Breast implants (augmentation)

Summary

- Breast augmentation is surgery to insert implants beneath the breasts to enlarge them.
- The implant type and size depends on how much bigger you want your breasts to become, and on your breast anatomy, skin elasticity and body type.
- Breast implants are not guaranteed to last a lifetime and future surgery may be required to replace one or both implants.
- Talk with your surgeon about the risks and benefits of breast implants and what results you can expect.

Breast augmentation is a type of cosmetic surgery, but it may also be performed for reconstructive reasons. In reconstructive surgery, implants are used to restore anatomy due to congenital, traumatic or post-cancer deformity. The implant type and size depends on several factors, such as how much bigger you want your breasts to be, your breast anatomy, skin thickness and elasticity, and body type.

Breast implant surgery is also known as augmentation mammoplasty, breast enlargement or a ‘boob job’.

Breast implants can be used to:
- enlarge small breasts
- restore breast volume after weight reduction or pregnancy and breastfeeding
- even up asymmetric breasts
- reconstruct a breast after mastectomy or injury.

If you are concerned about the way you look or are thinking about cosmetic treatments to boost your confidence, there are alternatives to cosmetic surgery. These may include other treatments, wearing padded bras or accepting yourself the way you are.

Things to consider before having breast implant surgery

Before you decide on breast implants, some important issues to keep in mind include:
- Breast augmentation does not correct droopy breasts. A breast lift (an operation to remove loose, excess skin that often involves shifting the nipple position as well) may also be required.
- Breast implants may affect your ability to breastfeed.
- Breast implants are not guaranteed to last a lifetime and future surgery may be required to replace one or both implants. There is no consensus on the product life of breast implants once implanted. Studies show that the risk of problems increases about eight to 10 years after surgery. You may require further surgery to replace one or both implants. Plan to have them changed every 10 years.
- Cosmetic surgery does not usually qualify for rebates from Medicare or private health insurance. Think about the financial cost.
- Smokers are at increased risk of complications from any surgery. If you are serious about undergoing cosmetic surgery, you should try to quit smoking.

Finding a breast augmentation surgeon

Ask your doctor for advice on a suitable and reputable surgeon and hospital where breast augmentations are performed. At your first consultation, you should ask the surgeon about their training and experience.

It is preferable to have this procedure done by a reputable surgeon who has specialist training and has a lot of experience in breast augmentation surgery.
First consultation with a breast augmentation surgeon

When you meet your plastic surgeon for the first time, they will identify your needs and discuss your surgical options. The first consultation will also involve a clinical examination of your breasts and chest area.

During this examination, the surgeon will take measurements and further discuss your desired outcomes from the surgery. This information will assist the surgeon in selecting the correct style of implant and the most appropriate operation for your needs.

For all cosmetic surgery, a cooling off period should be offered by your specialist plastic surgeon to give you enough time to consider if the operation you discussed is in your best interest. The specialist plastic surgeon should see you again prior to your surgery to further discuss the operation, and confirm the implant and operation style selected.

Medical issues and breast implant surgery

Before the operation, you need to discuss a range of medical issues with your doctor or surgeon. They will talk to you about your:

- Physical health – an examination will help your doctor or surgeon decide if the treatment is appropriate.
- Mental health – surgery may not be the best operation for all patient. For some patients, counselling may be more appropriate than surgery.
- Medical history – some pre-existing medical conditions and surgery you’ve had in the past may influence decisions about this operation, including the type of anaesthetic that is used.
- Risks and possible complications – it is important that you understand the risks and complications so you can weigh up whether breast augmentation is right for you.
- Medication – tell your doctor or surgeon about any medication that you take on a regular basis or have recently taken, including prescription medicines and over-the-counter preparations such as natural therapies, fish oils and vitamin supplements.
- Past reactions to medication – tell your doctor or surgeon if you have ever had a bad reaction or side effects from any medication, including anaesthetics.
- Preparation for surgery – the surgeon will give you detailed instructions on what you should do at home to prepare for surgery. For example, you may be advised to take a particular medication or alter the dose of an existing medication. Follow all instructions carefully.

Types of breast implants

The two main types of breast implant used in Australia are:

- Saline implant – a silicone envelope filled with varying amounts of sterile salt water (saline). This can affect the shape, firmness and feel of the breast. If the implant shell leaks, a saline implant will collapse and the saline will be absorbed and naturally expelled by the body.
- Silicone implant – a silicone envelope filled with an elastic gel that feels much like natural breast tissue. If the implant leaks, the gel may remain within the implant shell or it may escape into the scar capsule (area around the implant), or even into the breast tissue. This may cause no symptoms, or it may lead to pain or a change in breast shape or size. A leaking implant filled with silicone gel may not collapse.

Breast implant surgery

Breast augmentation surgery is usually performed under general anaesthetic, although some surgeons use a combination of local anaesthetic and sedation. All surgery must be performed within licensed and accredited facilities with a registered anaesthetist present to treat you for any adverse reaction you may have to the anaesthetic.

Generally, breast augmentation involves:

- The surgeon makes an incision (cut). The location of the incision is decided with you beforehand, and depends on factors such as your physical makeup and scarring tendency, and the type and size of implant. The incision may be in the armpit (transaxillary), in the crease beneath the breast (inframammary) or around the areola (periareolar).
• The surgeon makes a pocket, either behind the pectoral (chest) muscle or in front of the pectoral muscle beneath the breast tissue.
• The implant is inserted into the pocket. Sometimes, the implant is already filled at the time of insertion. In other cases, the empty implant is inserted and filled (with saline) through a thin tube until the desired size is reached.
• All incisions are stitched and dressings are applied.

Immediate after breast implant surgery
After the operation, you may expect:
• a drainage tube in the wound to help prevent fluid build-up
• bruising and swelling
• to be given antibiotics to prevent infection
• possible numbness
• pain and discomfort
• dressings or bandages.

Complications of breast implant surgery
All surgery carries some degree of risk. Some of the possible complications of breast implant surgery include:
• reaction to anaesthetic, including allergic reaction or potentially fatal cardiovascular complications, such as heart attack
• bleeding or infection
• a blood clot in the deep veins of the legs (deep vein thrombosis), which can move to the lungs (pulmonary embolus) or to the brain and may cause death
• changes in breast and nipple sensation
• temporary or permanent areas of numbness
• wrinkling of the skin over the implant
• inflamed, itchy scars
• capsular contracture – firm scar tissue forms around the implant, which causes it to lose shape and softness
• inappropriate implant size
• implant rupture or deflation
• asymmetry (unevenness) of the breasts
• calcium deposits in the scar capsule around the implant
• granulomas (lumps) in local lymph node tissue, formed by leaking silicone
• breastfeeding difficulties, including reduced milk supply
• reduced effectiveness of breast cancer screening, as an implant may hide breast tissue (and tumours) during a mammogram
• movement of the implants from their original position
• a need for further surgery to treat complications.

This is not a complete list. For example, your medical history or lifestyle may put you at increased risk of certain complications. You need to speak to your surgeon for more information.

Self-care after breast implant surgery
Be guided by your surgeon, but general self-care suggestions include:
• Follow all instructions on looking after your wounds.
• Avoid lifting and physical exercise for at least a month – longer for extreme exercises.
• Expect to experience soreness and swelling for a few weeks.
• Support your breasts with a well-fitted form bra or sports bra.
• Report any bleeding, severe pain or unusual symptoms to your surgeon.
• Keep the wounds out of sunlight for approximately one year.

**Australian Breast Device Registry and Breast Implant Registry**

From May 2015, the “opt in” Breast Implant Registry ceased to register new patients. However, the Australian Society of Plastic Surgeons will continue to maintain the Breast Implant Registry legacy data and to administer patient access to their data stored on the registry.

A new Government-funded Australian Breast Device Registry supersedes the Breast Implant Registry. It is run by Monash University and follows best practice in registry science. This new registry aims to record and track all breast devices implanted in Australia, as well as the adverse events with those devices, to help doctors and surgeons improve their patient outcomes. For more information on how to participate, visit the Australian Breast Device Registry [website](http://www.med.monash.edu.au/sphpm/depts-centres-units/abdr/).

This is important to help with your ongoing health and safety. Ask your surgeon for more information.

**Long-term outlook after breast implant surgery**

Careful review of scientific research conducted by independent groups has found no proven link between breast implants and autoimmune or other systemic diseases.

If you have silicone implants, you may need to visit your surgeon regularly to make sure the implants are functioning properly and are not leaking. An ultrasound or MRI screening may be used to assess the condition of your breast implants.

Studies show that the risk of problems increases about eight to 10 years after surgery. You may require further surgery to replace one or both implants. Plan to have them changed every 10 years.

Pregnancy, weight changes, ageing, menopause and gravity will influence the appearance of augmented breasts over the course of your lifetime. If you become dissatisfied with the appearance of your breasts after a period of years, you may choose to undergo a breast lift or implant exchange.

**Alternatives to breast augmentation**

Alternatives to breast augmentation can include:

• breast lift surgery (also known as mastopexy)
• flap reconstruction after mastectomy — this involves surgery to create a breast from skin and tissue taken from elsewhere on the body
• wearing padded bras
• accepting yourself — talking to a counsellor or psychologist may help you overcome your concerns about your appearance and you may decide that you like yourself the way you are.

**Where to get help**

• Your doctor
• Plastic surgeon
• Australian Society of Plastic Surgeons Hotline Tel. 1300 367 446
• Royal Australasian College of Surgeons Tel. (03) 9249 1200
• Australian Breast Device Registry Tel. (03) 9903 0205
• Breast Implant Registry Tel. (02) 9437 9200
• Australian Health Practitioner Regulation Agency Tel. 1300 419 495
• Medical Device Incident Report Investigation Scheme Tel. 1800 809 361.

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