

BREAST AUGMENTATION

Breast augmentation is one of the most popular procedures in cosmetic surgery. If you consider having this surgery, you need to know a few things about it.

1) What happens during the initial consultation?

- You will meet your surgeon and will tell him exactly what you want, why you want it and for how long.
- You will be asked to give information about your previous operations (cosmetic and non cosmetic), your health condition, your current medications, your allergies to medications, if you are a smoker or not..
- You will be asked to say what is your current bra size and which one you are looking for
- Your surgeon will examine you, and will take some measurements.
- Then, the whole operation will be explained to you in details, including:
 - the type of anesthesia (sedation + local or general anesthesia)

-the incisions (length (4 cms), position (submammary, periareolar, axillary), and outcome of this scar

-the type of implants used (cohesive gel of silicone/ 3 different shapes (round, conical, or tear drop shape), / 2 different surfaces of the shell (textured or smooth), / different sizes, different projections (low, medium, and high)

-the type of pockets (subglandular, submuscular, dual plane)

-the drains

-the type of sutures used, the type of dressing

As you are usually staying a few hours or overnight in the clinic, your drains will be removed just before discharged, and your big dressing change for a smaller one. Then, you are supposed to use a sport bra with a strap across the upper chest and to keep it on for 3 weeks, day and night

2) What happens when you decide to go ahead with your surgery?

You call the office ; we book the hospital for you.

It is always recommended to see your surgeon for a second consultation.

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Before the operation, you are not supposed to take aspirin or similar tablets. It is recommended to stop taking contraceptive pill 1 month before the surgery.

You will have to stop eating, drinking and smoking 6 hours before the operation.

You will see your surgeon before going to theater and have time to ask him any question you forgot to ask before. He will ask you to sign a consent form, where all the possible risks are mentioned. He will then do some markings on your skin and take some before photographs (they will stay in your file and are totally confidential)

-Then, you will meet the anesthetist and you will be taken to theater.

Your operation takes less than one hour. You will spend half an hour in recovery, before being taken back to your room. You will be discharged a few hours later and asked to come back to the clinic the next morning, for a check up (sometimes, you might stay overnight)

3) How do we decide the size of my implants, ..?

The surgeon will take in consideration your current size, your wish and also your measurements and the quality of your skin.

You can try different implants sizes in the consultation room, but this will only give you a rough idea.

There is obviously a limit to what can be done, if you want your breasts to look natural, and not sag in a short period of time

The size you have decided before the operation can, exceptionally, be changed during the operation, if the surgeon considers that the original size is not appropriate

4) What happens after the surgery?

-Back home you are supposed to take it easy: no sport, no heavy lifting for 3 weeks

-You cannot shower your breasts for one week, you cannot drive for one week

-You might be in pain and will need to take some painkillers. You will be told to take some antibiotics for one week

-Your dressing needs to stay clean and dry. If needed, it can be changed by a nurse every other day, before you see your surgeon

-You are supposed to come back to the clinic after one week for the first wound check (but you can contact the office anytime in between), and then you will see your surgeon on the second week. After this first post operative check up you will see your surgeon, one month, 3 months and 6 months after the

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surgery. Then, it will only be once a year

Your stitches will be trimmed after 2 weeks.

The initial swelling will disappear within 3 weeks, which is the time you need, before seeing how big you are going to be

5) What are the risks of this operation?

False expectations: -there is always a limit to what can be done, and it is not a good idea to compare your breasts with someone else's breasts: every patient is unique and your body can only accept reasonable size implants

— The goal of an implant is to augment the size of a breast, not to lift it. If a breast is sagging, an uplift might also be required

Apart from the usual side effects (pain (3-5 days), swelling, numbness (3 weeks), there are some potential risks, which are still very rare:

-bleeding: you will have to go back to surgery to have it stopped. This is why it is so important to stop smoking before the surgery

-bruising

-infection (this is why you have the antibiotics and why it is important to take a good shower (with betadine scrub) the night before and the day of the operation.

-asymmetry (no breasts are totally symmetrical and it is generally more obvious after the surgery)

-capsule contracture: rare condition, when the breast gets hard (due to the building of inside scar tissue) Best prevention is early (after 3 weeks) and daily breast massage

-life expectancy of implants :about 15 years

-ripples

-limits of size

-absence of cleavage

-rupture of implant (totally exceptional, unless you were involved in a crash or similar events). It requires a change of implant(s)

-seroma (collection of lymphatic fluid)

-displacement of implant (generally upward: can happen after surgery. Best prevention is wearing the strap across the chest with the bra)

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Again all these risks of complications are rare, but remember that surgery is not an exact science and there is no magic in surgery. What is really important, is to attend to all the post operative consultations given by your surgeon

Would you have more questions, do not hesitate to ask your surgeon, who will be always pleased to see you again during a second consultation