Breast Augmentation - Saline Implants

Breast augmentation, or augmentation mammoplasty, is one of the most common plastic surgery procedures performed today. Over time, factors such as age, genetics, pregnancy, weight changes, and gravity can cause the size and shape of the breast to change. Women who are dissatisfied with the size of their breasts or have experienced changes in breast appearance can achieve fuller, shapelier breasts with breast augmentation. During this process, breast implants are placed inside a pocket behind existing breast tissue. Breast augmentation can increase or balance breast size, restore breast volume, or restore the breast shape after partial or total loss. It is important to realize that breast augmentation cannot correct significantly sagging or drooping breasts. In these instances, a breast lift is often necessary, which may be performed in conjunction with this procedure.
Introduction

Breast augmentation, or augmentation mammoplasty, is one of the most common plastic surgery procedures performed today. Over time, factors such as age, genetics, pregnancy, weight changes, and gravity can cause the size and shape of the breast to change. Women who are dissatisfied with the size of their breasts or have experienced changes in breast appearance can achieve fuller, shapelier breasts with breast augmentation. During this process, breast implants are placed inside a pocket behind existing breast tissue. Breast augmentation can increase or balance breast size, restore breast volume, or restore the breast shape after partial or total loss. It is important to realize that breast augmentation cannot correct significantly sagging or drooping breasts. In these instances, a breast lift is often necessary, which may be performed in conjunction with this procedure.

Doctor's Personal Note: A Message From Your Doctor
Thank you for visiting our website and viewing our 3D Animation Library. These animations should assist you in better understanding your condition or procedure. We look forward to answering any additional questions you may have at our next appointment.
Implant Options

A variety of breast implant options exist. Breast implants differ by shape, texture, and profile. Breast implants may be round or contoured, and may have a smooth or textured surface. The breast implant profile may be standard, moderate, or high. Breast implants also vary by size, or volume.

One of the main decisions involved in breast augmentation is whether to use silicone or saline implants. Both silicone and saline implants are available in similar shapes, sizes, and textures but they differ in composition filling the implant. Silicone implants are made of a silicone rubber shell filled with a silicone gel that feels very similar to natural breast tissue. Saline implants are made of a silicone rubber shell and are filled with sterile salt water, or saline solution. This animation provides details about saline implants and the various insertion and positioning options.

After determining whether you want saline or silicone, your surgeon will help you choose the proper style and size of breast implant based on your lifestyle, body contours, and existing amount of breast tissue to achieve the cup size and appearance you desire.
Anatomy
As you may know, certain factors such as age and pregnancy can affect the elasticity of your skin and breast tissue, which results in changes to shape and appearance. Your breasts consist primarily of fatty (adipose) and glandular tissues which determine the size and shape. Firmness and lift are generally influenced by how well ligaments connected to the chest wall support your breasts. The fatty tissue and ligaments surround the milk-producing glandular tissue (lobules) and milk ducts. Breasts also contain nourishing blood vessels and lymph vessels that help the body fight off infection. There are tiny muscle fibers in the nipples, but otherwise the breasts are non-muscular. However, they lie atop two layers of muscles, the pectoralis major and pectoralis minor, which separate the breasts from the chest wall.

Implant Positioning Options
Breast implants can be placed in various locations, including behind the glandular tissue but in front the muscle, partially behind the muscle, or completely behind the muscle and connective tissue. Placing an implant behind the glandular tissue and in front of the muscle is referred to as subglandular placement, over the muscle placement, or more generically as "overs". Placing an implant partially behind the pectoralis muscle, wherein the lower portion of the implant is not completely covered by the muscle, is referred to as subpectoral, partial submuscular, dual plane placement, or generically as "partial unders". Placing an implant behind the pectoralis muscle as well as behind connective tissue, such that it is firmly behind the chest muscle wall, is referred to as complete submuscular placement, or more generically as "complete unders" or "full unders". Your surgeon will help determine the implant placement that is best for you.
Preparation
Breast augmentation procedures typically last approximately one to two hours. Before the start of your procedure, your surgeon may draw guidelines including any necessary markings for incisions or implant placement. Prior to the start of surgery an anesthetic will be administered. Depending on the surgeon’s preferences and the nature of the procedure, a local anesthetic usually in combination with intravenous sedation or general anesthesia will be used.

There are four primary options for inserting saline implants into the breast. They can be inserted through incisions in the areola, armpit, under-breast crease, or belly button, where the resulting scars are minimized or hidden. In what is known as the periareolar incision, a single small incision is usually placed along the perimeter of each areola, where the scars will follow a natural line. The transaxillary incision approach uses a small incision in the natural fold of the armpits; therefore there will be no scars on the breasts. In what is known as the inframammary incision, a small incision is placed along the crease of the lower portion of each breast, concealing the scars in the natural breast folds. A transumbilical, or TUBA, approach uses a small incision in the rim of the bellybutton.
Procedure

Your surgeon will create an incision to gain access behind the breast. Although the incision will be made as inconspicuously as possible, its length and appearance may vary depending on the type and size of implant, your body contours, and the surgeon’s preference.

Your surgeon will separate the breast tissue in order to reach the area of the breast in which the pocket will be formed and carefully create the pocket. A pocket for a dual-plane (partial submuscular) insertion is shown here.

If the transaxillary or TUBA approach is chosen for your procedure, your surgeon may use an endoscope, which is a thin tube with a camera and light on the end, to create the path from the armpit or belly button incision to the breast area.
Implant Placement

Saline implants are usually inserted into the breast empty. A tube attached to a valve on the breast implant allows your surgeon to use a syringe to fill it with saline after it has been inserted into the pocket. Once the implants are filled, your surgeon will visually inspect your breasts to ensure that they are symmetric. Your surgeon may add additional saline solution to one or both breast implants, adjust the pocket, or the position of the breast implant itself to ensure that the desired look is achieved. Once satisfied, your surgeon will remove the tube used to deliver the saline solution, sealing the implants.

For the TUBA procedure, once the path from the belly button to the breast area is created, a tissue expander may be inserted before the breast implant. The tissue expander is temporarily inflated with saline or air, which stretches the pocket area to the correct size to accommodate the implant. The tissue expander is then emptied, removed, and replaced with the implant. Tissue expanders may also be used with other incision types, such as transaxillary, when recommended by your surgeon.

The incisions are commonly closed using sutures in the breast tissue, and sutures, skin adhesive or surgical tape may be used to close the skin.
**Recovery**

Most breast augmentation procedures are done in outpatient surgery facilities, meaning you should be ready to go home the same day, usually within two to four hours. Before you leave, your doctor may fit you with a compression dressing or bra and prescribe medication to manage your pain for the first few days and as needed. It is a good idea to allow yourself several days to recover before resuming your daily activities. Be sure to follow your surgeon’s recovery plan, including activity and lifting restrictions, to avoid complications.

If non-dissolving sutures were used, they will generally be removed in one to two weeks. The majority of the swelling will likely subside within a few days. However, some swelling may persist for several weeks.

**Risks and Results**

Consult your surgeon regarding how implants may affect breast feeding and mammograms; risks such as rupture or capsular contracture, in which scar tissue may compress or distort an implant; and options for future revision since implants are not intended to last a lifetime.

Although you will be able to notice your fuller breasts immediately after surgery, final results emerge only after the implants have settled and the swelling has subsided completely. The scars from your incisions will typically fade to thin, slightly discolored lines over several months. It is important to realize that your breasts will continue to change shape over time. However, the results from breast augmentation are typically long-lasting, which means that your breasts will maintain the fuller, shapelier appearance that you desire for years to come.