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Breast remodeling in postbariatric surgery

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After major weight loss, breasts are affected in terms of shape, texture, loss of elasticity, support and volume. Post bariatric surgery female patients have some characteristic breast deformities, such as severe ptosis with medial rotation of areolomamilar complex, upper pole hollowing and rolls in the breast tail. In the preoperative assesment it is necessary to clearly define expectations and patient wishes; to address breast shape, volume, size and lateral rolls; and to explain the likelihood of breast ptosis recurrence in the future. In minimal breast volume cases, with little or no ptosis, an augmentation mammoplasty may be a good option; in breast ptosis and loose skin: mastopexy with or without implants; finally in great volume with ptosis a reduction mammoplasty is the best option. The auto-augmentation procedure is a reasonable option, using the inferior mammary folds and lateral breast rolls to reshape the ptotic breast achieving a natural shape without the use of an implant. The surgical options for men are several as well. Some patients may be treated with gynecomastia techniques, such as liposuction and adenectomy. Periareolar skin excision combined with liposuction may be an option in mild cases. In more severe cases, excision of rolls may be performed with different designs such as “boomerang” and Wise patterns.

Biography

Claudio A Guerra has completed his graduation from Universidad de Chile Medical School. He trained in General Surgery and practiced for 5 years before starting his training in Plastic Surgery. He was a research Fellow at University of Alabama from July 2009 to February 2011. He currently works at Universidad Católica de Chile in the Plastic Surgery Unit performing most of the post bariatric surgery referred to the unit.

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