



DR. JAN KLEYNHANS

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PLASTIC & RECONSTRUCTIVE SURGEON
PLASTIESE & REKONSTRUKTIEWE CHIRURG

BREAST AUGMENTATION

BREAST AUGMENTATION: SMALL, SAGGING OR "EMPTY" BREASTS MAY BE ENLARGED, FILLED AND THE SHAPE IMPROVED BY PLACING SILICONE GEL IMPLANTS UNDER THE BREAST TISSUE OR CHEST WALL MUSCLE.

Breast enlargement by inserting breast implants is the most popular cosmetic breast operation in this practice and many of these are done annually. The operation will enlarge and lift one's breasts to a fuller, more youthful shape.

WHICH OPERATION IS BEST FOR ME?

At consultation the size and shape of breasts you require as well as the best implant and operation options will be discussed, taking your anatomy into account. Placing silicone gel implants through an incision in the fold under the breast, behind the breast glandular tissue, on top of the chest wall muscles is preferred for patients with a reasonable amount of breast tissue to cover the implant as this operation is less painful, the risk of complications is less and recovery is quicker. Placement of implants partially or fully behind the muscle is recommended for those with little breast tissue or very thin patients. Incisions adjacent to the nipples are occasionally used according to patient preference. Silicone gel implants are recommended for most patients and the size and type of implant is determined beforehand at consultation.

THE OPERATION DAY

Patients are admitted to hospital on the morning of the operation for marking, preoperative photos and for anaesthetic assessment.

The operation is usually done under general anaesthetic or conscious sedation and overnight stay is often required to reduce the risk of complications. Some patients may be allowed to leave the hospital on the same day. The breasts are usually drained overnight but some drains are left in place and only removed a few days later.

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. 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.

Follow up visits are scheduled for 1 and 6 weeks as well as 6 months after surgery. Patients from abroad should stay in the area for 2 weeks postoperatively.

COMPLICATIONS

PLASTIC | AESTHETIC | RECONSTRUCTIVE | SURGERY

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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 there is 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. Breastfeeding is possible provided that nipple sensation is retained. Silicone is not present in breast milk after implant placement.

The current generation of silicone breast implants is thick walled, the gel is highly viscous and should last more than 20 years. However inserting a breast implant commits a patient to the possibility that further surgery may be required to the breast due to the implant at some stage in the future.

The result of breast augmentation can be dramatic and very satisfying to patients and has a high degree of patient satisfaction. The decision to augment one's breasts is a highly personal one that not everyone will understand. Some patients regard the operation as a restorative procedure after the childbearing years. For others it is for restoration of proportions and yet others to achieve a certain 'look'. This is one of the more predictable procedures offered by plastic surgeons and few patients regret their decision to have breasts enlarged.

BREAST AUGMENTATION AND LIFT

Should one's breasts be small and droopy and a larger, firmer breast with a fuller upper pole is required, a breast lift operation can be done in addition to implant placement to make the breasts firmer, fuller and to enhance the cleavage area. The best option for each patient will be decided on at the time of consultation and examples of expected outcomes shown.

This combination procedure requires more operation time and combines the benefits but also the potential complications of both augmentation and breast lift. Overnight stay in hospital is usually required, dressings stay for one week, supportive bras are worn for 6 weeks and the scars taped for 6 months. Short scar breast lift enhancement leaves scars around the areola and vertically down the middle from the areola to the breast fold only.

Recovery is as for breast augmentation but more swelling and bruising can be expected and initial distortion is present which takes 6 weeks to settle. Complications are as for breast augmentation and breast lift.

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Good long term results can be expected and most patients will not require further surgery after augmentation and lift. 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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