Reconstruction of Post Old Burn Unilateral Mammary Atrophy, Medial Displacement of NAC, and Adhesion of Infra Mammary Fold in Adult Females after Neglected Release before Puberty

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Abstract

Breast development in young females in a symmetrical manner is very important physically and psychologically. Patients who suffer from burns in the anterior chest wall during childhood have more concerns about the development of the breast initially than to be similar to another breast if the burn is unilateral, major deformities may face plastic surgeons in reconstruction according to type and depth of burn, in trail to restore near normal development and symmetry of both breasts.

Keywords: Breast development • Flame burn • Post burn reconstruction • Puberty

Introduction

Post-burn reconstruction is one of the major challenging jobs for plastic surgeons as the burn, especially if deep, changes the normal architecture of the skin and the subcutaneous tissues and has many complications of wound healing like the hypo or hyper-pigmentation, hypertrophic scars or keloid formation or maybe more extensive and leads to contracture and affect the normal life of the patients burn type also affect the result of wound healing as the flame and chemical burn more extensive than scald burn. Burns in the anterior chest wall may affect the breast and if the burn incident happened during childhood, especially in females it may affect the development of the breast during puberty and this may cause physical and psychological embarrassment and reconstruction of the breast is mandatory in like theses cases at puberty as give chance to the breasts to develop to its normal size and site if patient not reconstructed early it may



Figure 1. The patient with post-burn contracture.

lead to disfigurement and asymmetry if unilateral injury [1].

Case Report

A female patient 14 years old came to the clinic with post-burn contracture in the LT side of their chest and anterior abdominal wall, also she has asymmetrical breast development (atrophic LT breast) and a small medially contracted LT nipple-areola complex.

The patient was injured by a flame burn when she was 2 years old in the anterior chest wall and upper abdomen affecting the LT side, unfortunately, healed by extensive fibrous tissue and lead to post-burn contracture .at puberty, the patient have normal development of the RT breast and limited growth of LT breast and lost inframammary line as the contracture of the skin fuse the inframammary line with the anterior abdominal wall, the nipple-areola complex in LT side very small and displaced medially [2,3] (Figure 1).

Discussion

In our attempts to restore the breast shape and symmetry we were facing the post-burn contracture of the chest and abdominal wall and the fusion between them and lost inframammary fold, the position of the nipple-areola complex, and trail to give the patent the symmetry in her breasts. So we start the surgery by the release of the post-burn contracture in the LT side and creating the inframammary fold by taking deep sutures between the subdermal layer and perichondrium of the rips to anchor the skin down and separating the skin of the chest from the abdominal wall.

Displace the remnant of mammary tissue in the LT breast axillary tail to create a breast mound centrally by a push-up technique using nonabsorbable sutures and repositioning the nippleareola complex in proper meridian Reduction mastopexy of RT breast in trial to give the patient symmetry.

Conclusion

Early management of post-burn contracture and release of fibrous tissues during or before puberty gives patients with burns a chance to grow in a regular or near regular manner and avoids severe disfigurement and improves their physical and psychological life. Creation of inframammary fold after the release of the contracture gives the tremendous result and the growth of the contacted breast resorted.

Declaration

The patient and her parents were informed that her case will be discussed as a case report and they accept that we take photographs and written consent secured.

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