



AESTHETIC BREAST SURGERY

A **breast augmentation (implant)** does not change the breast shape - it just fills it.

A **mastopexy** is a breast lift.

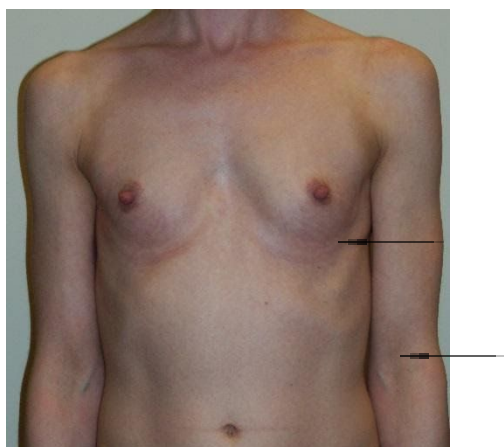
A **mastopexy-augmentation** is a breast lift with an implant added.

A **breast reduction** involves removing excess breast tissue and it includes a breast lift.

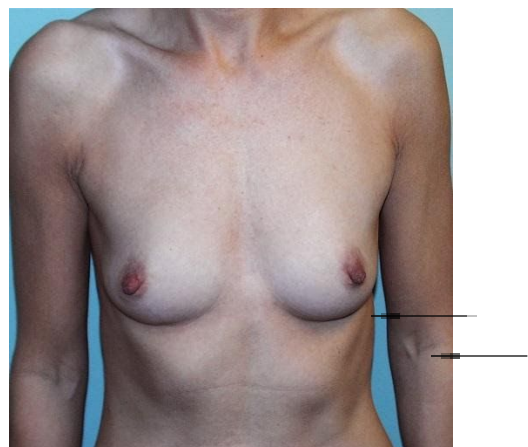
But patients need to understand what a “lift” actually means. **Plastic surgeons cannot move the breast footprint up higher on the chest wall.** We can only remove excess hanging breast tissue or rearrange it slightly. We can add an implant if the upper pole of the breast is deficient.

FOOTPRINT:

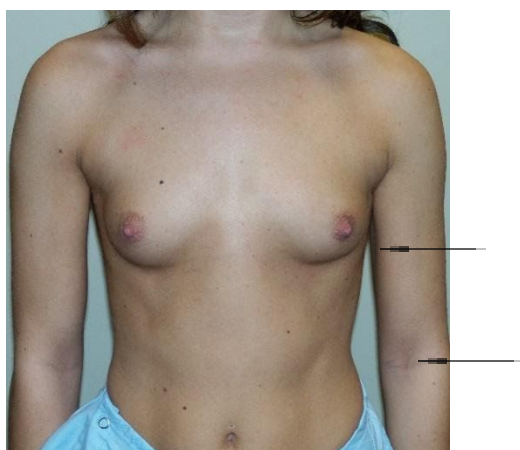
We will look first at your “**footprint**” or where your breasts are attached to the chest wall. Some patients are “**high-breasted**” and some patients are “**low-breasted**”. This cannot be changed.



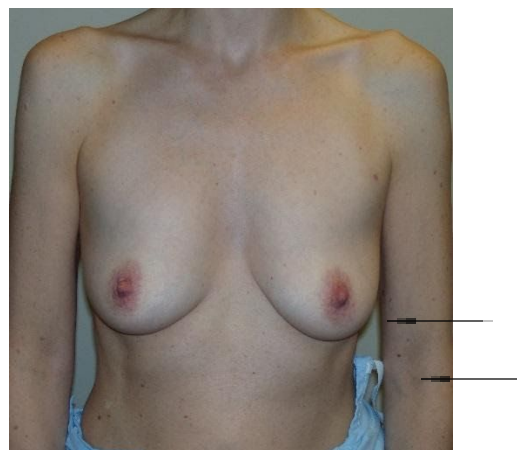
“High-breasted”



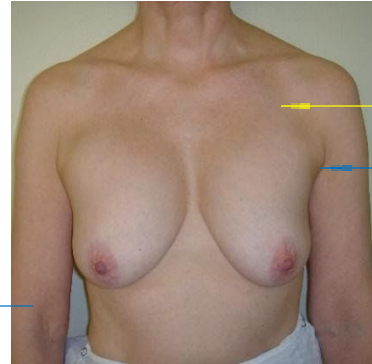
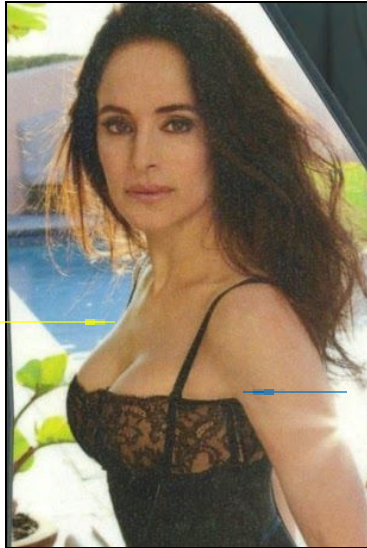
“Low-breasted”



“High-breasted”



“Low-breasted”



There is chest between the collar bones and the breasts. The double push-up look cannot be achieved by plastic surgeons - it would look abnormal without clothes on. The top of the breasts (real or fake - black arrow) should never sit higher than the armpit crease (blue arrow).



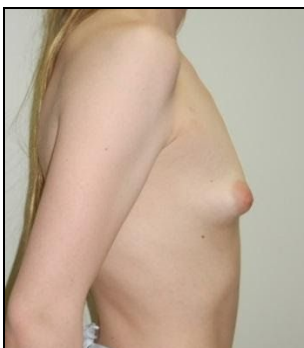
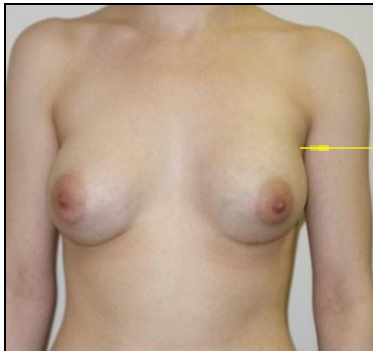
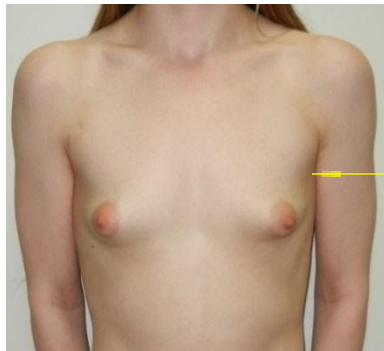
Beautiful women have some flat chest between the collar bones and the top of the breast. The double push up brassiere system has made patients hope for more upper pole fullness than is either realistic or desirable.

BREAST AUGMENTATION:

A breast augmentation is used to fill out the existing breast behind the existing nipple position. The final breast shape will be determined by the existing shape. The footprint of the breast cannot be changed. When an implant is added the upper breast border is elevated on average only 2 cm. The other borders will be filled out as needed by the implant.

It is important for patients to understand that the nipple is not moved in a breast augmentation alone (see the “mastopexy-augmentation” section where an implant is combined with a breast “lift” where the nipple is moved. Whenever the nipple is moved, there is a scar completely around the areola and down to the fold beneath the breast. Whenever an augmentation alone is performed, the scar is in the crease underneath and the nipple location (high or low, outwards or inwards) will not change.

The implant needs to be “centered” behind the existing nipple position - it would make no sense to place the implant high (even if we could) when the nipple is low.



Before

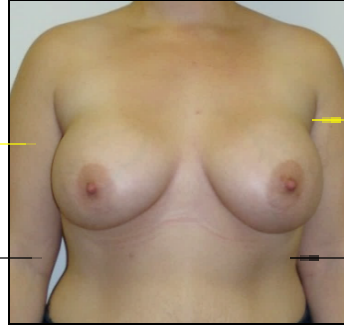
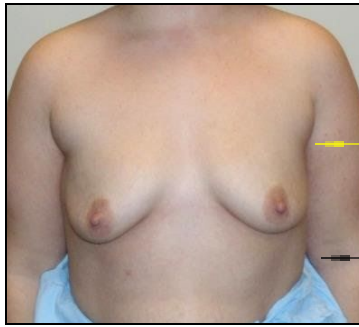
One year after

This 20 year old woman had a tuberous type of breast shape (constricted base) and she underwent a breast augmentation with smooth walled silicone gel breast implants **370gm** each. The implants were placed behind the breast tissue **above the muscle**.

She is shown at one year after surgery.

Note that the shape has remained the same - just filled.

She was 5'9" tall and weighed 130lb.



This 27 year old patient underwent breast augmentation using cohesive silicone gel breast implants behind the breast tissue and **above the muscle**. Both implants were **540gm** each.

She is shown before surgery and at 2 months after surgery.

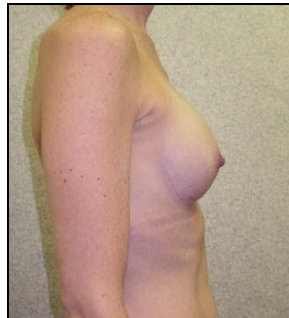
Note that the shape has remained the same - just filled.

She weighed 167 lb, and was 5'3" tall.



Before

2 months after



Before

265 cc

350 cc

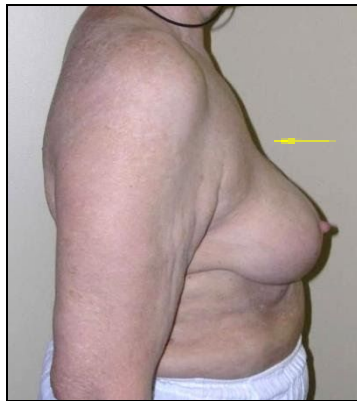
This 39 year old patient had bilateral breast augmentation with cohesive silicone gel breast implants placed both behind the breast tissue and **under the muscle**. Initially both implants were **265 cc** each and later they were increased to **350 cc** each. **Note that the shape has not changed - just filled. The larger implants bottomed out down the chest wall.** She was 5'5" tall and weighed 115 lb.

BREAST REDUCTION:

A breast reduction - or a breast lift alone - will not fill the upper pole. The breast shape can be improved with more projection (perkiness) and the angle that the breast takes off from the chest wall can be improved. Note below that the upper breast border (yellow arrow) has not changed. The breast reduction has been achieved by removing the lower hanging breast tissue.

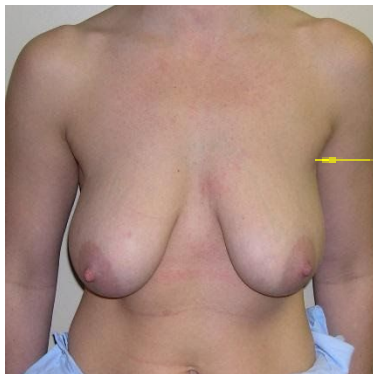


Before

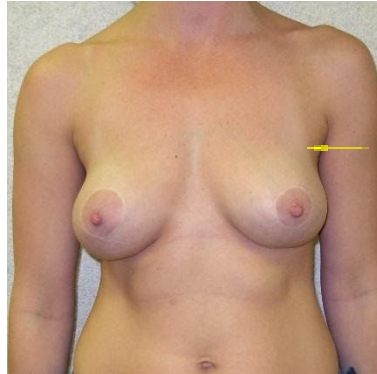


After

A breast reduction does not change the footprint - it just removes the hanging lower breast and moves (not removes) the nipple to a better position.



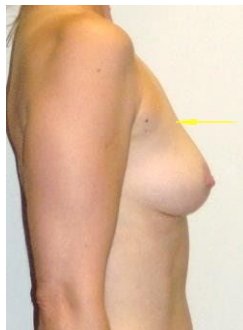
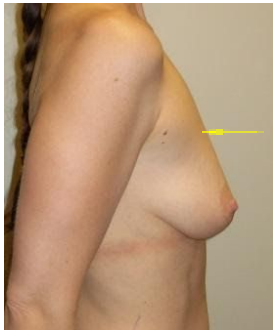
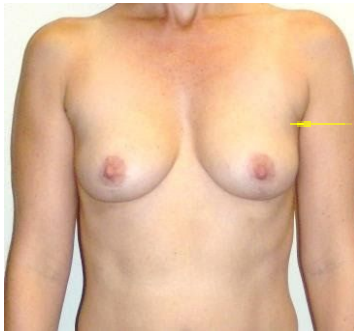
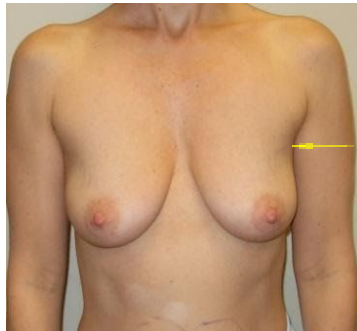
Before



One year after

Different patient: A small breast reduction can give a nice breast "lift" but note that the result was achieved by removing the hanging lower part of the breast. The nipples were repositioned ("moved" not "removed") leaving lollipop shaped scars (which are barely visible in this patient). Note, however, that the footprint has not changed and the breasts were not "lifted" up higher on the chest wall.

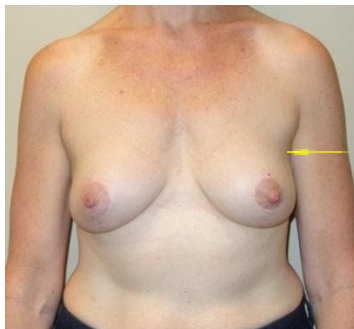
BREAST LIFT (MASTOPEXY):



Before

One year after

This patient had a breast lift (mastopexy) with very little breast reduction. The lower breast tissue was rearranged to the mid portion of the breast (we have not figured out how to move it higher) so that she has a better breast shape with more projection but the upper breast border has remained unchanged. The skin envelope was reduced, the breast tissue was “moved” and the nipple was also moved leaving a lollipop type of scar around the areola and down to the breast crease.



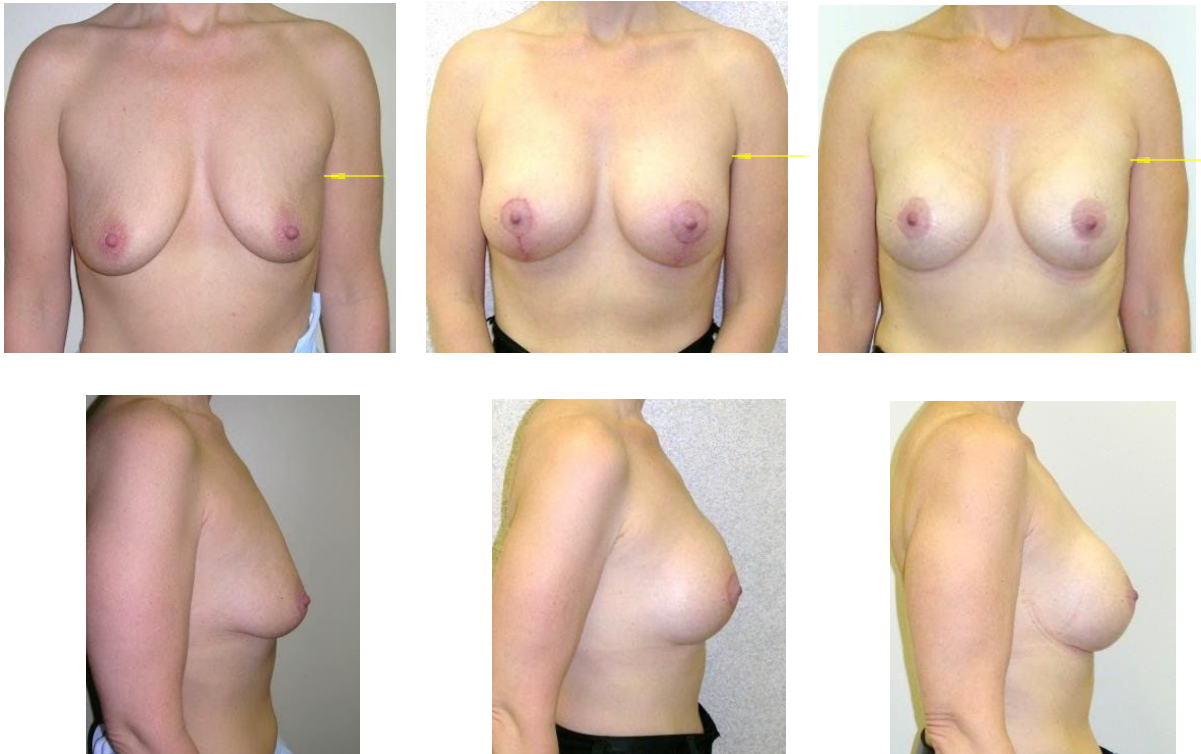
Before

5 years after

This 45 year old patient had a breast lift (mastopexy) with only skin removal. The lower breast tissue was rearranged to the mid portion of the breast. She has a better shape with better projection but the upper breast border has remained unchanged. The skin envelope was reduced, the breast tissue was “moved” and the nipple was also moved leaving a lollipop type of scar around the areola and down to the breast crease.

She is shown at 5 years after her surgery.

BREAST LIFT WITH IMPLANT (MASTOPEXY-AUGMENTATION):



Before

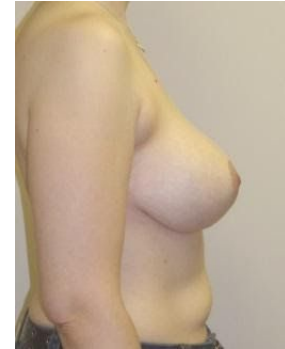
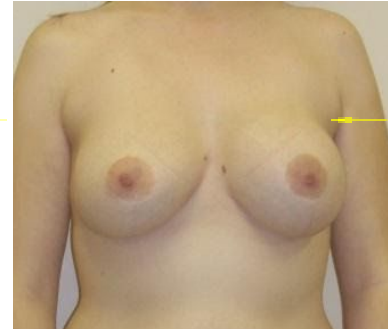
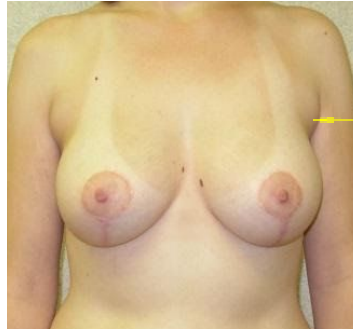
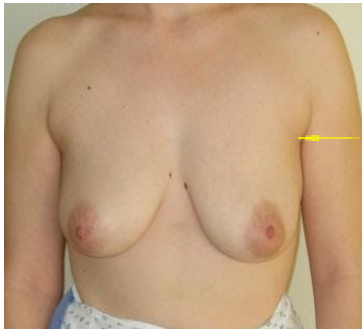
2 months after

5 years after

This patient had a mastopexy-augmentation with **both a lift (to correct asymmetry) and a 210 gm breast implant placed above the muscle.**

Note that the early (2 months) middle photo looks higher than the later (5 years) photo. Patients are always disappointed after the first few months when the breast drops a bit. The nipple position could not be made more symmetrical without leaving a scar around the areola and down to the crease. It may seem obvious, but nipples cannot move unless they are “moved” surgically and this can only be achieved with scars.

A lift with an implant does not raise the breast footprint but does fill the upper pole of the breast and gives a shape that is less saggy than the result with an implant alone. An implant added to a breast lift can be used to make the breasts larger, but it is sometimes used just to add volume to shape the upper portion of the breast. Sometimes the patient actually wants a smaller breast but one with a better shape.

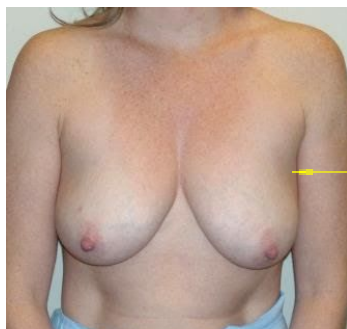


Before

5 months after

2 years after

This patient had a mastopexy-augmentation with 322 gm implants above the muscle. She is shown at 5 months and 2 years after surgery. In order to assess the upper pole fill and the "lift" you can use the moles over her breastbone as a reference point.



This patient had a mastopexy-augmentation using 400 gm implants above the muscle. She is shown at one year after her surgery. Note that the breast implant filled the upper pole but the "lift" did not lift the breast higher on the chest wall - it raised the nipple position and prevented the breast from drooping lower (which would have happened with just an augmentation alone). When the nipples sit low on the breast mound, they look better "lifted" - which means adding a lollipop scar around the areola and down to the fold or crease under the breast.



Before

One year after

BREAST AUGMENTATION ALONE VERSUS BREAST LIFT WITH AN IMPLANT



Before

2.5 months after

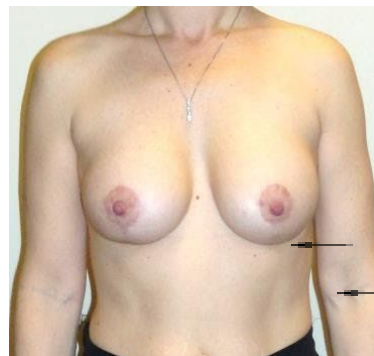
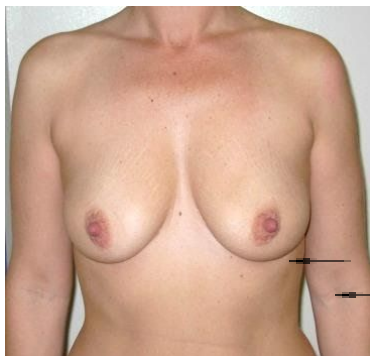
This 35 year old patient underwent breast augmentation using cohesive silicone gel breast implants behind the breast tissue and **above the muscle**. Both implants were **335gm** each.

Note that when the nipples are low, the implant also needs to be in a lower position. The implant needs to be centered behind the existing nipple. A breast augmentation alone will not move the nipple.

This patient would have had a better shape with a breast lift but this would result in lollipop scars.

She is shown before surgery and at 2.5 months after surgery.

She was 5'4" tall and weighed 105lb.



Before

18 months after

This patient had a mastopexy-augmentation using silicone gel breast implants (222 gm) above the muscle. She is shown 18 months after surgery. She could have had an implant alone but the breasts would have dropped lower - even closer to the elbow crease.

The breast lift resulted in a higher breast but also required lollipop scars.