corrective surgery for drooping breasts

Sydney plastic surgeon Dr Kourosh Tavakoli outlines the options involved with mastopexy, or breast lifting, procedures. Francis Herron reports.

Breast ptosis, or droopiness, is a condition that can affect women of all ages, says Sydney plastic surgeon Dr Kourosh Tavakoli. ‘Although we tend to associate breast ptosis with older women, young women also often suffer varying degrees of droopiness after breastfeeding or significant weight loss. For these women, wearing a supportive bra can disguise but not correct the problem.’

With the increasing acceptance of cosmetic surgery procedures by the general population, more and more women are choosing to undergo corrective surgery on their breasts to achieve a more aesthetically pleasing appearance, Dr Tavakoli says.

Aesthetic plastic surgery of the breast involves a number of procedures that range from simple augmentation to more complex lifting, he explains. Mastopexy can be performed as a stand-alone procedure or combined with augmentation using implants. Breast reduction (mammoplasty) is a form of breast lifting associated with removing breast tissue.

Due to the broad variation of breast shapes and conditions, a skilled plastic surgeon understands that simply using breast implants alone will not always produce aesthetically pleasing results.

A decision about which procedure, or combination of procedures, best suits an individual must be made taking into account several factors. Assessing breast volume and shape, the condition and elasticity of the patient’s skin and the position of their nipples is crucial to the surgeon’s ability to obtain a good result.

Although augmenting breasts by inserting implants can correct some minor drooping, the issues relating to nipple position and an excessive skin envelope cannot be addressed by augmentation alone.

Mastopexy, on the other hand, does not change the amount of breast tissue a woman has, but it can change the shape dramatically, which in turn can affect the overall breast size and projection.

Breast-lift surgery restores breast shape to a more youthful appearance by reshaping the breast tissue, removing excess skin and relocating the position of the nipple-areola complex. Breast tissue must be surgically contoured from an elongated shape into a more youthful conical structure. This manoeuvre is an integral part of the breast remodelling process.

Dr Tavakoli says three types of incisions can be used, including making an oval-shaped incision around the nipple-areola complex (Benelli-Goes), a lollypop-shaped incision from the areola to the breast crease (LeJour-Hammond) or the traditional anchor-shaped incision (Wise pattern) that incudes the breast crease.

‘Modern plastic surgery focuses on creating a minimal scar in return for achieving the most desirable aesthetic outcome,’ he says. ‘The prospective patient should be aware of this delicate balance before embarking on a mastopexy procedure.’

In some cases, breast lifting needs to be combined with the insertion of implants to produce an optimum result. The combined breast lift and augmentation procedure is considered one of the more difficult operations in plastic surgery. It can be performed in a single procedure but is more usually undertaken in two stages.

‘Mastopexy can be a very rewarding procedure for women seeking to correct drooping breasts,’ says Dr Tavakoli. ‘Prospective patients should inform themselves about the procedure and discuss the operation and its projected outcomes thoroughly with their surgeon.’

Patients must stop smoking for at least four to six weeks before and after the operation, according to the plastic surgeon. ‘Mastopexy is not usually a painful operation, but discomfort can persist for a week or so,’ he advises. ‘You’ll need 10 to 14 days off work after this procedure for recovery and healing.’
breasts

BEFORE

AFTER mastopexy by Dr Tavakoli

BEFORE

AFTER mastopexy and breast augmentation by Dr Tavakoli

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