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Tuberous breast, a real challenge: A new classification system and personal approach

Alessandro Innocenti and Dario Melita

Plastic and Reconstructive Microsurgery – Careggi University Hospital – Florence, Italy

Following analysis of the literature and a significant number of treated cases, in this presentation the authors propose a new classification of tuberous breast, with the aim of summarizing and simplifying a more intuitive categorization of the malformation. Between 2006 and 2015, 78 patients underwent surgery. Mean age was 18.6 years. There were 11 monolateral deformities for 145 treated breast. A periareolar approach, adipo-glandular flaps and dual-plane breast implant placements were performed. The authors present a personal classification including all the forms of the deformity, plus the minor forms based on the two principal categories: hypoplastic and normoplastic tuberous breasts, taking into account all the clinical aspects of the malformation including the morphology and the consistency of the breast. Our long-term result is 6 years with a minimum follow-up of 6 months. No particular differences

have been noticed between anatomical and round implants in the long run. Anatomical implants become more natural faster, otherwise implant rotations should be considered. No serious complications have been reported. Few cases of NAC temporary hypoesthesia resolved spontaneously. No hematoma requiring surgical revision, no NAC necrosis and no necrosis of the adipoglandular flaps; their vitality was not distributed by rotational movement and the pedicles have been demonstrated valid and reliable. Aesthetically pleasing results were ranked as high as 98% by the use of a multiple-choice survey. Preoperative identification of the type of the deformity is essential to obtain satisfactory results and a complete and intuitive classification, is fundamental for diagnosis.

innocentialessadro@alice.it