

hen it comes to cosmetic breast augmentation with implants, today's woman desires more natural looking results and the new generation of breast implants is helping to make this possible, says Tracy M. Pfeifer, MD, MS, a plastic surgeon in New York City.

"Women have more choices then ever before and we can really customize their result based on their aesthetic goals and body type," she says. "It's a whole new world out there for women seeking breast augmentation or revision breast augmentation."

One thing that never changes, however, is the popularity of breast augmentation with implants. This procedure consistently ranks as the No. 1 or No. 2 surgical procedure performed each year. In 2012, it was No. 1 with 330,631

breast augmentations performed, according to the American Society for Aesthetic Plastic Surgery (ASAPS).

For years, the only option for these women was implants filled with saline (salt water) because the federal Food and Drug Administration (FDA) had placed a moratorium on the use of silicone-filled breast implants outside of clinical trials. This ban lasted 14 years. It was finally lifted when silicone gel filled-breast implants were exonerated as a cause of systemic disease.

Slowly but surely, consumer confidence in silicone-filled breast implants grew, and they overtook their saline-filled counterparts in popularity. In 2012, 28 percent of implant-based breast augmentation surgeries were done with saline implants and 72 percent were performed using silicone-filled implants, and this percentage may continue to grow now

that three "shaped" implants are available.

Three's Company

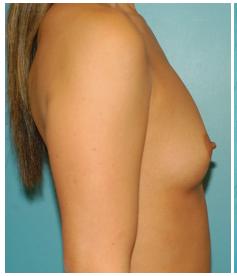
The approval "frenzy" began when Sientra's implants received the coveted FDA nod in March 2012. Next came the approval of Allergan's Natrelle® 410 in February 2013 and then Mentor's MemoryShape™ implant (formerly known as the CPG®) in June 2013.

While all silicone gel-filled breast implants are "cohesive" (sticky or gummy), the gel in the shaped implants is considered even more cohesive. They are often called form-stable or gummy bear breast implants. If the new implants are cut in half (much like gummy bear candy), the gel will not go anywhere.





ROUND VS. SHAPED IMPLANT: A COMPARISON Note how the Shaped Implant maintains fullness and height (top right) and projection and form (lower right)







PRE-OP

POST OP: Shaped Implant (Note: Natural Slope)

POST OP: Round Implant (Note: Exaggerated Upper Pole))

With so many choices, it can be difficult for women to decide which implant fill is best for them. "I start by asking what type of look they are hoping to achieve," Pfeifer says. "Do they want an exaggerated upper pole or a more natural look?" (The upper pole is the area of the breast mound above the nipple.)

Breast augmentation is following a similar trajectory to facial plastic surgery. Women are craving natural results. They don't want to look overly done or inflated. Gone are tightly pulled faces, and instead women are opting for subtle enhancements. Same is true with breast implants. "More and more women come in saying they want natural results," she says. "Now we have these new implants that can provide the type of results that many of these women want." The shaped implants produce less fullness in the upper breast than traditional smooth round silicone gel implants.

Different Strokes

These new shaped implants are also referred to as anatomical or tear-drop shaped because they model the breast's natural slope. "If somebody wants a very full upper pole, they want a round implant, but if they want a natural slope, a shaped implant is their better bet," she says.

"The shaped implants have different footprint," she says. "The

traditional silicone gel-filled implants have a round base, but not everyone's breast is perfectly round."

Some tall, thin women may have a breast that is taller than their width. Others may have an oval shaped breast where the width is greater than the height. "In the past, no matter what person's footprint, we had to use a round base implant," she says.

Pfeifer has a lot of experience using the shaped implants, but not all breast surgeons do because they are so new to the scene. "Patients who want the new shaped implants should seek plastic surgeons who have experience with these implants. The approach to planning the operation is very different from what plastic surgeons have been used to with round implants. It takes experience to achieve the best result using shaped implants. There is a definite learning curve," she says.

These new options have also changed the playing field for women seeking revision breast augmentation. Some women may want to trade in their saline-filled implants for a more natural-feeling implant. Silicone's greatest advantage over saline-filled implants is that they feel more natural to the touch. Saline implants feel more like water balloons. Others

Breast Augmentation Cheat Sheet

Considering breast augmentation with implants? You will likely start hearing a lot of words that sound foreign to you. The "Glow Breast Implant Cheat Sheet" will help you speed the learning curve.

Capsular Contracture: The body makes a capsule around each and every implant. This capsule is usually thin and supple but in some cases the capsule becomes thicker. We call this thickening contracture and it can result in causing the implant to feel firmer or distorting its shape. There are many steps plastic surgeons take to avoid capsular contracture.

Texture: The surface of the outer shell of a breast implant can be smooth or textured. Textured implants have a sandpaper-like surface. Smooth implants have a balloon-like surface. Shaped implants are only available with a textured surface because this surface helps keep them locked in position.

Shaped Implants: These breast implants are also referred to as contoured, anatomical, or teardrop-shaped implants. They are shaped like a natural breast and create a sloped shape when placed over the chest muscles.

Inframmary Incision: This is a type of incision that can be used for breast implants. An inframammary incision is located in the crease below each breast. There are four basic locations for incisions in breast augmentation surgery. A periareolar incision is located at the junction of the areola and the less pigmented breast skin. A transaxillary incision is made via the armpit. A transambilical (TUBA) incision is a belly button incision.

Projection: This is the term for the profile of the implant or how far it protrudes from your chest. Profile types are chosen based on the desired aesthetic result, the patient's chest width, and the volume desired.

Upper pole: This is the area of the breast mound above the nipple.

may have experienced a complication that requires revision surgery, and others still are ready to upgrade because breast implants are simply not made to last a lifetime. The lifespan of these devices tends to vary.

"We are also seeing lower capsular contracture and lower leak rates with new shaped implants," she says.

The bottom line is that no one implant fits all comers. Choosing the right one involves a thorough discussion with a board certified plastic surgeon. The conversation should take both your aesthetic goals and your anatomy into account. Your surgeon will help you "try-on" breast implants in various sizes to see which is best for you. (Bigger is not always better, especially if it doesn't fit your frame.) Always ask to

see before-and-after photos to get a better visual of what your new breasts will look like after surgery.

"All of the new choices means that there is something for everyone," Pfeifer says.

Dr. Pfeifer has three conveniently located New York area plastic surgery offices — one in Manhattan on the Upper East Side, another on Long Island, in Great Neck, and a third office in the Hamptons, in Quogue. •

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