

## **VERTICAL SCAR MASTOPEXY**

**MASTOPEXY** is an operation to lift and shape the breast. It is suitable for patients with ptosis (droop) of the breast, or breast asymmetry. The aim of surgery is to lift the nipple to a higher position (usually at or immediately below the infra mammary crease), and to reshape the breast tissue. The most important element to the surgery is the pre-operative planning and discussion. Patients generally should have two consultations, at the second consultation final questions are answered, measurements made, medical photographs taken and the consent process completed.

The vertical scar mastopexy was popularised by Madeleine Lejour Professor of Plastic Surgery, at the University of Brussels in the late 1980's, and has been used in the United Kingdom successfully since the late 1990's. This technique avoids a transverse scar in the infra-mammary crease. It is not suitable in Mr Grant's opinion for patients with very severe ptosis, smokers or individuals with a high body-mass-index.

Patients are marked with a surgical pen before surgery. Careful planning and meticulous attention to detail are needed to minimize the associated risks. Surgery usually takes at least two hours, patients usually stay at least one night after surgery.

After the wounds have healed the surgical scars sit around the nipple areolar complex (the junction between the brown and pale skin of the breast) and vertically down onto the lower pole of the breast.

In most published series there is a small proportion of patients needing revision: generally a short operation to correct some residual blunting or fullness in the infra-mammary crease.

## **ALTERNATIVES**

### **No surgical intervention**

**Mastopexy augmentation:** suitable for patients with ptosis and lacking fullness. In mild ptosis this can be as a single stage procedure. For moderate or severe ptosis a two stage procedure is required, the breast is lifted and then several months later an implant is used to restore volume and projection.

**Large high profile implants:** mild ptosis reportedly can be corrected by large, firm implants used to take up the slack or droop in the overlying breast. My reservation is that the bigger the implant the more obvious it becomes. I am not aware of any long term studies confirming that the droop does not return to the stretched breast in the months and years after surgery.

## **POST SURGICAL CARE**

Patients need to wear a sports bra for 4 weeks day and night. Oral antibiotics are given for five days. Smoking before and after surgery must be avoided.

## **RISKS**

There are rare but significant risks associated with breast surgery such as infection, bleeding, loss of the implant, capsule formation and pain. There are risks associated with mastopexy such as change in nipple sensation and loss of skin blood supply with resultant risk of infection, delayed healing, scarring and further surgery. There are also risks particular to this operation including asymmetry, and scarring.