

**Evaluation of the cosmetic procedures
on Breast (Breast augmentation,
Breast reduction, correction of ptosis)**

Essay

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General Surgery*

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Summary and Conclusion

Summary

Breast augmentation increases the size and enhances the shape of a woman's breasts, but more importantly, it will improve her self esteem. The history of breast augmentation has been made interesting by such sentinel events as the introduction of silicone implants by Cronin and Gerow in 1963, the subsequent placement of a moratorium on silicone gel implants by the FDA in 1992, and the repeal of that moratorium in 2006 after numerous studies demonstrating their safety. The idea that a well-planned operative approach will facilitate good long-term results is paramount. The various types of implants, incisions and pocket locations are discussed. The indications, advantages, and disadvantages of the various techniques are explained, including endoscopic transaxillary augmentation. Understanding of possible complications, and knowing the techniques that are on the horizon are also key parts of the chapter (**Kreymerman, 2010**). And By recognizing and analyzing the multiple variables that can affect the result and strategically applying the technical details outlined in this chapter, consistent and aesthetic results can be obtained (**Hoyer, 2005**).

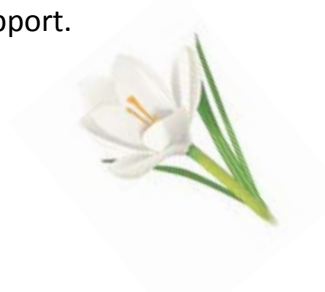


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List of Abbreviations

ASAPS:	American Society for Aesthetic Plastic Surgery
BBR :	Bilateral breast reduction
BJPS :	British Journal of Plastic and Reconstructive Surgery
BW :	Base width
CT :	Computed tomography
FC :	Fasciocutaneous (flap)
FDA :	Food and Drug Administration
GA :	General anaesthesia
IMF :	Infra mammary fold
IMN :	Internal mammary node
IV :	Intravenous
LA :	Local anaesthetic
MCP :	Mid clavicular point
MSS :	Maximum skin stretch
NAC :	Nipple areola complex
N-IMF:	Nipple to inframammary fold
PEG :	polyethylene glycol
PMM :	Pectoralis major muscle
PRS :	Plastic and Reconstructive Surgery (journal)
PT :	Soft tissue pinch test
SC :	Subcutaneous, subcuticular
SFCC :	Spherical fibrous capsular contracture
SN-N :	Sternal notch to nipple distance
SSN :	Supra sternal notch
STF :	Superficial thoracic fascia

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Chapter (1)

Anatomical Considerations of Breast

- Introduction
- Embryology
- Arterial anatomy
- Venous drainage
- Lymphatic drainage
- Innervation
- Facial support structure
- Parenchyma and fat
- Skin
- Muscles

The breast is a modified sweat gland whose development and function are regulated through a complex interplay of hormones. It is the only organ that is not fully developed at birth. No other organ undergoes such dramatic changes in size, shape, and function as does the breast during growth, pregnancy, and menopause (**Carlson, 2009**). The protuberant part of the human breast is generally described as overlying the second to the sixth ribs and extending from the lateral border of the sternum to the anterior axillary line (Fig. 1) (**Sainsbury, 2008**).

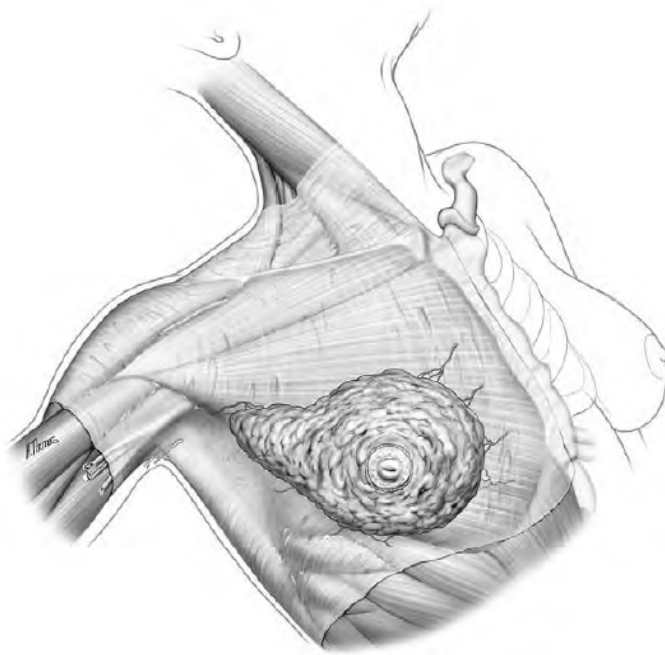


Fig (1): The breast tissue typically extends from the 2nd rib to the inframammary fold at the 6th or 7th rib, and from the lateral