BREAST AUGMENTATION



Breast augmentation, technically known as breast augmentation, is a surgical procedure to improve the size and shape of a woman's breast in the following situations: to improve the silhouette of the woman who thinks her breasts are too small to correct the Breast reduction that occurs after some pregnancies to correct a difference in size between both breasts as a reconstructive procedure after breast surgery.

Who is the ideal candidate to undergo a breast augmentation?

The ideal candidates to undergo breast surgery are those healthy, emotionally stable people who understand the results that can be obtained after surgery.

Many women want an improvement after a pregnancy or breastfeeding. Although there is no risk that the increase will affect future pregnancies, you should know that the breasts can re-take something after a new pregnancy.





During the first consultation, the plastic surgeon will evaluate the size and shape of the breasts, the firmness of the skin and their general state of health. A breast examination will also be performed and a mammography study will be requested. The different surgical techniques will be explained, the size and shape of your breasts and the options or combination of procedures that are best for you will be discussed.

You must express your expectations in a sincere and frank manner, so that the plastic surgeon is also frank and shows you the available alternatives for your problem, with the risks and limitations of each of them. It will also explain what type of anesthesia will be used, the need or not to enter the clinic where the surgery is performed and the costs of the intervention.

Breast augmentation for aesthetic purposes is not included in the catalog of Social Security benefits; nevertheless, the important mammary asymmetry and the reconstruction after surgery for breast tumors are.

Do not forget to tell if you are a smoker or take any medication or vitamin, the number of previous pregnancies and if you plan to become pregnant again or breastfeed. Do not hesitate to ask any question that may arise, especially those related to your expectations about the results.



Preparing for surgery

You will be instructed on how to prepare for surgery, including rules on food and liquid intake, tobacco or taking or suppressing medications, vitamins and iron supplements. In breast augmentation it is not necessary to transfuse blood during surgery. Also, make sure that a family member or companion can take you home when you are discharged and that, if necessary, they can help you a couple of days.

Surgery and anesthesia

The breast augmentation is done through a small incision that is placed, depending on the patient's anatomy: around the areola or in the groove under the chest. Through this incision the breast tissue is lifted, a pocket is created and the prosthesis is placed, directly under the breast tissue or under the pectoral muscle.

You can place drainage tubes that will be removed in a few days and a dressing or bandage on the breasts. The procedure lasts between 1 and 2 hours.





After surgery

After breast surgery it is normal to find something tired a few days, but you can live almost normal life at 24-48 hours.

Most discomforts are well controlled with the medication prescribed by your plastic surgeon, although the breasts may hurt a couple of weeks.

The bandage or dressings will be removed in a few days, being replaced by a special bra, which you should wear as directed by your surgeon. It is normal to have a burning sensation in the nipples during the first two weeks.

The stitches are removed between 7 and 14 days; The result takes time to see and it can take several weeks to observe it.

After a breast augmentation you can return to work in a few days, depending on the activity you perform. Follow your surgeon's instructions about what exercises you can perform.

Your breasts will be more sensitive than normal for 2 to 3 weeks, so it may be wise to avoid excessive physical contact until 3 or 4 weeks.

At the beginning the scars will be pink, aspect that will improve continuously from the 6 weeks.





The appropriate mammographic controls for each woman according to their age can continue to be performed, although the existence of the prosthesis should be noted. The operation will not limit your ability to breastfeed if you become pregnant

Are there any risks?

In breast augmentation, the most frequent complication is capsular contracture, which occurs when the internal scar that forms around the implant contracts excessively, causing the breast to become harder.

It can be treated in various ways, sometimes requiring the removal of said internal scar, and even replace the prosthesis.

Another complication, typical of any surgery is the hematoma that only in specific cases requires a new intervention to eliminate the accumulated blood. A small percentage of women may have an infection around the prosthesis, usually in the first weeks after surgery.

Some women notice the nipples more or less sensitive, and even without sensitivity. These changes are usually temporary, although in a few cases they will be permanent. There is no evidence that breast prostheses affect fertility, pregnancy or lactation.





It is extraordinarily infrequent that the prostheses can break, causing the contents to come out of their capsule. When the prosthesis is filled with serum, the fluid is rapidly reabsorbed without causing any damage, reducing the volume in a few hours.

If it is filled with silicone, two things can happen: if the capsule formed by the organism does not break, you will not notice any change; if it has broken, especially when it has been subjected to a lot of pressure, the silicone comes out decreasing the volume of the breast.

With both types of prostheses a new intervention will be necessary to replace it.

There is no proven scientific evidence that prostheses cause breast cancer or connective tissue diseases. The placement of a prosthesis does not prevent the realization of mammograms.

There are few cases of a lymphoma-like tumor in the implant coating, in our country there are few cases that are reported and there is not much information because it is very rare.



Although you can be given a guarantee in case of rupture of your implant, you can not guarantee the reaction it may have on your body, so it can not be guaranteed that they will last a lifetime, so you should think about a change with over the years and keep in touch with your plastic surgeon.

Results

The results after breast augmentation tend to be very pleasant for the patient. Periodic check-ups by your plastic surgeon and periodic mammograms (if appropriate for your age) will ensure that if there are any complications, it is detected on time and resolved.

Breast augmentation surgery: summary

The only definitive method to achieve an increase in breast volume is through the implantation of a breast prosthesis behind the existing gland. There are other methods that use tissues of the body and that are used, above all, in Reconstructive Surgery.





The breast implant can be placed behind the gland itself and in front of the pectoral muscle, or behind the muscle, depending on each case. Normally, the incision to implant the prosthesis is located in the submammary groove (in some cases this incision is made around the areola), performing the operation under general anesthesia.

The prosthesis that is used in almost all cases is the rugose silicone membrane filled with gel, which has dramatically reduced the so-called capsular retraction (the chest was hard, spherical and sometimes annoying) at percentages lower than 2%. Other possible local complications, such as bruising, infection, intolerance to sutures, etc., will require adequatetreatment, but have an extremely low incidence.

This is general information ask your plastic surgeon about your particular case.



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