



Bayside Plastic Surgery

Secondary Breast Augmentation (Breast Implant Exchange) by Dr David Ross Plastic Surgeon

Removal and replacement of breast implants may be required for many reasons. There may be a complication with the implant requiring removal. The commonest reason for this is development of capsular contracture (scarring around the implant), which will cause firmness of the implant in the breast and possibly breast asymmetry. Occasionally capsular contracture can be the cause of breast pain, although this not common. This situation is much more likely with silicon gel filled implants due to silicon bleed from the implant causes scarring around the implant with time. Capsular contracture in saline filled implants usually occurs early and relates to issues with the initial healing soon after insertion.

Another reason requiring implant removal is the development of implant leakage. Often leakage from silicon gel filled implants is difficult to detect. It can sometimes be many months or even years before a leaking silicone gel filled implant becomes evident. The signs of this are usually a degree of asymmetry of the shape or size between the two breasts. A later sign would be the development of breast lumps which would signify leakage of silicon gel into the breast tissue and scar reaction to it. It is thought that the

new cohesive silicon gel implant will not have as much leakage following rupture, although that has not been proven in practice as yet. If leakage of a silicon gel implant is suspected it should be investigated by an ultrasound examination or better still by MRI (magnetic resonance imaging) to determine the extent of the silicone gel leakage, in preparation of removal and replacement with new implants. Leakage of saline filled implants is usually much more evident as the affected breast will deflate and asymmetry will become evident quite quickly. Radiological examination of the breast is unlikely to be necessary and as the leaked saline is compatible with the body and therefore is not dangerous.

Another reason requiring implant removal and replacement is rippling and palpability of the breast implant. This situation used to be most common with saline implants, which were not adequately filled and then were placed directly under the breast in thin women. With improvement in saline implant design and submuscular implant placement this is much less likely to be an issue currently. However there is sometimes a benefit in selecting silicon gel filled implants in very

lightly built women where implant palpability may be a possibility.

Other reasons for removal and replacement of breast implants are mainly cosmetic. These relate to breast symmetry and position. Sometimes although good implant position and symmetry was achieved intraoperatively, differential healing between each breast may result in a degree of breast asymmetry in the first couple of months following surgery. If there is no evidence of developing capsular contracture then the asymmetry will probably settle over the first six months and it is probably best not to reoperate again at that stage unless the asymmetry is significant. The final reason for implant exchange is usually related to implant size. There is a small percentage of women who are not happy with their new breast size following breast augmentation or circumstances change (usually children and breast feeding), which necessitate implant removal with or without replacement with a smaller or larger breast implant.

Secondary breast augmentation (breast implant exchange) is much more difficult than initial breast implant surgery, due to scarring or silicon gel leakage. To create a natural breast contour the surgeon needs to remove all scar tissue as well as the existing implants and create a new chest wall pocket to allow replacement with new breast implants. It is not unusual for women who have had problems with their implants, be they silicon gel or saline filled implants, to request replacement with a different implant

so their previous complication can be avoided again in the future. It should be noted that when scarring occurs due to a ruptured silicone gel implant, that removal may not remove the propensity to further scarring due to residual silicon gel disseminated through the breast tissue which is virtually impossible to remove completely.

Secondary breast augmentation is usually a very worthwhile procedure if required, with high patient satisfaction. If you have any concerns about your current breast implants or would like to discuss this procedure in more detail or clarify any of the issues mentioned here please contact our office for a consultation.

Bayside Plastic Surgery
412 Bay Street Suite B
Brighton VIC Australia
Ph: 03 9596 8888
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