipples aren't swollen, I can run on the treadmill without feeling like a masochist, and boy, do I love being naked. What I see in the mirror is finally what I'd always thought I should be seeing. For so much of my life, I didn't feel like my body was actually mine. Now, I know it is.

No Filter is a week-long series of frank, honest stories about cosmetic procedures — without judgment, sugar-coating, or stigma.