

## BREAST AUGMENTATION

APPROXIMATE COST: \$3,600-\$6,588

*There may be additional changes for surgical facilities and anesthesia. Be sure to request this information.*

APPROXIMATE TIME UNTIL COMPLETELY HEALED: One to three months. The scars will take at least a year to fade out to their minimal color.

### BEFORE YOU SET A DATE

Prior to surgery be sure you meet with your doctor at least three times to be absolutely certain that you are both clear and in agreement as to your choice of incision lines and the desired shape and size of the breasts you envision. The best way to communicate the type of breast you want is to bring in pictures from *Playboy* or other men's magazines that exemplify your desired final results.

Saline inflatable implants are presently the only legally available breast implants. There are a couple of problems with these implants, though, that you should be aware of. First, because there is a valve involved, the saline can leak out. This is not medically dangerous. But as the saline leaks the breast will become smaller, eventually requiring another surgical procedure to replace the fluid and correct the diminished size. You should know that with saline inflatable implants, the possibility of more surgeries for adjustment does exist. If silicone implants stay off the market, the saline implant manufacturers will most likely produce an implant without a valve, eliminating this leakage problem.

The first decision you and your doctor will make concerns placement of the incision line through which the implant will be inserted. You have three choices: under the armpit, in the crease under the breast where it meets the body or around the lower half of the nipple base (the areola).

Implanting through the armpit is one choice, but you will be left with a slight visible scar, and apparently there's some real discomfort upon awakening from anesthesia. The muscles under the arm tend to spasm, but a little pain medication will get you through very nicely until the spasms pass. It takes the longest of all the choices before the breast look nicely

Implanting through the under-breast crease is also fine, but it will leave a tiny scar when you're lying down.

Entrance through the lower part of the nipple-base seems to be the best bet for the least noticeable scar. Women who have never had children often have very small nipples, which can limit the doctor's access. However, the inflatable implant seems to work nicely in these cases.

The second decision you must make, with the advice of your surgeon, is whether the implant should be placed under or above the pectoral (breast) muscle. Normally surgeons prefer to have

as much tissue as possible covering the implant, so then tend to want to place it under the muscle. The downside to this choice is that it can be quite uncomfortable for three or four days following surgery. But so what? If it's the better choice for your overall end result, it is reasonable to decide to control the discomfort with pain medication for a few days.

If you are a middle-aged woman who has nursed children and has sagging breasts, it is advisable to place the saline implant above the muscle. The implant would raise the hanging breast up into a more attractive position. If for some reason this choice is not possible, the fallen breast type of patient could have the implant placed below the breast muscle and also have breast reduction surgery. But why go through two separate procedures if it's not necessary?

If you are a very thin woman, it is not advisable to place the implant above the muscle. In thin women the implants seem too obvious and detectable unless they are placed under the muscle, with the extra tissue coverage to soften the final look of the breast.

Athletes with highly developed pectoral muscles, such as swimmers, gymnasts or weightlifters, may not be good candidates for implants. If placed below an extremely developed muscle, the implant just doesn't look natural, and when positioned above a developed muscle it looks fake and severe.

It's very important to carefully discuss implant placement with your doctor before surgery to ensure that you'll make the appropriate choice for your lifestyle.

## PRESURGICAL INSTRUCTIONS

- You will be given blood and lab tests prior to your surgery. Take no aspirin or aspirin-containing products; they can cause bleeding and bruising. See list of medications to avoid for two weeks prior to your surgery and one week after. You may take Tylenol.
- If you take medication daily, notify your doctor. Also inform him if you develop an illness, a cold or any skin infections within a week of your surgery.
- If you're a smoker you should clearly understand that nicotine could impair and delay healing. Most offices will suggest quitting a week to ten days before surgery, a week post-op. If it were me, I'd stop smoking a minimum of three weeks prior to surgery, and not touch a cigarette for a full month post-op. Who needs to be left with scars worse than normal and other complications as a result of smoking through the pre- and postsurgical period?

## THE DAY BEFORE SURGERY

Do not eat or drink anything after midnight.

## THE DAY OF SURGERY

- You may rinse and brush your teeth, but *do not eat or drink anything*. Some offices may ask you to take pills with a small amount of water the day of surgery. Do not bring any jewelry or valuables. Wear some warm PJs that buttons in the front, and wear flat shoes with nice and warm socks. *No tight fitting clothes.*
- *Someone must drive you home the day of your surgery and stay with you the first night.*
- Postoperative instructions regarding activity, medications and office visits will be given following your surgery.

## THE SURGERY

A breast augmentation usually takes an hour and a half to two hours. Add an additional half-hour for preparation and anesthesia. There are normally four people in the operating room with you: the surgeon, the anesthesiologist, and two surgical nurses. You will be given an intravenous anesthetic. Antibiotics will also be administered through the I.V. to protect against infection.

Entrance to the breast area is made through one of the choices previously discussed: under the arm, the crease under the breast or the bottom half of the nipples base. Working through the incision, the doctor lifts the breast tissue up and pushes the skin down to create a pocket either under the breast muscle or above it, depending on your choice of implant placement.

The incision lines are closed with sutures.

## POSTSURGICAL INSTRUCTIONS

1. Rest at home for one or two days following surgery. Then engage in only very light activity for at least ten days.
2. Do not resume aspirin products for at least ten days after surgery.
3. Approximately seven days after your breast surgery, a return to the office for suture removal will be scheduled.
4. Strenuous activity such as sports, aerobics and any type of manual labor should be curtailed for one month. Activity of the upper extremities should be restricted to the limits of comfort for six weeks. Avoid lifting anything more than five pounds for the first two weeks following surgery. No driving, no sudden movements, no heavy housework, no reaching for top shelves for at least ten days. If you blow your hair dry, keep the dryer at a low angle for a couple of weeks. Thereafter, gradually resume normal activity.

## THE RECOVERY PERIOD

You will probably experience some pain the first three to four days following surgery and remain sore for about two weeks. Pain medication will help you through the first four days, and Tylenol should ease the remaining soreness. Swelling and bruising usually clears up within two or three weeks. The incision lines will rise up and turn bright pink for several weeks.

## PROBLEM SIGNS

If there is any bleeding via the incision lines or any indication of infection, call your doctor at once. Look for ballooning, pinkness, warmth, to a greater extent and swelling as problem signs. Any pain could indicate blood clots that would require surgical removal.

Be aware that no woman's breasts are perfectly matched; there are always differences in size and shape. Most breast augmentation procedures may enhance these differences, even if your surgeon uses different-sized breast implants. While healing from surgery, asymmetry of the breasts may occur due to one side-healing differential than the other. If so, an additional surgery would be required to correct the problem.

If your scars begin to really thicken and turn red, you may be developing a keloid, which is a severe thickening of scar tissue. Call your doctor *immediately*. He will give you a cortisone cream or tape to apply to the scar, or he'll use an injection that will most probably correct the problem. If you wait too long, the scar won't be correctable, so report the problem as soon as you see it.

Some hardness may develop in the months following surgery. Your doctor may instruct you on a program of breast massage to induce softening. With breast implants, you run the risk of excessive scar tissue forming around the implant. This is called "capsular contracture," and it causes the breast to become unnaturally hard. A second surgery is required to correct this problem.

## MAKEUP TRICKS

If your scars are completely healed and dry, they may be safely camouflaged approximately one week following suture removal with a foundation that matches your skin tone. Dermablend, Physicians Formula Velvet Film, Max Factor Pan Stick, Clinique Continuous Coverage, Prescriptives Camouflage Creme, Cover Mark or Nature Cover all are good choices for scar coverage.