



BREAST AUGMENTATION

Background

Breast Augmentation (BA) is one of the most common and trusted cosmetic surgery operations in the world. The female breast is intrinsically linked with femininity, self-esteem and psychological wellbeing. Also known as breast enhancement, or 'boob job', **BA** is frequently used for the following:

1. **Post-pregnancy volume loss and ptosis (droop)** is probably the most common reason for BA after children have taken their toll. After breast-feeding, a return to normal leaves the breast smaller and emptier. The envelope also stretches and the **nipple-areola complexes (NAC)** descend: this is known as ptosis (droop). Most wish only to restore breasts to their earlier state.
2. **Development** of the breast is highly variable and they may be small (**hypomastia**) or conical with large areolae (**tubular**).
3. **Asymmetry** is the term for an unequal pair of breasts. Whilst a small degree of difference is very common, more than a cup size is rare. 3D photoimaging can help to optimise implant sizes.

After half a century of different materials being used, the silicone prosthesis remains the best option. 50 years of continued development and research have given us an high degree of confidence to recommend medical-grade silicone breast implants that are safe regarding:

- Breast cancer
- Connective tissue disorders, including arthritis
- Infant health issues when breastfeeding

Incidentally, silicones are a regular part of modern life, being found in cosmetics, sun creams and many kitchen utensils.

Pre-Operative Consultation

With so many decisions to be made to obtain the best procedure and implant for you personally the consultation is usually the longest in cosmetic surgery. In fact, two are often required to discuss the information and expectations satisfactorily.

Operative Procedure

General anaesthetic (GA) is required and incisions today are placed in the breast crease. Absorbable stitches are used and the procedure can be undertaken as a day-case if preferred.

Post-Operative Advice

It is important to mobilise gently as soon as practicable to reduce the risk of clots. Pain is not usual and Paracetamol is often all that is required.

The bra must be worn constantly for the first week and you may shower on the 5th day. You will have a wound review after a week. Strenuous exercise and lifting should be avoided for 6 weeks until you have seen your surgeon.

Full scar maturation takes 12–18 months and is worst (being red, raised and unsightly) during the early stages. Massage is helpful, but sun exposure should be limited during the first year

Risks and Complications

Whilst any operation has the potential for complications, these are rare with modern techniques. Particularly important are your own expectations as to whether the operation can achieve the result you desire and at what cost in terms of the scar and any risks. BA will require further surgery in the future.

CASE STUDY 1: 21-YEAR OLD ♀ WITH SUBMUSCULAR IMPLANT B TO D CUP



PRE-OP



POST-OP: 2 MONTH AFTER INSERTION OF MODERATE 210CC PROSTHESIS

CASE STUDY 2: 30-YEAR OLD ♀ WITH DEFLATION AND MILD ASYMMETRY B TO D CUP



PRE-OP



POST-OP: 8 WEEKS AFTER MODERATE 275 CC IMPLANT WITH DUAL-PLANE TECHNIQUE