

Direct to Implant ("One Step") Mastectomy Breast Reconstruction Reduces Number of Surgeries and Time to Final Cosmetic Results

PR Newswire

TARRYTOWN, N.Y., May 23, 2013 /PRNewswire/ -- [Direct to implant, or "one step," breast reconstruction](#) [1] following mastectomy is an appropriate option for many women with BRCA (BRest CAncer) gene mutations seeking to surgically reduce their breast cancer risk, or with breast cancer. Traditionally, post-mastectomy reconstruction involves a gradual expansion process and a second surgery to insert permanent implants, but immediate placement of implants in the same surgery as mastectomy can be a medically and cosmetically effective alternative.

The direct to implant procedure provides an immediate breast reconstruction within one surgery, with a permanent implant placed in the breast immediately following breast tissue removal. A specially prepared skin tissue, or acellular dermal matrix (ADM), is positioned over the implant as a muscle extender to avoid the need for tissue expanders. Direct to implant breast reconstruction is often performed as part of a nipple sparing mastectomy.

"Angelina Jolie and other celebrities who have disclosed their breast cancer risk-reduction choices have helped open a public dialogue that benefits high-risk women facing similar decisions," said [C. Andrew Salzberg, MD, of the New York Group for Plastic Surgery](#) [2] and associate professor at NY Medical College and Chief of Plastic Surgery at Westchester Medical Center, who pioneered the direct to implant breast reconstruction procedure using ADM more than a decade ago. "It's important that women are made aware of the range of surgical options available to them."

"Many women are eligible for direct to implant surgery, which provides excellent aesthetic results with reduced physical discomfort and time to final cosmetic results," said Dr. Salzberg. "We typically perform the entire direct to implant procedure in three hours, which is shorter than most other mastectomy and breast reconstruction surgeries and lessens time spent under anesthesia." He added that while some patients will require or opt for a follow-up revision procedure, most won't need further surgery after the initial procedure.

The traditional mastectomy and breast reconstruction procedure requires tissue expanders placed in the breast immediately after breast tissue removal. The expanders are filled with saline over three to six months to stretch the skin and muscle, and permanent implants are placed during a second surgery.

Direct to implant surgery allows a woman to wake from surgery with reconstructed breasts and no waiting time to completion, said Dr. Salzberg. He stressed, however, that the success of a direct to implant procedure requires appropriate patient selection and a comprehensive pre-surgery consultation to confirm that this surgical

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option is best for the individual woman and to review the risks and benefits.

"An ideal candidate for direct to implant, or one step, breast reconstruction has healthy breast skin that can stretch for the implant and doesn't have excessive sagging, known as ptosis," Dr. Salzberg said. "Also, for a very large breasted woman choosing prophylactic mastectomy, particularly if she wants to spare her nipples, we may first perform a breast reduction followed by a separate surgery for the mastectomy and direct to implant reconstruction."

Dr. Salzberg published his most recent peer-reviewed study on direct to implant mastectomy and breast reconstruction in the November 2012 issue of *Plastic and Reconstructive Surgery*, the journal of the American Society of Plastic Surgeons. It included women who had mastectomy and breast reconstruction for breast cancer or prophylactically (preventively) because of high genetic risk such as a BRCA mutation or strong family history of breast cancer. The procedure was shown to be safe and reliable with a low overall complication rate.

About Dr. Salzberg and the New York Group for Plastic Surgery

C. Andrew Salzberg, MD specializes in breast reconstruction and cosmetic procedures as a board certified surgeon with the New York Group for Plastic Surgery (NYGPS). He regularly performs direct to implant breast reconstruction on women from around the country who are undergoing mastectomy for cancer treatment or prevention. The New York Group for Plastic Surgery is comprised of highly trained plastic surgeons certified by the American Board of Plastic Surgery (ABPS) and recognized for their specialized medical and cosmetic surgical skills and personalized patient care.

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[1] <http://www.nygplasticsurgery.com/reconstructive-surgery/breast-reconstruction/direct-to-implant.php>

[2] <http://www.nygplasticsurgery.com/surgeons/dr-salzberg/>