

breasts



breast reduction

Melbourne plastic surgeon **Dr Douglas McManamny** explains why he prefers the vertical breast reduction technique. Lise Petersen reports.

Breast reduction is a procedure that reduces the volume of the breasts and elevates the breasts on the chest wall,' explains Melbourne plastic surgeon Dr Douglas McManamny. 'The reason women have breast reduction surgery is usually related to discomfort in the shoulders and neck. Women sometimes complain of muscle strain in their upper back and grooving in their shoulders from their bra straps. It's also not uncommon for them to develop rashes under their breasts in summer. Women with mid and lower back problems may find these are made worse by heavy breasts.'

Dr McManamny says the age spectrum of women choosing to have the procedure is fairly wide. 'The breast size of the current generation of women in their 20s and 30s is generally larger than that of a generation ago, so it's not uncommon for these women to consider breast reduction surgery,' he explains. 'Other women likely to consider it are those whose breasts have grown with pregnancy and breastfeeding and have stayed large. Another group are those who have put on a little weight with hormonal changes in their 40s and 50s and have a genetic tendency for their breasts to enlarge.'

There is a whole range of techniques that can be used to reduce the size of the breasts. These range from liposuction alone, which will reduce volume but only makes a small change in relation to breast elevation, to the most commonly used surgical technique, the inferior pedicle technique, which leaves the traditional anchor-shaped scar on the breast. The vertical reduction technique, also called the superior pedicle technique, leaves a scar around the nipple and a scar from the nipple to the skin fold beneath the breast – but no scar in the skin fold (although if a scar does need to be put there it is usually quite short).

Dr McManamny favours the vertical reduction technique. He says the advantages of this technique are that it leaves less scarring on the breast skin or at least shorter scarring, and because the operation uses a superior pedicle, the breast tissue that maintains the blood supply to the nipple is attached above rather than below. ‘This tends to help maintain more breast projection,’ he says. ‘Whereas when the inferior pedicle technique is used, sometimes the breasts may take on a flatter appearance as the years go by. So for some people, using the superior pedicle technique will increase the likelihood of the breasts maintaining more forward projection, which results in a more youthful appearance.’

It is important for the patient and surgeon to discuss the various options and decide which technique is most suited to the patient because there are advantages and disadvantages with each.

Dr McManamny says there is a higher rate of minor revisions after a vertical reduction than there is after an inferior pedicle technique. This is because the skin doesn’t always take up fully in the lower pole of the breast after a vertical reduction, but he says this can usually be fixed with a local anaesthetic procedure about six months after surgery to let things stabilise.

‘I believe the vertical technique is still superior because occasionally the scar in the skin fold beneath the breast with an inferior pedicle reduction can be a long-term problem for patients due to stretching, appearance, sensitivity and/or irritation,’ he explains.

He continues, ‘The vertical reduction technique has a learning curve associated with it for surgeons and usually when they start performing this technique, they use it for

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medium sized breast reductions. As surgeons gain experience they will tend to use this technique for larger reductions as well. This is because, technically, it requires more experience to achieve satisfactory results with larger breast reductions.’

Breast reduction surgery usually takes two to two and a half hours to perform and just a little less for a vertical reduction. General anaesthetic is used and postoperatively most people can return to work at the end of a couple of weeks, although they need to avoid gym workouts or high-impact activities like running for about six weeks after surgery.

As with any surgery, the risks associated with breast reduction include possible postoperative bleeding and infection. There can also be a risk with regard to nipple circulation and this could lead to partial or full nipple loss, although this is extremely rare with any form of surgical breast reduction.

Overall, Dr McManamny says the vertical breast reduction is an option for women to consider, although it is

not necessarily the case that this technique is better than a inferior pedicle operation for every individual. ‘Women should simply be aware that there are a variety of techniques available for breast reduction surgery and these should be discussed before going ahead with surgery.’

He concludes, ‘No matter what sort of reduction is performed, women whose large, uncomfortable breasts have been made smaller usually find that their quality of life is significantly improved because they feel more comfortable, they can engage in more activities if they wish and they find the selection of clothing is easier. They feel much freer – a weight is lifted from their shoulders both literally and psychologically.’ **acsm**



BEFORE



AFTER breast reduction by Dr McManamny



BEFORE



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