HOW BREASTS CAN AFFECT YOUR LIFE AND WHAT CAN BE DONE

TWENTIES, YOUNG AGE - TUBEROUS BREAST(S), GYNAECOMASTIA (male breasts), CONGENITAL BREAST ASYMMETRY

Small or asymmetrical breasts in girls and enlarged breasts in boys can severely affect confidence and the quality of life of young patients. They cannot go to the beach or gym without being embarrassed about being different. Girls with asymmetrical or under developed breasts have to wear external prosthesis to balance their appearance in clothes. Boys wear tight garments all the year through, even in the summer under T-shirts, to reduce the volume of their large “female” looking breasts. Their personal life suffers because of a lack of self-confidence and embarrassment.

Correction of tuberous breast(s) requires not only the use of implants but also breast tissue remodeling. In cases of severe deformity two stage procedures can be done. Firstly, a balloon called “an expander” is inserted and inflated gradually to stretch the skin to the desired size. After the desired size is achieved, the expander will be exchanged for an implant.

Male gynaecomastia can be corrected by liposuction sometimes combined with the excision of glandular tissue through a small periareolar incision. Scars are usually almost invisible.

This type of surgery is usually a life-changing event for a young patient. They can then start to go to the gym, to the beach and, overall, they come back to see me with a completely different outlook on life. It is highly satisfactory for me as a surgeon to help these people to regain their confidence.

THIRTIES, AFTER PREGNANCY

Loss of breast volume and shape after breast-feeding comes as an unpleasant surprise. Maternity is hard work... but once a woman has time to look in the mirror again it is when the drama starts. Some ladies lose a couple of cup sizes and end up literally with their breasts looking “empty”. It is frequently called “spaniel ears”. Normally the biggest worry is how they look when they take their clothes off. They feel like they have lost their femininity. Sometimes just tightening the loose skin can be enough, this technique is called a mastopexy, but in many cases combining it with an implant gives the patient the desired volume, fullness of the upper pole and “a nice cleavage”.

FORTIES, LARGE BREAST(S)

They may have had large breasts from the start, but normally by the time women reach this age they are tired of the pain in their shoulders and back and from buying an unattractive bra the size of a parachute. The solution is easy - breast reduction.

I have to say these patients are the most grateful ones. As soon as they know this “heavy weight” will be lifted from their shoulders they are so happy! On top of that they are able to purchase more feminine bras on the high street.

ANY AGE, BUT MORE IN LATE FORTIES-FIFTIES, BREAST CANCER

The most important battle for these patients is to survive breast cancer. In the past most of these patients waited years for their reconstruction whereas, nowadays, there are more and more so-called immediate reconstructions. The breast is reconstructed on the same day directly after the mastectomy procedure. It gives the best cosmetic outcome as the breast skin is preserved, the breast looks incomparably better after immediate reconstruction and the patient does not need to live without a breast while waiting for the reconstruction.

There are a lot of options regarding reconstruction. If a patient has enough tissue on their tummy this can be used to rebuild the breast and, at the same time, they get a tummy tuck. This is called a DIEP flap. The breast feels very natural and it is a reconstruction for life. Nowadays it is considered the gold standard of breast reconstruction. Of course this type of surgery has to be performed in a hospital with excellent theatre facilities and anesthetic cover and where they have experienced nurses, trained to take care of free flaps in the postoperative period, such as The McIndoe Centre in East Grinstead.

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