

Specific Risks of Breast Lift or Mastopexy

Every surgical procedure involves a certain amount of risk and it is important that you understand these risks and the possible complications associated with them. In addition, every procedure has limitations. An individual's choice to undergo a surgical procedure is based on the comparison of the risk to potential benefit. Although most patients do not experience these complications, you should discuss them with your plastic surgeon at The Aesthetic Center by Kaiser Permanente to make sure you understand all possible risks of breast lift surgery.

Change in Nipple and Skin Sensation

You may experience a diminished (or loss of) sensitivity of the nipples and the skin of your breast. Partial or permanent loss of nipple and skin sensation can occur after a mastopexy in one or both nipples. Changes in sensation may affect sexual response or the ability to breast feed a baby.

Breast Augmentation and Simultaneous Mastopexy

Risks associated with the potential use of breast implants are covered in a separate informed-consent document according to the type of implant selected. However, patients who choose to undergo breast implant augmentation and elect to have it at the same time as a breast lift (mastopexy) may be at increased risk of necrosis of skin, nipples, and breast tissue due to decreased blood supply to the tissues.

Mastopexy Performed at the Time of Breast Implant Removal Surgery

Patients who choose to undergo simultaneous removal of breast implants and capsules and elect to have it at the same time as a breast lift (mastopexy) may be at increased risk of necrosis of skin, nipples, and breast tissue due to decreased blood supply to the tissues from earlier surgery. Risks associated with the removal of breast implants are covered in a separate informed-consent document.

Skin Contour Irregularities

Contour and shape irregularities may occur after mastopexy. Visible and palpable wrinkling may occur. One breast may be smaller than the other. Nipple position and shape will not be identical one side to the next. Residual skin irregularities at the ends of the incisions or "dog ears" are always a possibility when there is excessive redundant skin. This may improve with time, or it can be surgically corrected.

Use of Acellular Dermal Matrix

In order to perform the breast lift surgery, your plastic surgeon may choose to use biological materials. Most commonly, these materials are derived from human cadaver skin or pig skin. These materials are generally processed and do not carry any viable cells. You should ask your surgeon about these materials. They provide help to support the breast tissues and become populated with your cells, becoming similar to your own tissue. These acellular products may produce fluid and require drains for a prolonged period of time.

Delayed Healing

Wound disruption or delayed wound healing is possible. Some areas of the breast skin or nipple region may not heal normally and may take a long time to heal. Areas of skin or nipple tissue may die. This may require frequent dressing changes or further surgery to remove the non-healed tissue. Individuals who have decreased blood supply to breast tissue from past surgery or radiation therapy may be at increased risk for delayed wound healing and poor surgical outcome. Smokers have a greater risk of skin loss and wound healing complications.

Breast Disease

Breast disease and breast cancer can occur independently of breast lift surgery. Individuals with a personal history or family history of breast cancer may be at a higher risk of developing breast cancer than a woman with no family history of this disease. It is recommended that all women perform periodic self-examination of their breasts, have mammography according to American Cancer Society guidelines, and seek professional care should a breast lump be detected. In the event that suspicious tissue is identified prior to or during breast surgery, additional tests and therapy with corresponding expenses may be warranted.