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BREAST LIFT: SAGGING BREASTS OF ADEQUATE SIZE MAY BE LIFTED AND MADE FIRMER TO IMPROVE SHAPE WITHOUT ENLARGEMENT

BREAST LIFT/MASTOPEXY

Mastopexy, an operation to lift and improve the shape of one's breasts, is a commonly performed operation in this practice. Patients have their breasts lifted to improve the shape of drooping breasts and stretched areolas, to be less bra dependant and to fit clothing and underwear better. Improved breast shape often results in improved self-image, self-confidence and self-esteem. This operation is often requested after pregnancy and breastfeeding or weight loss, which leaves the breasts smaller, sagging and "empty."

WHICH OPERATION IS BEST FOR ME?

The best operation option is decided on at consultation as different techniques are offered depending on breast size and patient requirements. Some techniques result in less scarring than others and we endeavor to do a short scar lift if size permits in order to leave the least scarring possible. In some cases placement of breast implants are recommended as well to increase breast size and to enhance upper pole fullness in the cleavage area.

BEFORE THE OPERATION

Patients are encouraged to lose weight preoperatively to their goal weight and stop smoking altogether for 4 weeks before surgery to decrease the risk of serious complications. Anticoagulant medication (blood thinning agents like low dose Disprin and Arnica) should be avoided before breast surgery.

THE OPERATION DAY

After early morning admission, patients have photographs taken and the pattern for the operation is drawn on the breasts beforehand. The operation usually requires general anaesthetic or conscious sedation and patients leave hospital in the evening or stay overnight depending on the extent of surgery and recovery from anaesthetic. Smaller breasts can be lifted under local anaesthetic with sedation as an outpatient procedure if the patient is brave enough.

AFTER THE OPERATION

Dressings are removed a week afterwards, supportive bras are worn for 6 weeks and the scars are taped for 6 months to obtain the best possible result. Scars take 1 year to mature to pale soft lines. Recovery periods vary according to the extent of the operation but most patients are able to drive themselves for short distances in a comfortable vehicle after 7 days and return to work at 2 weeks

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postop. Arms may be lifted fully from 3 weeks onwards and strenuous physical activity and sport allowed after 6 weeks. Patients from abroad should stay in our area for 2 weeks afterwards.

COMPLICATIONS

Possible complications include postoperative bleeding, wound infection, tissue fluid oozing or crusts on the wounds which may take several weeks to clear. A small percentage of patients will have changed nipple/areola sensation or numb nipples after breast lift and some patients will notice temporary numbness of skin under the breasts for the initial few months. Scars are very obvious at first, are associated with puckered skin and ears at the scar ends, all of which improves with time. Some patients will need minor revision of scars after 6 months if they have not settled sufficiently. Exact symmetry cannot be guaranteed and small differences between the breasts may remain. Breast-feeding is possible provided that nipple sensation is present.

Serious complications such as wound abscess, open wounds requiring secondary repair or nipple/areola necrosis are rare and more likely in patients who are significantly overweight, are diabetics or smokers.

Breast lift results are dramatic and patient satisfaction levels are high. The operation results in a marked improvement in one's figure and makes swimwear and clothes fit better. Breast lift patients are usually delighted with their result and the procedure is often recommended to others. The results are long lasting but the effect of gravity and ageing on one's breasts continues over time.

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