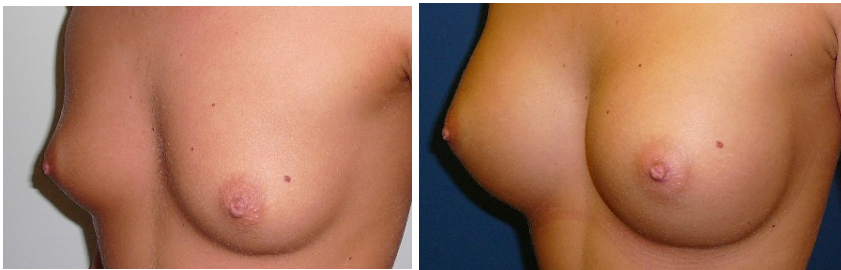




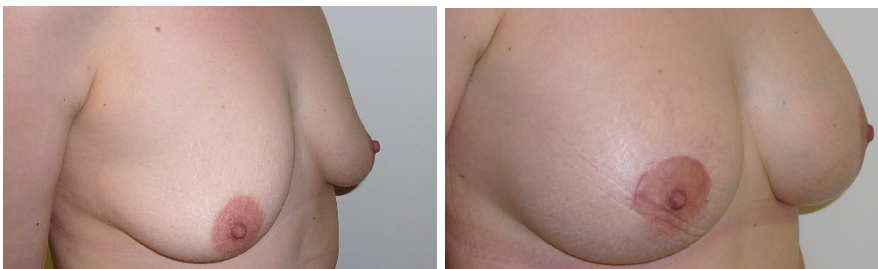
Since time immemorial, the woman's breasts have been symbols of beauty and womanliness. There is no wonder then that the shape, symmetry and size of the breasts will produce a significant effect on the woman's psyche if a deviation occurs in her opinion or in the opinion of others.

Enlargement of breasts by means of implants – augmentation – is a very effective surgery, suitable for women with insufficiently developed breasts or when the mammary gland system is shedding and the skin is slightly loose as may be the case after breast feeding or weight loss.

Augmentation with an incision in the inframammary fold



Enlargement with areola lift, incision around the areola and lifting the areola upward



Breast augmentation with breast lift, scars around the nipple and under it in an anchor shape



The optimum age limit for surgery varies. In general, it is recommended to deal with the size and shape of the breasts only when the woman does not plan any pregnancy because the pregnancy and breast-feeding result in changes of volume and those produce a negative effect on results of the surgery. On the other hand, when the patient does not plan to get pregnant in the forthcoming years, surgery may be done earlier if she

requests so. The breast implants do not actually influence the pregnancy in any way and they will not expose the fetus to any danger. However, there is still a risk that the patient will be unable to breast-feed normally, particularly with regard to insufficient lactation. Yet there is a number of patients who were breast-feeding normally after they had had augmentation. In general, augmentation is done in the period of maturity when the development of the mammary gland is completed, which is not earlier than from eighteen years of age to the time when the surgery is still tolerable with regard to the health condition and age.

The initial and a very important step to be taken before any decision on the surgery is made, is a personal consultation with an experienced plastic surgeon. Any issues related to the size and shape of breasts need to be addressed and all the motives or psychological reasons taking a woman to the decision to undergo the surgery should be considered. Each surgery is individually specific and the surgeon's individual approach towards the patient corresponds accordingly. A state of good health is an obvious prerequisite.

In most cases, implants are placed under the gland. With particularly small breasts where the gland has actually not developed at all, it is more appropriate to place the implant deeper under the pectoralis major. In result, an improved coverage of the implant and a better shape of breasts are achieved.

In our establishment, we use silicone implants **Polytech** / German production / and **Mentor** / of American production/. At the present time there are two basic types of implants available (so called spherical and anatomical), always in full ranges of sizes and volumes. Using quality implants decreases the risk of the organism reacting unfavourably to the implant and guarantees the desired aesthetic effect. Now we are using also **B. lite implants**. The filler material throughout the implant is a composite of medical grade cohesive silicone gel and hollow borosilicate microspheres, which are chemically bound to the silicone gel. The presence of borosilicate microspheres allows considerable reduction of B.lite's weight compared with traditional breast implants of similar volume. Thus, implants of the same volume are about 30 % lighter in weight. We also use **Motiva-Ergonomix** silicone implants.

Operation and Post-op Period

The surgery is performed under general anaesthesia. If the skin covering the breast needs sculpting, the surgery is more exacting and scarring is more extensive according to the sculpting needs. Implants may be inserted in one of the three techniques shown in the picture. The surgery is completed by applying an elastic bandage so that the implants are well set in the desired position. In the morning following the surgery, it is checked, the drains are removed and upon applying a new dressing and elastic special bra, the patient may be discharged and referred to home attention. For a period of several days following the operation, the patient should arrange for such conditions to enable her to report to our department for a check-up as quickly as possible or have a telephone consultation with our physician in case of subjective troubles or possible complications.

The patient should rest over the first few days after the surgery, avoiding any physical strain. Stitches are dissolvable. On the occasion, the surgeon will instruct her on massages of the breast that provide prevention against the implant fibrous capsule formation, assist in the right placement and thus the natural shape of the breast. The doctor will fix the following appointments according to the current condition. The breast may not be considered stabilised in terms of the shape until 1 – 2 months after the surgery. If the course of recovery is not complicated, the patient may get back to routine activities after 10 to 14 days. However, unrestricted physical strain or sports activities are possible 6 to 8 weeks after the surgery, subject to healing progress and the stabilisation of the placement of the implant.

After a six-month period, regular check-ups at a mammary clinic are recommended to commence, which should be natural, particularly with women above 35 years of age. Further, a check-up at this department is recommended anytime when the breast shape change occurs within short periods (days, weeks), a change in the breast constitution (hardening) or any inflammatory symptoms in the breast area or in arm pits. The data presented is based on a common post-operation course. However, the recovery is an individual process depending not only on healing abilities of any individual body, but also on every patient's conscientiousness. The patient is expected to set such conditions for a period of several days after her operation to be able, in case of any subjective problems or complication, to come as soon as possible to examination to our department. A positive operation result and mutual satisfaction is in your interest as well as in ours. Mutual trust and co-operation of the patient with the surgeon is a vital precondition.