



Breast reduction

Introduction

Reduction Mammoplasty is the name given to the surgical treatment designed to overcome a number of problems caused by excessively large and pendulous breasts.

The best candidate

The breasts are naturally too large through the development of excessive breast tissue. This may have caused stretching and relaxation of the supporting breast ligaments that results in sagging and loss of the desired feminine outline.

This condition can be as psychologically disturbing to a woman as extremely small breasts, causing feelings of self-consciousness and embarrassment. However, there are physical problems associated with excessively large breasts - breast discomfort, shoulder and neck pain and backache are prevalent.

Participation in various athletic activities is limited. If the condition is left unchecked into later maturity it may affect the posture through strain and a cause a possible curvature of the spine. Lesser problems, but very still very frustrating, relate to the need for special supportive undergarments, and difficulty in finding suitable clothing to fit in readily available sizes. Successful treatment of this condition by means of surgery is not new, and has been practised for more than fifty years.

How is Reduction mammoplasty performed?

The operation is designed to reduce, uplift and firm the breasts. It involves the reduction of breast volume, removal of the breast tissue and the restoration of a normal contour consistent with the patient's skeletal proportions to give a natural appearance. It also involves the repositioning of the nipple to a level consistent with the new breast shape. Results are very good.

With this operation the ability to breast-feed is affected. Nipple sensitivity may be partially or completely lost depending on the treatment selected. Sometimes numbness occurs related to the scar areas. It is unlikely but there may be some asymmetry of the breasts, but it should be noted that no two breasts are identical, even in the normal state and that absolute perfect symmetry is not a reasonable expectation. It is rare but scars can sometimes widen, and may need revision at a later date.



The first very important step in this, as in any, treatment, is the consultation with the surgeon when patients are very carefully assessed. Developing a patient's personal understanding of what can be achieved is vital in achieving effective results. Surgeon and patient must aim to develop a mutual understanding.

The operation is performed under general anaesthetic and takes about two to three hours. It necessitates a one or two night stay in the Hospital. In most cases, incisions are made in the fold under the breast or around the pigmented nipple area (the areola) in order to minimise scarring. However, there will be scars, even if they are hidden in natural contours but most will fade and improve with time. The position of these, together with any other questions you may have, should be fully discussed with your surgeon at consultation.

Recovery

Immediately after your surgery your new breast size will be apparent, but you must understand that the final shape may take around six months to emerge.

After the operation there may be some discomfort, but pain relief medication can be administered as required. A dressing is worn post-operatively and sutures will be removed at your post op visit. It is most important to follow the post operative instructions carefully. Physical activities must be restricted for at least six weeks, and supportive garments worn as instructed. It takes about a year for scars to fade and for the breasts to settle fully into the new shape.

Results

Finally, results of this operation are extremely successful and rewarding for patients. A typical comment afterwards is "If I had known how easy it was, I would have had it done earlier".

This leaflet has been prepared to give a basic understanding of the procedure before a consultation takes place, and to cover many of the questions frequently asked about this type of cosmetic surgery. Final decisions should not be made until an individual assessment has taken place with the surgeon.

There is no obligation on the part of the patient to undergo surgery by attending for consultation. If you have any further questions or would like to arrange a consultation please do not hesitate to call us.