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Implant and Technique Selection in Breast Augmentation



N Corduff FRACS



Breast Augmentation

The hardest part is deciding technique selection and implant selection

What does the patient want?





Upper pole

- Slope
- Roundness
- Height to clavicle

Texan Barbie















Round Upper Pole















French look









Lower Pole

Ptosis











Nipple position











Cleavage







Lateral width











Projection







What has the patient got?









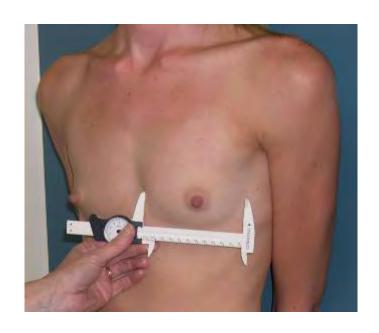




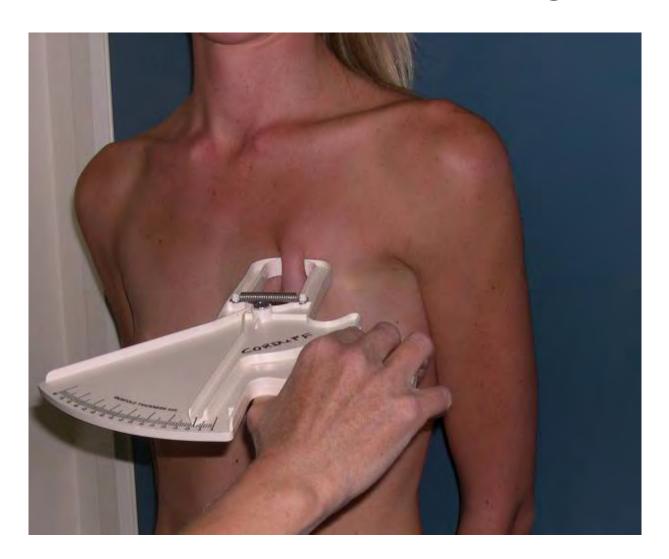


Base width

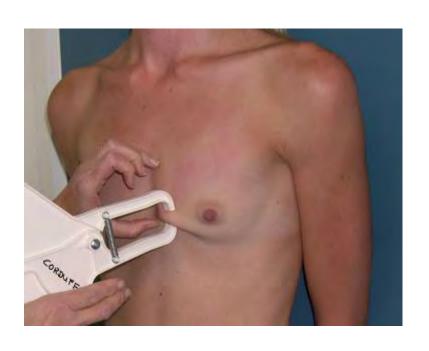




Upper pole coverage



Lower pole coverage





Chest wall

- Scoliosis
- Prominent ribs
- IMF positions
- Shoulder heights







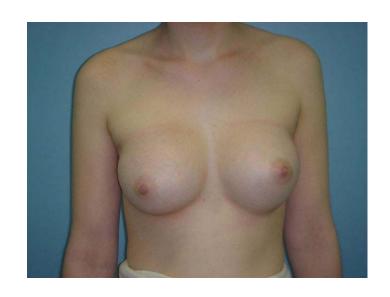




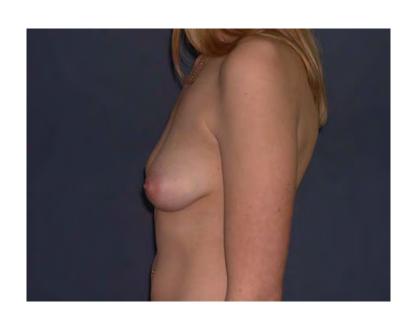


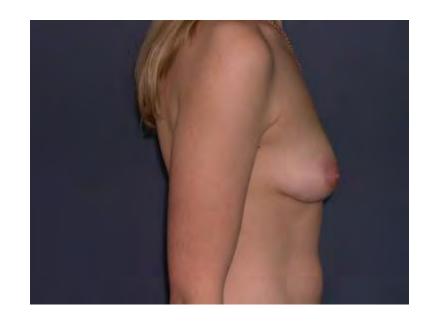
Nipple position





Glandular ptosis







Pectoralis activity







Smoking



Skin quality





Other factors

- Expectations
- Other influences: partner, family, ethnicity
- Occupational requirements







Add volume

?where: implant selection

?how: technique selection



Negotiation

Compromise



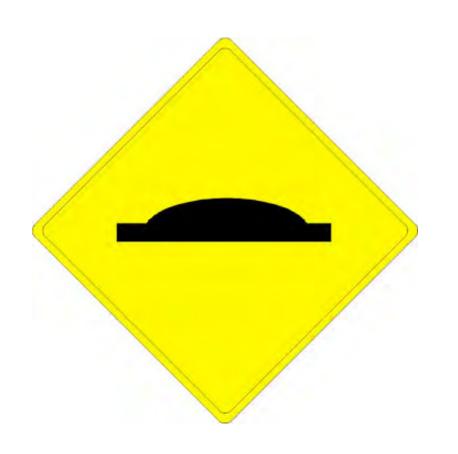




The Easy One

- Good symmetry
- Good coverage
- Good breast relationships

Avoiding the speed hump





The Easy One

- Good coverage, not too much projection:
 - Round pre-pectoral mod profile textured gel
- Less coverage:
 - subpectoral smooth gel
- Round upper pole
 - Subpectoral smooth HP gel
- Full projection, sloped upper pole
 - Anatomical pre or subpectoral (coverage)

round pre-pectoral moderate profile textured gel

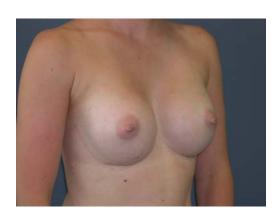




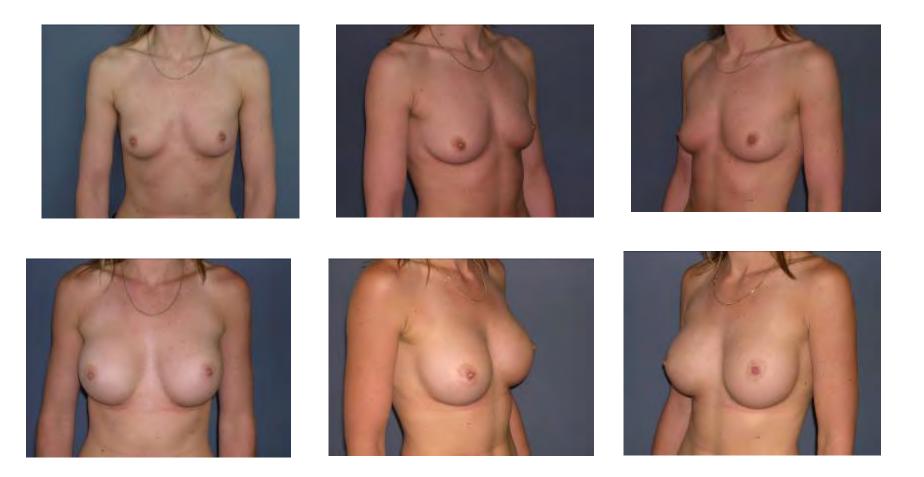








round subpectoral moderate profile smooth gel



round subpectoral high profile gel













High profile anatomical subpectoral





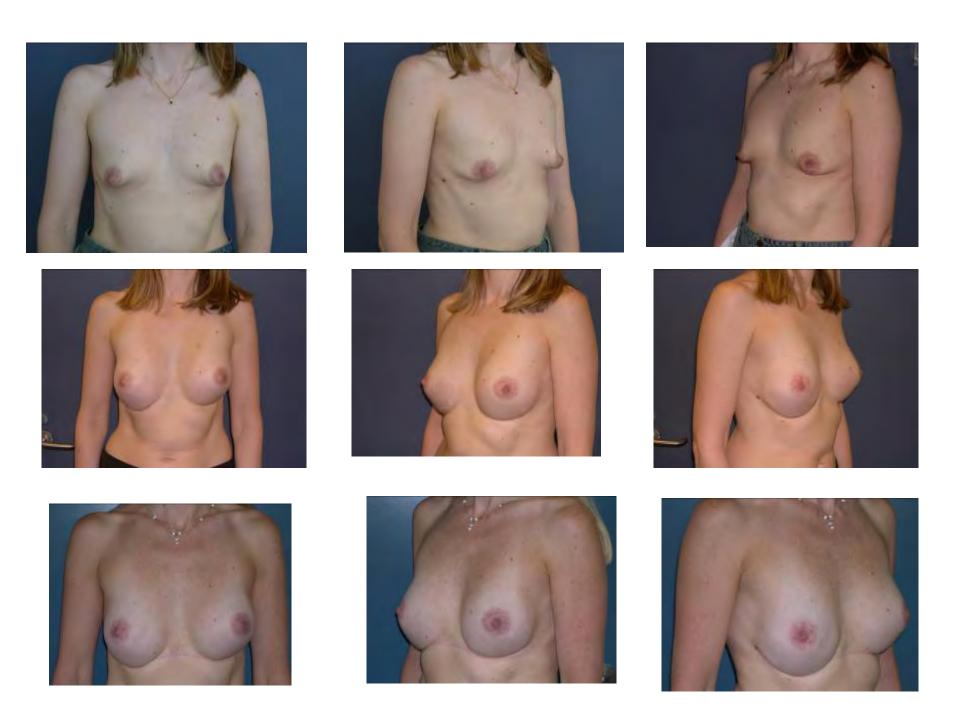






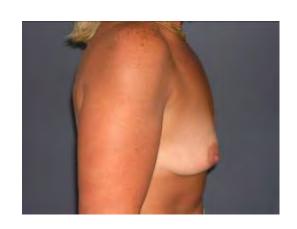


Tight IMF







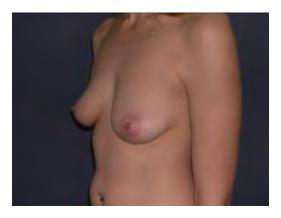


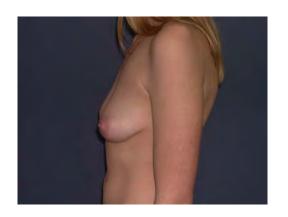








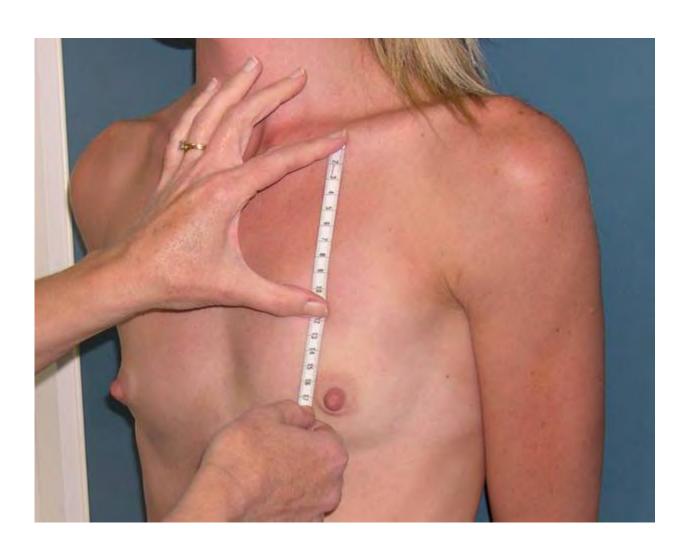




























Pigeon chest

Angled anatomical implants





The Gym Junkie

On a hiding to nothing!

































Chest wall asymmetries

An uninformed patient becomes an unhappy patient









Take time with consultations

- What the patient wants
- What you need to add to get there
- Assess if this is possible
- Negotiate
- Compromise
- Warn of consequences of their decision; short term and long term