

+PIKEVILLE MEDICAL CENTER

Plastic & Reconstructive Surgery

*Breast
Reconstruction
Surgery*



Is Breast Reconstruction Surgery Right for You?

If you are facing the loss of your breast due to cancer or other disease, breast reconstruction surgery may be an option for you. There are several ways to perform breast reconstruction. Your plastic surgeon will work with you to decide the best method based on your overall health, goals and achievable results.

Women who are overweight, smoke, have had previous surgery at the flap site or have circulatory problems may not be good candidates for tissue flap surgery.

Breast Reconstruction Options

Breast reconstruction can begin immediately after your mastectomy or weeks to years later. Three methods of performing breast reconstruction are:

1. Using a tissue expander, followed by a breast implant (gel or saline)
2. Using your own tissues (called a flap)
3. Using a combination of both methods

Breast Reconstruction with Implants

Using a tissue expander, followed by a breast implant, is one technique for breast reconstruction. A tissue expander is an expandable silicone device that is placed under the chest muscle following a mastectomy. The expander is filled regularly with sterile saline causing the tissues to stretch creating a breast-shaped pocket. This process requires multiple visits to your plastic surgeon after the initial surgery. About four to six months later, the expander will be replaced with a breast implant. Your plastic surgeon will help you determine the type of breast implant used based on the shape of your desired breast. Implants are available in round and contoured shapes, in several sizes and can be filled with either silicone gel or saline.

Gel vs. Saline

Both:

Fillers have a silicone outer shell approved by the FDA

Gel:

Cohesive silicone gel-filler

Silicone acts more like a soft solid than a liquid

Inserted pre-filled

Saline:

Filled with a saltwater solution like the fluids in your body

Implant shell is inserted empty and then filled with saline to achieve desired size

PMC offers tissue expanders and implants made by both Natrelle® and Mentor®.

Breast Reconstruction Using Flaps

Your breast can also be reconstructed by surgically moving a “flap” of skin, and/or muscle to the chest from another area of your body. The flap may be from your abdomen, upper back, upper hip or buttocks. The reconstruction can be done with the tissue flap only or with a combination of the flap and an implant.

Flap surgery is useful when:

- Chest wall tissues have been damaged (i.e. through radiation) and are not suitable for tissue expansion
- Extra tissue is desired to recreate a large breast without a breast implant
- Extra tissue coverage is needed over an implant

Common Types of Flap Surgeries

The TRAM Flap

Fat, skin and muscle are moved from the abdomen to the chest. This is often referred to as a “tummy tuck” reconstruction.

The Latissimus Dorsi Flap

A section of tissue from your back is moved to your chest. An implant may be used under the flap to add more volume and shape to the reconstructed breast.

The DIEP Flap

These are similar to the TRAM flap, but only fat and skin are moved from the abdomen to the chest.

Other Considerations for Breast Reconstruction

Nipple/Areola Reconstruction

The nipple is usually removed during a mastectomy. It can be reconstructed with a small skin flap or with part of the nipple from the opposite breast.

The areola around the nipple can also be reconstructed with a skin graft or by tattooing the area to match the color of the opposite breast.

Symmetry Procedures

To improve symmetry between your natural and reconstructed breast, your plastic surgeon may perform a lift, reduction or augmentation (enlargement) on the natural breast. If it is important to you not to alter the unaffected breast, discuss this early with your plastic surgeon. It may affect the breast reconstruction method being considered for your case.

Insurance Coverage for Breast Reconstruction

All breast reconstruction procedures, including nipple reconstruction and symmetry procedures, are mandated by law to be covered by insurance companies and health plans. Your plastic surgeon’s staff will help get these procedures approved before surgery.

Timeline for Implant and Flap Surgeries

	Expander And Implant	Latissimus Dorsi Flap	Tram Flap	Diep Flap
<i>Average Operation Time</i>	1-2 hours	2-4 hours	3-6 hours	3-6 hours
<i>Average Hospital Stay</i>	0-2 days	2-3 days	2-5 days	2-5 days
<i>Blood Transfusion</i>	Unlikely	Unlikely	Possibly	Possibly
<i>Average Time to Resume Daily Activity</i>	2-3 weeks	2-3 weeks	6-8 weeks	6-8 weeks
<i>Characteristics</i>	<p>Uses an implant</p> <p>No additional scars</p> <p>Muscle strength usually not significantly impaired</p>	<p>Possible implant; breast usually made with your own tissue</p> <p>Scar on back</p> <p>May have muscle weakness in back and shoulder</p>	<p>No implant; uses your own body tissue</p> <p>Scar on abdomen</p> <p>May have muscle weakness in abdomen</p> <p>May result in flatter abdomen (“tummy tuck”)</p>	<p>Possible implant; breast usually made with your own tissue</p> <p>Scar on abdomen</p> <p>Muscle strength not impaired</p> <p>May result in flatter abdomen (“tummy tuck”)</p>

Plastic and Reconstructive Surgery

387 Town Mountain Road, Suite 104

Pikeville, KY

606-218-6211

Monday - Friday

8:30 am – 5 pm

2-20-13

Please call today for your appointment!