

MASTOPEXY (BREAST LIFT)

GENE SLOAN, MD, FACS



Aesthetic
PLASTIC SURGERY
Beauty. Refinement. Confidence.

STATISTICS

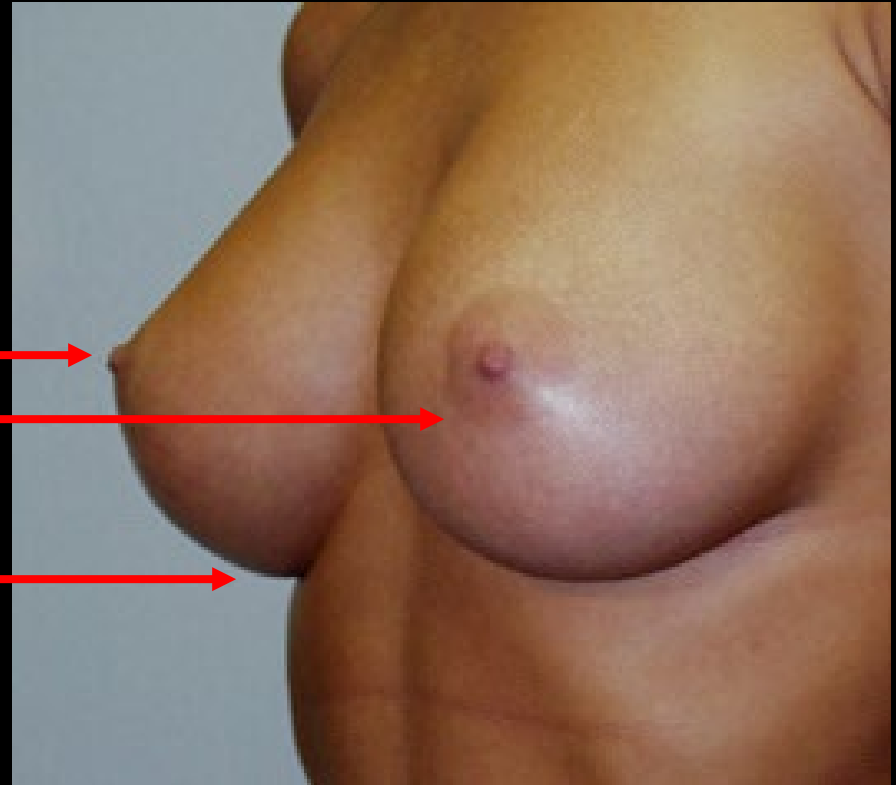
	2000	2009	2019
BREAST AUGMENTATION	203,000	312,000	281,000
BREAST LIFT	45,000	98,000	147,000



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ESSENTIAL ANATOMY

- Nipple
- Areola
- Inframammary Crease



MAMMARY PTOSIS (SAGGING BREASTS)

- Nipple and breast tissue below crease
- Excess skin relative to breast volume
- Skin is thin with decreased elasticity
- Supporting ligaments are stretched
- Upper breast flatness
- Can sag a little or a lot



MAMMARY PTOSIS

- Discrepancy between **breast skin envelope surface area** and **volume**
 - Skin = DDD
 - Volume = B
- Nipple (N) below IMC (C)
- Lower breast skin against chest
 - Glandular ptosis >2.5 cm
- Nipple sits very low



“DO I NEED A LIFT?”



NO



MAYBE



YES

“DO I NEED AN IMPLANT?”

- Lifted and Smaller – Lift Only
- Lifted and Same Size – Lift Only
- Lifted and Larger – Lift and Implant
- Lifted and Upper Pole Fullness
 - Lift, Tissue Reduction and Implant



GOALS

- Enhance Appearance
- Maintain Breast Function, Softness, And Sensitivity
- Improve Symmetry
- Optimize Breast Cancer Surveillance
- Minimize Re-operation Rate
 - Short and Long Term



SURGICAL OPTIONS

- Breast implant only
- Crescent mastopexy
- Periareolar mastopexy
- Vertical scar mastopexy
- Anchor (vertical and horizontal) scar
- Augmentation and mastopexy



BREAST IMPLANT ONLY



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CRESCENT MASTOPEXY

- Repositions nipple superiorly
- Always with implant



CRESCENT MASTOPEXY

BREAST AUGMENTATION / LEFT CRESCENT MASTOPEXY



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PERIAREOLAR MASTOPEXY

- Repositions nipple superiorly, flattens
- Almost always with implant



PERIAREOLAR MASTOPEXY

TUBEROUS BREAST



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VERTICAL MASTOPEXY

- Tightens lower pole



VERTICAL MASTOPEXY



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ANCHOR (WISE) MASTOPEXY

- Most skin removal
- Usually without implant



ANCHOR (WISE) MASTOPEXY



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“DO I NEED AN IMPLANT?”

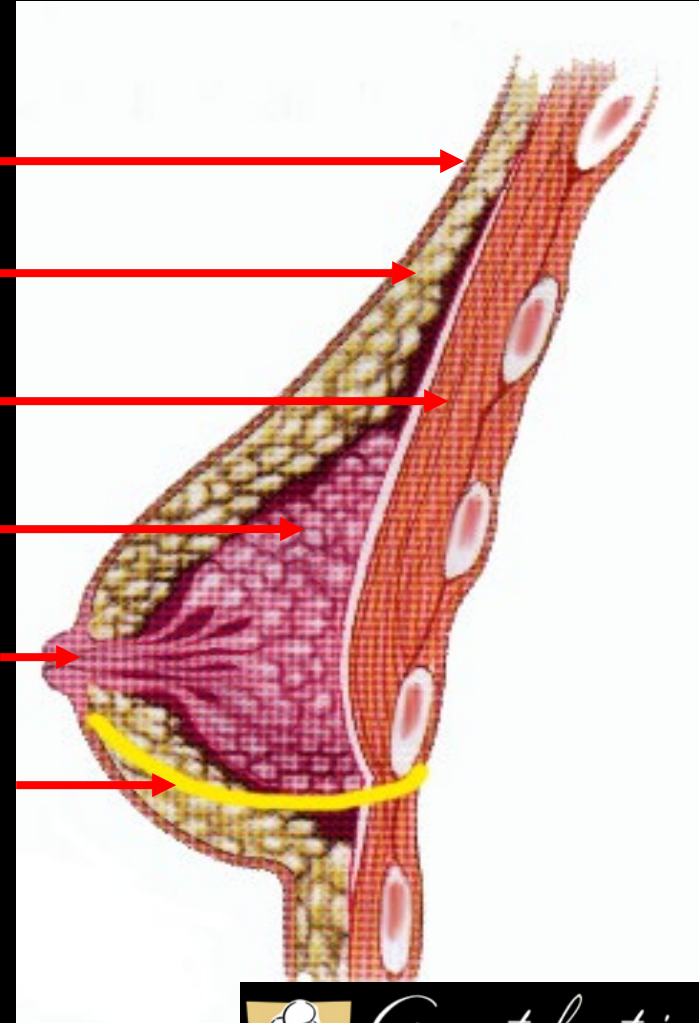
CONSIDERATIONS

- Implant Increases Breast Size and Weight
- Breast Lift Reduces Size of Skin Envelope
- Breast Lift Temporarily Weakens Bottom of Breast
- Lift and Implant
 - Single Stage (Minimal Lift)
 - Separate Stages (Major Lift)
- Fat instead of implant?



ESSENTIAL ANATOMY

- Skin
- Fat
- Pectoralis Major Muscle
- Breast Gland
- Lactiferous (Milk) Ducts
- Sensory Nerve To Nipple



BREAST IMPLANT CHOICES

- Outer shell silicone
- Filler
 - Saline
 - Silicone gel
- Smooth or textured surface
- Round or anatomic shape



IS EXTRA SUPPORT NEEDED?

- Breast lift reduces the amount of skin but does nothing to strengthen the skin.
- Extra support sometimes needed.
- GalaFlex
- GalaForm



PROCEDURE

- Outpatient surgery
- General anesthesia
- Procedure lasts 1-4 hours (Avg 2.5)
- Recovery room for 1 hour
- Need caregiver first 24 hours



RECOVERY

- Surgical bra for 4 weeks
- Off work 1 week
- No driving 1 week
- No sutures to remove
- Tape scar for 3 months
 - Change every 2 weeks
- No restrictions after 3 weeks



TRADE-OFFS

- Permanent fine line scars
- Nipple\areola usually made smaller
- Altered nipple sensation
- Cannot totally eliminate stretch marks
- Skin tightness may limit implant size
- Implant tradeoffs
- Sagging can recur
- Breast shape continues to change with age



RISKS

- Upper pole flatness without implant (or fat)
- Altered lactation
- Minor wound healing problem
- Nicotine use greatly increases risks of:
 - Nipple loss
 - Poor scars
- The larger (heavier) the post-op breast, the more likely it is to sag again, whether natural or implanted.



OUTCOME

- Very high satisfaction rate
- Improves appearance of breast
- Does the lift justify resulting scar ?
- Does insertion of an implant to give upper pole fullness and shorten the scars justify the trade-offs associated with an implant ?



LIFTED AND SAME SIZE



LIFTED AND SMALLER



LIFTED AND LARGER



LIFT w UPPER POLE FULLNESS



SEVERE ASYMMETRY

2 STAGE



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