



DR. JAN KLEYNHANS

MBChB M Med (UCT)

PLASTIC & RECONSTRUCTIVE SURGEON
PLASTIESE & REKONSTRUKTIEWE CHIRURG

BREAST AUGMENTATION AND LIFT

Should one's breasts be small, shapeless, moderately droopy and if a fuller upper pole of the breast is required, a breast lift operation can be done in addition to implant placement to make the breasts firmer, fuller and to enhance the upper breast in the cleavage area. This combination procedure requires more operation time and combines the benefits but also the potential complications of both augmentation and breast lift. The best option for each patient will be decided on at the time of consultation and examples of expected outcomes shown.

THE OPERATION DAY

Admission is on the operation day and patients are photographed, marked and are seen by the anaesthetist beforehand. The operation involves a breast lift operation as well as placing a breast implant under the breast or pectoral muscle. Breast lift/augmentation usually leaves scars around the areola and vertically down the middle from the areola to the breast fold. General anaesthetic or conscious sedation is required. Patients are kept in the clinic overnight to limit the risk of complications as much as possible and drains will usually remain in for 24 hrs.

AFTER YOUR OPERATION

Supportive bras will be supplied to be worn for 6 weeks. Expect the breasts to be swollen, bruised and somewhat distorted at first, taking approximately 6 weeks before the desired shape is arrived at. Follow up visits are scheduled after 1 and 6 weeks as well as 6 months after surgery. Scars are taped for 6 months to reduce them quickly and as much as possible. Patients may drive for short distances in a comfortable vehicle with power steering from 7 to 10 days after surgery, return to desk jobs after a week, may lift arms above shoulder level after 3 weeks and return to strenuous physical activity and sport after 6 weeks. Patients from abroad should stay in this area for 3 weeks afterwards.

COMPLICATIONS

Complications may occur after this operation but are unlikely. These include: blood or fluid collections around the implants, wound infection, changes in nipple sensation, thickened scar or capsule formation around the implants, displacement or distortion of the breasts and implants and implant rupture. It may be more difficult to see all breast tissue on mammogram but studies show no evidence that placing implants delay breast cancer detection or change the outcome of breast cancer treatment. There is no scientific evidence that silicone breast implants cause cancer or autoimmune disorders of any kind. Scar revision is sometimes required, usually under local anaesthetic in the rooms surgery.

PLASTIC | AESTHETIC | RECONSTRUCTIVE | SURGERY

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Good long term results can be expected and most patients will not require further surgery after augmentation and lift. However the effects of gravity and ageing of one's breasts continue over time. This operation is becoming more popular as more patients desire a fuller enhanced upper breast. It is often recommended to others and most patients are highly satisfied.

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