



Actual Patient

special report
on
Breast Enlargement

by Dr M. F. Lai

MBBS(Uni NSW) FRCS(Ed) FRACS

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by
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Disclaimer: While every effort has been made by Dr M.F. Lai to ensure accuracy of this report, no responsibility and/or liability will be accepted for errors or omissions. The information here has been compiled from studies into silicone breast implants and generally widely accepted surgical practice. Risks and benefits of having the operation must be discussed with Dr Lai before undergoing the procedure.



Dr Lai graduated in Medicine from the University of N.S.W. in 1972. After internship he trained in General Surgery, and following further examinations he was awarded in 1978 Fellowship of the Royal Australasian College of Surgeons and Fellowship of the Royal College of Surgeons of Edinburgh. Dr Lai was then recognised as a specialist surgeon by the Health Insurance Commission of Australia.

Dr Lai undertook further training in Plastic Surgery for another three years in Sydney and in Bristol in the United Kingdom. He returned to Sydney in 1982 and started private practice in Plastic Surgery. Dr Lai was appointed as a visiting Plastic surgeon to Westmead Teaching Hospital, Concord Teaching Hospital and Auburn District Hospital. He practised reconstructive as well as cosmetic plastic surgery during the early years.

Nearly ten years ago Dr Lai changed his practice profile by performing only cosmetic plastic surgery.

Breast enlargement is an operation Dr Lai performs regularly over the last twenty years. He has appeared on television programs like Good Medicine and Sex Life, performing the breast enlargement operation.

Dr Lai has written this latest updated and comprehensive report for women wanting to have breast enlargement. This report has been compiled from over 20 years of Dr Lai's experience in breast enlargement. After reading this report you should have a very clear understanding of this procedure. For women wanting to have breast enlargement, reading this report should be an important part of the preparation towards having this operation.

Please remember that to have a complete understanding of breast enlargement you should still seek an appointment to see Dr Lai. So after reading this report, pick up the phone and call either (02) 9222 9333 or (02) 9689 2244 to organise an appointment.

Welcome to this special report on breast enlargement. You have more than likely been considering breast enlargement for quite some time. It probably has been on the back of your mind and you have now taken the admirable courage to make an enquiry.

There is no need to feel guilty about wanting to have a breast enlargement. It will be explained to you why many women request to have this procedure carried out on them. In the majority of cases the reasons are very valid.

Since the 1960s millions of women all over the world have had this operation. The majority have expressed great satisfaction with the results of the procedure. Many have experienced significant improvement in their self esteem which has resulted in a great boost in their self-confidence. So read on more about breast enlargement.

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The Significance of Your Breasts

The emotional significance of your breasts is very important to you.

Your breasts are among your most valued physical possessions because they are the most obvious and prominent external signs of you being a woman. They symbolise the special female role of becoming or being a mother and associated maternal feelings. They are also an important part of the female sexuality, being a source of sexual and erotic pleasure.

Your breasts are therefore the emotional symbols of your pride in your femininity, sexuality and motherliness. These are either closely related or represent an important part of your body image, self-esteem and self-confidence.

Situations When and Reasons Why Women Want Breast Enlargement

Young girls with small breasts are usually embarrassed and develop anxiety about whether their breasts will grow bigger. Often they suffer shame by being teased at school for not being a woman. They develop a fear of not being able to establish a meaningful relationship with boys. Subconsciously this 'baggage' is often carried into their adulthood.

After breast-feeding or weight loss the breasts may shrink in volume and droop. Comments from so-called 'friends' like, "where have your breasts gone?" or "so you have empty bags now" do not help. Bitterness can result because of not looking as attractive or feeling as youthful as before. There is always the fear of the partner or husband going off with another woman. This leads to insecurity or loss of self-esteem and confidence.

For some ladies with small breasts they are unable to fit into bikinis or other swimwear. Instead they resort to wearing T-shirts whenever they are at the beach or around the pool. Some don't even venture into these areas and give all sorts of excuses when invited by their friends to pool parties or the beach. For mothers with children wanting to go to the

beach or pool parties, conflicts arise because the excuses eventually run out.

Many small-breasted women have felt shame or embarrassment undressing in front of their partners. Instead they undress only in the dark. Some even continue to wear their bras while being intimate with their partners. Often these women long to be able to buy and wear attractive lingerie.

Another problem small-breasted women face is the buying of clothes. Usually the top is too big when the bottom half fits, or the bottom half too small when the top fits. They resort to wearing padded bras or 'falsies' to compensate for the problem. There is a great deal of inconvenience with dressing, undressing and picking the right clothes.

Some women have very uneven breast sizes and shape with very significant sizes difference between the left and right side. They resort to padding the bra on the smaller side with foam, socks or 'falsies'. All in all there is a great deal of inconvenience and eventually these women get tired of doing so and ask for breast enlargement.

Such situations mentioned above have lead many women to have breast enlargement. Many have transformed themselves and look fabulous. You may have had similar experiences like the above situations.

In summary the following are the reasons you are considering breast enlargement.

- ▶ You are bothered by the feeling of having small breasts.
- ▶ You feel self conscious and embarrassed in swimsuits and form fitting tops.
- ▶ Clothes fitting your hips are too large for your bust line.
- ▶ Your breasts have become smaller and loose since having children.
- ▶ Weight loss has altered the size and shape of your breasts.
- ▶ One of your breasts is noticeably smaller than the other one.

When Should Breast Enlargement Be Avoided?

If you have the following conditions you should not have breast enlargement.

1. A history of recurrent breast cancer.
2. A history of other cancer that has spread.
3. Fibrocystic disease of the breast.
4. A history of sensitivity to foreign material.
5. Previous failed breast enlargement procedures.
6. Infection of the breast.
7. Active infection elsewhere on the body.
8. Drugs that interfere with blood clotting.
9. Psychological or psychiatric illness.
10. Serious medical conditions.
11. Wanting breast enlargement to satisfy your partner.

About Silicon and Silicone

Silicon is one of the most common elements on earth, forming part of rocks and sand. All of us humans carry some form of silicon in our bodies.

Silicone is a man-made plastic, made from Silicon, oxygen and other elements. It can be in the form of liquid, gel or solid. It is used extensively in cosmetics, food preparation, medicine and medical devices like artificial joints and breast implants.

Silicone is regarded as one of the most compatible material for implanting into the human body. Reviews of recent research and scientific literature have shown no convincing evidence that silicone gel filled breast implants causes cancer. Nor do they cause connective tissue diseases such as scleroderma, systemic lupus erythematosus or rheumatoid arthritis.

What Are Breast Implants Made Of?

Currently, breast implants that are approved for use in Australia are made of a silicone bag (known as casing, shell or envelope) that is filled with cohesive silicone gel or saline (salt water).

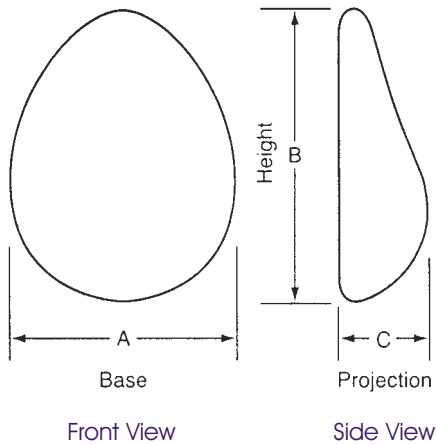
In Australia, cohesive silicone gel implants are now the implants of choice. Over the years technology has advanced significantly resulting in development of new generation breast implants.

Modern day breast implants are now manufactured under strict quality control with a thicker casing containing the cohesive silicone gel. This thicker silicone casing reduces the chance of gel leakage (gel diffusion), implant rupture and hard capsule formation. The cohesive silicone gel is semi-solid which does not flow like a liquid when the implant is sliced for demonstration. The gel also feels quite natural like ordinary breast tissue.

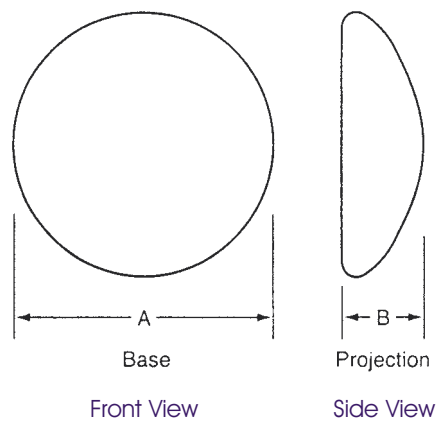
The Shapes of Breast Implants

The shape of the breast implant is either round or teardrop, with different base widths and projections.

Teardrop Implant



Round Implant



In young girls the breast shape is usually round because of good skin tone. When one gets older the breast shape changes to a teardrop. The upper half becomes emptier and flatter and the lower half fuller. Most women wanting breast enlargement want a fuller upper half to have younger looking breasts. Therefore they request the round implants.

After breast enlargement there is always the risk of the breast implant rotating (spinning) in its pocket (space). When a round implant rotates the shape of the breast is still the same. However when a teardrop implant rotates the shape of the breast becomes distorted. This is the small risk you have to accept if you request to have a teardrop implant.

In special situations teardrop implants are recommended and Dr Lai will fully explain to you the reasons for this. Similarly if you request to have teardrop implants Dr Lai will assess your suitability.

The Surface of the Breast Implants

The surface of the breast implants can either be rough (textured) or smooth.

The textured surface has been shown to decrease the incidence of thick scarring around the implant (capsular contracture) compared to the smooth surface implants. Dr Lai prefers to use the texture surface cohesive gel implants.

Nowadays the risk of further surgery to correct capsular contracture is about 5%. This is a significant decrease compared to years ago when liquid silicone gel implants were used.

Breast Implants Preferred by Dr Lai

Generally Dr Lai prefers the use of round textured surface cohesive gel breast implants. Different profiles are selected according to what is best suited for the patient. Sometimes teardrop implants are recommended.

Currently the silicone casings are made much stronger and thicker than the original silicone implants from years ago. This is to lessen the chances of gel leakage, implant rupture and capsular contracture.

The cohesive silicone gel inside the casing is not like the liquid silicone from years ago. It has the consistency of 'Turkish Delight' and feels more natural like breast tissue. Even if the casing ruptures the cohesive silicone gel does not leak like liquid.

Generally the gel in the teardrop implant is of a firmer consistency because the shape has to be maintained. The gel in round implants is generally softer so that in an upright position the gel falls downward to try and form a teardrop shape.

A Word About Saline Breast Implants

Saline breast implants are implants with a silicone casing that is filled with saline (salt water). They are heavier than cohesive silicone gel implants and tend to feel firmer and different to breast tissue. It is therefore harder to sleep on your front and they often feel cold.

Saline implants have a very high incidence of rippling which can be visible. This results in a very unsightly appearance of a wrinkled breast. Try holding a balloon filled with water by your fingers and you can see the similar effect.

There is also a very high chance for saline implants to deflate suddenly. When this happens on one side you will end up with lopsided breasts. There is an urgency to replace the implants with another operation.

Life Expectancy of Cohesive Gel Breast Implants

Like everything in life nothing can last forever. The life expectancy of these breast implants is influenced by the reaction of your body to the implant, the lifestyle you lead and also your occupation.

You would probably get about 10 years or more in the life expectancy of cohesive gel breast implants. If there is no change in shape of your breast, no evidence of rupture or capsular formation, there is no need to change the implant. This is despite however long the implant has been in the breast.

Incisions (cuts in skin) For Breast Enlargement

There are three possible incisions through which the breast implant can be inserted.

1 Inframammary

This is along or below the crease where the breast meets the chest wall. Usually it is 4cm to 5cm in length.

It is the most popular incision and is used by Dr Lai. It allows a good exposure of the space (pocket) to be created to place the implant in. Bleeding can be easily controlled because of the good exposure.

The resulting scar in the crease usually fades in time.

2 Periareolar

This is a semicircle at the border of the areola (the pigmented skin surrounding the nipple).

The size of the areola limits the size of the implant that can be inserted. There is also an increased risk of nipple sensation loss as well as distortion with this incision.

Dr Lai rarely uses this incision.

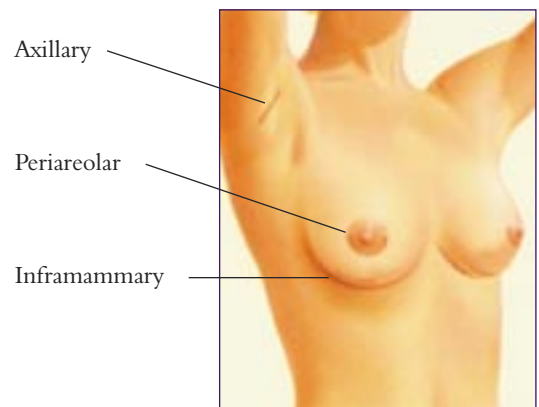
3 Axillary

This is an incision in the armpit. There are certain disadvantages of this incision, which has influenced Dr Lai not to use this incision on a regular basis.

The eventual scar, if it does not fade, can be obvious when the arms are raised. If you have olive or darker skin the scar can become pigmented and very obvious, preventing you from wearing short sleeve dresses.

If bleeding occurs it is much harder to control because of limited exposure. It may require a separate inframammary incision to allow control of bleeding.

Bruising is far more common with this approach to inserting the breast implant.



Drains

Following surgery there is still some oozing of body fluid and little blood into the breast pocket. This causes swelling and in turn more pain. To remove the fluid and lessen the pain, drains are used after the operation.

Drains are small tubes put through the skin with one end in the breast implant pocket and the other end in a suction container. These drains are left overnight before removal the next day.

The Space (Pocket) Where the Implants are Placed

There are two spaces where breast implants can be placed.

The first space is directly behind the breast tissue and in front of the pectoralis muscle. This is known as the subglandular or prepectoral space.

The second space is behind the pectoralis muscle and in front of the rib cage. This is known as the subpectoral or submuscular space.

There are pros and cons to the use of either space. Whether one or the other is to be used depends on the breast shape you want, the thickness and tone of your skin, the bulkiness of your breast tissue, the thickness of your pectoralis muscle and the type of implant to be used.

In general subpectoral placement has the following advantages:

- There is less chance of the implant edge showing in the upper border of the breast.
- The upper half of the breast tends to be flatter, as desired by some women.
- There is a slightly lesser chance of capsular contracture (implant hardening).
- There is less chance of loss of sensation to the nipple/areolar region.
- The chance of ripples of the implant showing in the upper half of the breast is also lessened.

The following disadvantages are:

- The implant may move upwards with excessive muscle action, especially in body builders.
- There is also the remote chance of implant rupture with excessive muscle action.
- There is slight loss of muscle power, which can affect your performance as an active sportswoman, for example swimming.

- Because of the muscle attachments, it is not possible to place the implant closer to the middle. This may cause the appearance of a wider gap between the breasts and affect the chances of getting cleavage.
- If the implant is not big enough to expand the muscle, the breast tissue may roll on top of the muscle causing a 'double bubble' effect.
- There is more pain post-operatively.

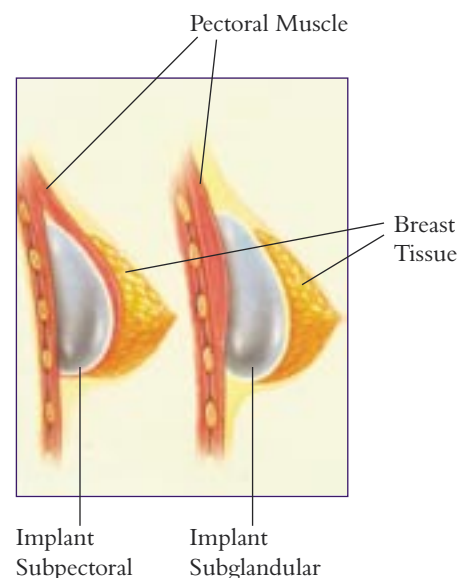
In general subglandular placement has the following advantages:

- The upper half of the breast tends to be fuller, as desired by some women.
- The implants can be placed closer to the middle. This lessens the gap between the breasts and creates cleavage.
- There is less pain post-operatively.
- There is less chance of a 'double bubble' occurring.
- There is less chance of movement with muscle action and there is no loss of muscle power.

The following disadvantages are:

- In thin women, the implant edge may show in the upper border of the breast.
- Rippling of the implant may also show in thinner women.
- There is a slightly higher chance of capsular contracture (implant hardening).
- There is increased risk in loss of sensation to the nipple/areolar region.

The above influencing factors can only be assessed and determined by Dr Lai at the time of consultation. Therefore selection of breast pockets can only be determined after Dr Lai has examined you.



Limitations in Getting Attractive Looking Breasts After Breast Enlargement

The shape of the breast and chest is different from one woman to another. Despite that breast enlargement usually results in not only enlarged but also attractive looking breasts.

However sometimes the original shape of the breast or chest will not give the usual pleasing looks after breast enlargement. Dr Lai will be able to inform you whether this is likely to happen after he has examined you. Compromises may have to be made to give the best possible result.

For example the tubular breast which looks like an ice-cream cone. Here the base is narrow and the distance from the base to the nipple is long. Then there is the breast where the nipple-areola is not centred on the breast base. Next is the breast with a very small base with very little breast tissue. In such instances, selection of breast implants and their placement is very important to lessen the chance of the 'double bubble' effect.

Sometimes the chest wall or the breasts themselves are different between the left and right sides. Different sized implants may have to be used to try to even up the appearance when possible. If this is not possible the breast sizes will still be uneven after breast enlargement.

The gap between the breasts may be wide before the enlargement. In such cases, this situation will remain the same, or the gap may even be more noticeable after breast enlargement. Cleavage in such cases is harder to achieve, especially if the skin in this area (the breast bone) is thin. When implants are placed behind the muscle in such situations the gap may appear even wider and cleavage much harder to achieve. This is because the muscle attachments prevent the implants to be placed closer to the middle of the chest.

Some women are very thin. Here there is a possibility of being able to feel the edge of the implant or in some cases seeing the wrinkles of the implant.

When a breast is too droopy, breast enlargement alone will not lift the breast. A breast lift will need to be done.

Despite the limitations mentioned, the majority of

patients with these limitations have been very happy after breast enlargement. Perhaps this is because they have been made aware of these limitations.

It is therefore important for you to see Dr Lai for a consultation to have a realistic idea of the possible outcome from breast enlargement.

The Risks and Possible Complications

With all things we do in life, there are always associated risks and possible complications. What is about to be described here is not meant to frighten you, but to make you aware of the possibilities. It is no different to being conscious of the risks you take when crossing the road, driving a car, flying in an aeroplane or skiing downhill.

Because breast enlargement is a totally elective operation you must be in good health before going ahead with the procedure. Eat healthily with plenty of fruits and vegetables, keep fit and have plenty of rest. Should you have some illness such as the flu before the date of the operation Dr Lai will postpone the procedure until you have recovered.

Dr Lai also believes in the role of nutritional supplements because the majority of the population do not have a decent diet. Anything to improve your health with the optimal use of vitamins, minerals, antioxidants and phytonutrients would be of benefit in assisting your wound healing.

General Risks

1 Smoking

Smoking increases the risk of all potential complications. These include chest infections, breast infections and poor wound healing. You should stop smoking three weeks before and three weeks after the operation.

2 Anaesthesia

A general anaesthetic, whereby you are completely asleep, is usually used. Sometimes, local anaesthetic with sedation (twilight anaesthesia) is preferred.

Although anaesthesia nowadays is very safe and effective, there are still some risks present, including death and brain damage. Fortunately this is extremely rare with an incidence of about one (1) death in 50,000 cases.

3 Chest Infection

This would be very uncommon if you are healthy before having the operation. There is naturally an increased risk if you are a smoker or suffer from other chest conditions such as uncontrolled asthma. Antibiotics are used as a precaution during and after the operation.

4 Deep Vein Thrombosis

This is due to blood clots developing in the leg. Not moving your legs is a common cause, and although the incidence is rare it can be life threatening. Precautions like leg compression are used during the operation. It is important to move your legs as soon as you recover from your anaesthetic.

Specific Risks

1 Bleeding

Although uncommon, bleeding in the implant space can result in blood clots, called a 'haematoma'. This needs to be removed and the bleeding stopped. The procedure will need to be carried out under anaesthetic in the operating theatre. The final results of breast enlargement should not be affected.

2 Infection

Again this is a rare event but the consequences can be serious. Measures like antibiotics are used during and after the operation. If an infection occurs and cannot be controlled the implant will either push out through the wound or it needs to be removed. Another attempt to carry out breast enlargement can be done after six months.

3 Bruising and Swelling

These are unavoidable after surgery and may take up to three weeks to settle down significantly. The degree of bruising and swelling vary in different individuals.

4 Scarring

Usually the scar starts to fade nine months after surgery. Occasionally the scar becomes thick and itchy. This is called a keloid and it occurs more in women with pigmented skin. Different steps like silicone sheet compression or steroid injection into the scar may be required to improve the scar.

5 Nipple Sensation

Very rarely does the nipple become totally insensitive, that is even to pin pricks. However nipple feeling can occasionally become extra sensitive or less sensitive. Such feelings should settle over the course of six months or so.

6 Nerve Injury

Occasionally the nerve that supplies sensation to the inside of the upper arm is injured. This either leads to pain or loss of sensation in this area. Usually these sensations settle after six months or so. Very rarely would the nerve controlling the movement of the shoulder blade be injured. If this happens 'winging' of the shoulder blade results.

7 Pain

The degree of pain varies from individual to individual. Dr Lai uses a technique that reduces pain very significantly when you wake up from the anaesthetic. Injections or tablets for pain relief are given for your comfort. Pain should subside after about two to three days.

8 Capsule Contracture

After insertion of the implant the body always forms a scar tissue around it. This is known as the capsule. If occasionally the capsule becomes thick and shrinks around the implant, the implant feels hard. This is known as capsule contracture. The breast then feels firm and occasionally painful. It can happen anytime, from months to years after the surgery.

Reoperation to release the capsule and replace the implant may be necessary. Fortunately the incidence of the reoperation for capsular contracture is about 5%. New generation breast implants have resulted in a dramatic decrease in incidence of capsule contracture. Textured surface breast implants as well as placement of the implants in the subpectoral space, when possible, have also contributed to lessening the chance of capsule contracture.

9 Stretch Marks

When stretch marks are present before breast enlargement they sometimes become more visible after the procedure. This is dependent on the colour of the stretch marks and the surrounding skin. Similarly stretch marks can also sometimes become less visible after breast enlargement.

10 Calcium Deposits

These can form in the scar tissue around the implants. When detected by mammograms these deposits may require removal for examination.

11 Seroma

This is a collection of fluid around the implant. Although rare, it can occur after surgery, injury or even vigorous exercise. The fluid, if a very significant volume, may require removal by another operation.

12 Clotted Veins

Very occasionally small veins on the surface of the breasts can become clogged with blood clots and look like cords. These usually settle by themselves spontaneously.

13 Rippling of Implants and Skin Wrinkles

Most implants develop some minor ripples. However sometimes major ripples develop and if the overlying skin is thin, these ripples appear as skin wrinkles.

14 Palpable Edge of Implant

When the overlying skin is thin, the edge of the implant can be felt. This is especially over the lower border of the breast. Occasionally the edge of the implant folds over on itself. When this happens the edge is more easily felt. If this becomes uncomfortable reoperation may be necessary.

15 Lumps and Cysts

These can form also in breasts that have not been enlarged. If they occur after breast enlargement they may require removal for examination.

16 Rupture of Implants

This can happen for no apparent reason at all or may occur after an injury. The breast may become distorted in shape. The rupture is usually detected by mammograms and/or ultrasound. An operation to change the implant is recommended.

17 Gel Diffusion

Microscopic amounts of silicone can escape through the casing into the body. This does not appear to cause any problem for the breast implant or the woman's general health.

18 Granuloma

Sometimes when the implant ruptures, silicone escapes and small lumps can form as a result in the breast tissue. These are not cancerous but should be removed for examination should there be concerns.

19 Chest Wall Deformity

Minor deformity of the chest wall can occur after breast enlargement. This is of no serious consequence.

20 Implant Shift

This is not a common event but sometimes the implant can shift from its original position. The heavier the implant the higher the chance there is for the implant to drop downward. Poor skin tone can also be responsible. Occasionally the breast shape can change because of the shift. Reoperation may then be necessary to correct the shift.

21 Mammograms

It has been recommended that women after the age of 40 should have a mammogram on a yearly basis. For some with a family history of breast cancer this investigation is recommended at an earlier age. Women with breast enlargement should still follow the above recommendations. The x-ray technician must be informed about the presence of a breast implant before the investigation is performed.

22 Breast Cancer

There is no evidence of breast enlargement increasing the risk of breast cancer. Mammographic diagnosis may be slightly delayed in the unlikely event of a breast cancer developing just next to the breast implant casing.

23 Birth Defects

There is no evidence that breast enlargement causes birth defects.

24 Breast Feeding

Breast enlargement does not lessen the ability to breast-feed. Women who have had breast enlargement should be able to breast-feed if they wish to.

25 Pregnancy Effects

During pregnancy and with breast-feeding the breasts become bigger and engorged with milk. After the event, the breasts will shrink in volume. Depending on the quality of the skin tone, the breasts will either return to its previous shape, or become droopy. A breast lift operation can be carried out if desired.

26 Asymmetry

The left and right breasts are normally never exactly the same size or shape. Breast enlargement never corrects this asymmetry.

27 Breast Size and Shape

Despite all measures to achieve the desired breast size and pleasant looking breasts, there is no guarantee that this can be obtained. This is despite the meticulous techniques taken. Surgery is not an exact science and results can vary.

Finally you must always remember that there can be no guarantee that you will be satisfied with your breast enlargement, although the majority of women are following this procedure. You must take steps to understand both benefits and risks before proceeding with breast enlargement.

Your Personal Consultation with Dr Lai

At this time you will be able to let Dr Lai know of your reasons for wanting to have a breast enlargement. You will be encouraged to express what breast size and shape you would like to have. For example whether you want to have a B, C or D cup size, whether you want to have fuller or flatter top half of your breasts. You will be free to discuss all other issues you have in relation to the appearance of your breasts.

Following routine questioning of your medical history and physical examination, Dr Lai will explain in detail what the procedure involves, the risks and benefits as well as realistic expectations of the results.

Your breasts will then be sized to give you an idea of what size and shape implants are to be used. You will be able to see, touch and feel samples of such breast implants.

A written quote will then be given to you informing you about the total costs for this procedure.

Preparing for Surgery and After-Care

Having decided to proceed with breast enlargement, you should take note of the following.

1 General Health

You should be in the best of health before surgery. A diet rich in fruit, vegetables and lean meat is encouraged. Nutritional supplements containing multivitamins, trace minerals, phytonutrients and antioxidants in optimal doses are recommended.

You should avoid blood thinning medications like aspirin, antiinflammatory drugs, or high doses of vitamin E and some herbal supplements three weeks before the operation. You must inform Dr Lai about all medications you currently take.

If you are unwell on or just before the day of the operation Dr Lai will postpone your procedure.

2 Smoking

You should cease smoking three weeks before and three weeks after the operation. Smoking increases the risks of infection and impairs wound healing. If these happen, serious consequences will result.

3 Fasting

You must fast (no eating or drinking) six hours before the operation. The hospital will inform you in detail after you have booked in for the operation.

4 Clothing

Bring in loose-fitting clothing with buttons on the front (blouses or men's shirts) so that you do not need to lift your arms above your shoulders to slip into your clothing.

5 Hospital Stay

The stay is overnight with the drains removed the next day after surgery.

Sometimes a request to go home the same day of the surgery is allowed, but only in special circumstances.

6 Time Off Work

This depends on the type of work you do. Usually two weeks is enough except if you do significant heavy lifting.

7 Driving the Car

Usually you should avoid driving the car for two weeks. Seat belts should be adjusted to avoid pressure on the breasts.

8 Care of Dressings

After removal of the drains, a waterproof coating will be sprayed on top of the tapes covering the wounds. You may then have a shower, but not a bath.

9 Bra Support

After removal of the bandages with the drains, you can wear the sports bra recommended for you to buy before surgery.

Do not wear underwire bras for two months after surgery. The 'wire' may put excess pressures on the wound, which may be painful.

10 Sexual Activity

You should avoid having vigorous manipulation of your breasts for at least three weeks after surgery. Your partner's cooperation with regard to this is important.

These are case studies of some women who had breast enlargement by Dr. Lai. Due to privacy issues their names cannot be published and initials used instead.

All of these women have been very happy with the outcome of their breast enlargement. They know what other women, women like yourself, are going through emotionally because of your small, uneven or shrunken droopy breasts. Therefore they have kindly agreed to have their photos displayed and their cases discussed here. They want women like you to experience the joy and satisfaction they have had after having their breasts enlarged. This is on top of a boost in their body image, self-esteem and self-confidence. Dr. Lai is very appreciative of their generosity in sharing their experience with you.

As you will see, between them they have different shaped breasts from each other. The final result after breast enlargement is very dependent on the original shape. There is a possibility that you may not like some of the results shown here. However you must remember that for these women they have improved very significantly compared to how they were before their breast enlargement.

Although your breasts may look almost the same as some of these women before the surgery, the outcome after your breast enlargement may not necessarily be the same. This is because of factors such as skin and muscle tone and individual healing powers.

Please take time to read these case studies and view their photos.

Case 1 L.E. – 23 Years Old

L.E. started to notice a difference between her breast size during puberty with the left side considerably smaller than the right side. She patiently waited for a few years in the hope that her left breast would increase in size to even up the difference. This did not happen.

She fitted into a 12B cup bra for her right breast. For the left side she had to fill the bra with falsies, foam or socks. This caused a great deal of inconvenience, especially with low cut dresses and swimwear. Naturally her uneven breasts began to affect her relationship and self-confidence.

After persisting for a few years she decided to see Dr. Lai for an opinion as to regard what could be done. At consultation her concerns and desires were taken into account. She only wanted to increase her left breast size to match up with her right breast. She did not want any surgery to her right breast and if possible for her left breast to match her right breast in shape as well.

Physical examination revealed that L.E.'s left breast was significantly smaller than her right breast. Her left nipple was also higher. Her left breast skin tone was slightly tighter than her right. There was a natural droop of her right breast with fullness of the lower half and flattening of the upper half.

Measurements were taken and sizing carried out. The task now was to select an implant shape that would give the left breast a natural droop. A 245gm moderate height, moderate profile textured teardrop cohesive silicone gel implant was selected. The implant was to be placed in the subglandular space (in front of the muscle) to allow full expansion of the breast tissue.

The operation was carried out and post-operatively she recovered without any complication. She now fits into a 12B bra comfortably as she originally wished for. There is no more problem with low cut dresses or swimwear and she is very happy with a much-improved self-esteem.



Before



After

Case 2 P.A. – 22 Years Old

P.A. has always been conscious of her small breasts and her disproportion in dresses with often the top half being too big and loose while the bottom half fitted nicely. Her wish was to fit into these nice clothes without having to pad up her bra.

At consultation P.A. expressed her desire to increase her breast size from a B cup to a C cup. She wanted to preserve her present shape as much as possible with a flatter upper half and a fuller lower half. She preferred to have a teardrop implant to maintain her present shape with an increase in breast volume. She was fully aware that there was a slight chance of rotation of the breast implant, which would result in shape distortion.

It was noted at physical examination

that her breasts' size was small and not in proportion to her height, frame and lower body. Measurements were taken and breast sizing carried out. Her pectoral muscles were noted not to be bulky and her skin tone was not tight. Full height moderate profile 270gm teardrop cohesive gel implants were selected for placement in the subpectoral space (behind the muscle). Selection of the pocket was to lessen the chance of 'show' of the implants' upper edge and minimise the chance of implant rotation.

The operation was carried out according to plan and she recovered well from the procedure. She was very pleased with the outcome, as she had increased her breast size to a 12C cup while maintaining her previous shape. She also fits without difficulty into her dresses, not having to wear padded bras anymore.



Before



After



Before

After



Before

After

Case 3 L.C. – 21 Years Old

L.C. has always been conscious of her small breasts since her last few years in school. Comments from her 'friends' have made her more conscious of her body image. Her bra was an A cup.

She could not fit into an attractive bikini or other swimwear. This did affect her social life to some extent. She also lacked self-confidence because of her low self-esteem.

During consultation with Dr. Lai she expressed a desire to increase her breast size to fit into a C cup. She also wanted a fuller upper half of her breasts, plus narrowing of the gap between her breasts. A cleavage was also on her wish list.

When examined it was noted that besides the breasts being small with a wide gap, they were uneven. Her right breast was slightly smaller and her right nipple was pointing more outwards. Measurements were taken and sizing carried out. 310cc round textured high profile cohesive gel implants were selected. The subglandular space (in front of the muscle) was selected to give a full upper half of the breast and obtain a narrower gap with cleavage. She was fully aware that her right breast would always be slightly smaller and her right nipple would continue to point slightly outwards.

The operation was carried out as planned and her recovery was uncomplicated. She now fits comfortably into a large C cup bra and wears her attractive bikinis with confidence.



Before



After



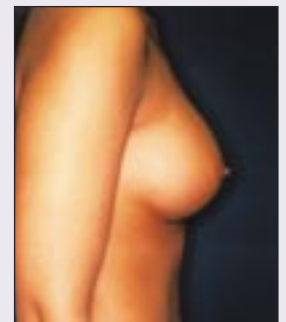
Before



After



Before



After

Case 4 B.B. – 20 Years Old

B.B. has always felt that she did not fit into clothes properly whereby the lower half fits, but the upper half loose. This became quite frustrating and she finally decided to find out more about breast enlargement with Dr. Lai. This was after she read a lot on the subject.

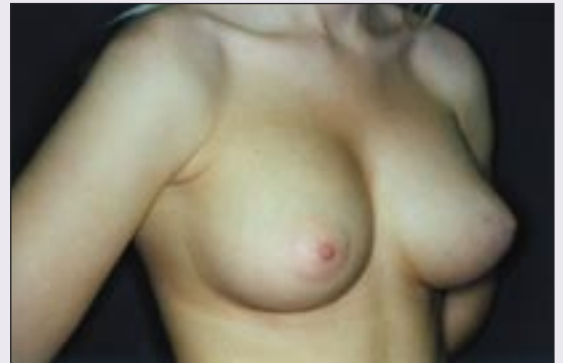
At consultation she revealed that she was fitting into a small B cup, and would like to increase to a large C cup bra. She did not want the implant edge to show on the upper half of her breasts.

Physical examination revealed that her breasts were small in comparison to her frame. The gap between her breasts was narrow and the upper half of her breasts was less full than the lower half. A natural droop was evident. It was decided that 310cc high profile round textured cohesive gel implants be used after measurements were taken and sizing carried out. The implants were to be placed in the subpectoral space (behind the muscle).

The operation was carried out and she recovered well post-operatively. A pleasing result was achieved and she was very happy with the outcome. She now fits into a large C cup bra with no more problems in buying fitting new clothes.



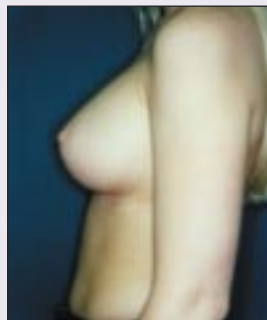
Before



After



Before



After



Before



After

Case 5 H.F. – 24 Years Old

Twenty-four year old H.F. has always loved the outdoor life. Going to the beach was one of her greatest pleasures. However she longed to have those nice well-endowed breasts that many of the ladies had at the beach. Fitting into an attractive bikini was something she desired. Finally she plucked up the courage to seek a consultation with Dr. Lai to find out more about breast enlargement.

When interviewed H.F. revealed she was wearing a small 12B cup bra. If possible she wanted a full upper half of her breasts with a narrow gap and a good cleavage. She wanted to fit into a 12D cup bra.

On examination she was found to have

small breasts with a small base and a wide gap. Her skin tone was not tight. After measurements were taken and sizing carried out a decision to use 310cc high profile round textured cohesive silicon gel implants was finalised. They were to be placed in the subglandular space (in front of the muscle).

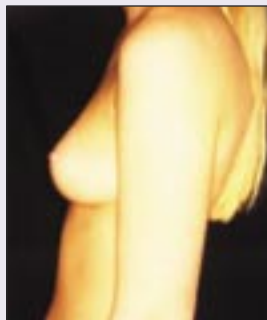
The operation was carried out as planned. Her recovery was uncomplicated and she achieved a very pleasing result. She had to be restrained from showing off her new breasts too soon. Nevertheless after six weeks she acquired some attractive bikinis and was the envy of other women on the beach. Her photos after the operation are evidence of her long hours at the beach. She did fit into a 12D bra cup, as she desired.



Before



After



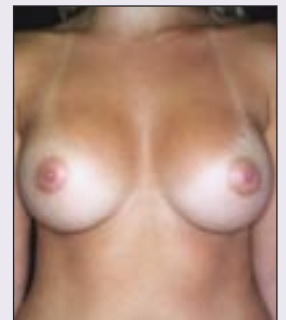
Before



After



Before



After

Case 6

L.B. – 39 Years Old

L.B. has had two children, 17 and 15 years ago. After having her children and after breast-feeding, she noticed that her breasts had become smaller than before the pregnancies.

During the pregnancy her breasts increased in size from a B cup to a large C cup. When breast-feeding she felt quite confident in herself with her breasts being full and 'womanly'. After breast-feeding her breasts began to shrink in size and now fitted into a small B cup bra. She felt a loss of womanhood and for over ten years wanted to do something about it. Finally with the encouragement of her husband she decided to seek a consultation with Dr. Lai.

At consultation she informed Dr. Lai that she wanted to return to the breast size she had when she was pregnant and breast-feeding. She wanted to fit into a large C cup bra with fullness of the upper half of the breast.

When examined it was noted that the skin over her breasts was on the loose side, but relatively good for her age in view of the previous pregnancies and breast-feeding. Her measurements were taken and she was sized. Extra high profile round textured cohesive gel implants were selected. They were to be placed in the subglandular space (in front of the muscle).

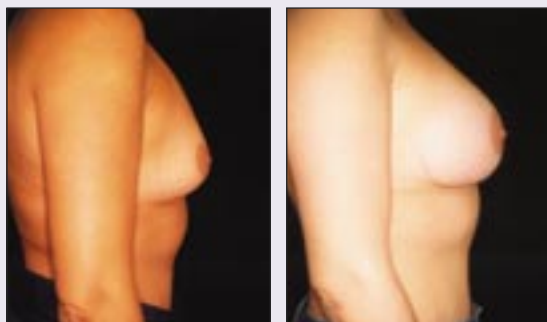
The operation was carried out as planned and she had a very smooth post-operative recovery. She now fits into a large C cup bra and feels that her 'womanhood' has been restored. Her wardrobe of attractive swimwear, form fitting tops and low cut dresses has also increased in numbers since then.



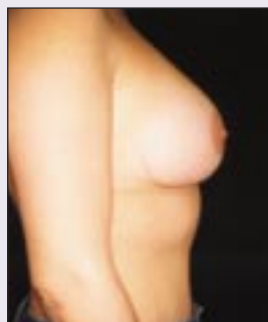
Before



After



Before



After



Before



After

Case 7 P.T. – 26 Years Old

Twenty-six year old P.T. always had small breasts, fitting into an A cup bra. She had put off breast enlargement for a while because she thought it was better for her to do it after having children.

During her first pregnancy more than three years ago, her breasts size increased to almost a D cup. She breast-fed for twelve months and as a result her breast shrank dramatically to less than what she started with. She was back to an A cup bra but her breasts were not filling it. Besides, they were droopy. She did not feel as youthful as before and decided to do something about it by first making an appointment to see Dr. Lai.

When she saw Dr. Lai she indicated that she wanted to correct the drooping of her breasts as well as enlarge them. She wanted to fit at least into a large C cup bra and have a fuller upper half of her breasts. Cleavage was also important to her.

Physical examination revealed that her right breast was slightly larger. Both breasts had loss of volume in the upper half and they were also droopy. The skin over the breasts was loose, but there was enough breast tissue to allow a subglandular placement (in front of the muscle) of the implants.

Measurements were taken and sizing carried out. High profile round textured 285cc cohesive silicone gel implants was selected for placement in the subglandular space.

The operation was carried out according to plan and she recovered well post-operatively. She has now achieved what she wanted by being able to fit into a large C cup, have cleavage with fuller upper half of her breasts, and have the droopiness corrected. She has had a great boost in her body image since, being able to wear the attractive dresses she longed to wear.



Before



After



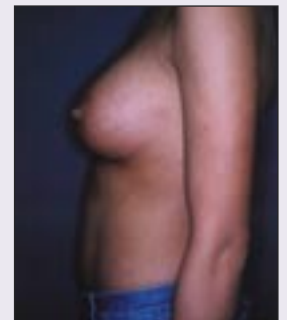
Before



After



Before



After

Case 8 Y.F. – 32 Years Old

Before Y.F. had children she had small breasts fitting in bra cups A to a small B. She was always self-conscious about this, being on the receiving end of comments from school friends who were better endowed. Breast enlargement was always on her mind but she thought it would be better to wait until having children.

Y.F. went on to having four children, breast-feeding all of them over the seven years. During pregnancy and breast-feeding her breasts were full, filling a large C cup bra. She was able to wear low cut attractive dresses, form fitting tops, bikinis and other swimwear.

After breast-feeding her last child, as expected her breasts began to shrink. But much to her horror, after a few months her breasts were much smaller than what she had before her pregnancies. She was now really beginning to feel even more self-conscious about her breasts. Comments from girlfriends like, “where have your breasts gone?” made it more depressing. She began to withdraw from social outings, did not undress in front of her partner and even wore a bra while being intimate with him.

She felt she could not carry on like this and decided to seek advice by making an appointment to see Dr. Lai.

During consultation she poured out all her concerns to Dr. Lai. She wanted to return to the size she was when she was breast-feeding. She wanted to feel like a woman again. She indicated also that if possible she would like to have cleavage, although she was aware that not everyone could have this.

Measurements were taken and sizing carried out after physical examination. It was noted that her right breast was slightly larger. Although the skin was loose with stretch marks, she had adequate breast tissue to allow subglandular placement (above the muscle) of the implants. Round high profile textured cohesive silicone gel 325cc implants were selected.

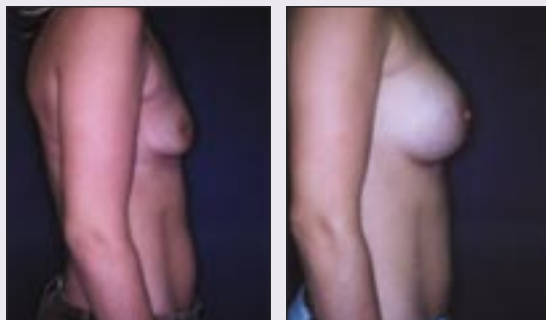
The operation was carried out as planned. Post-operatively, she unfortunately bled in the space on the right side. She was reoperated on again to remove the blood clots (haematoma). The recovery this time was smooth and she was extremely happy with the outcome. She feels her self-confidence fully restored and now quite comfortably undresses in front of her partner. She is also wearing form-fitting tops and low cut dresses, and can't wait to get into bikinis for the next summer.



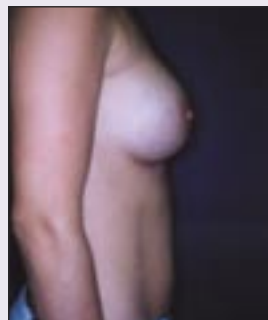
Before



After



Before



After



Before



After

*C*ase studies of these women have been selected because they typically represent the women who come to Dr. Lai for breast enlargement. Can you identify with some of these women?

If you have any thoughts about having breast enlargement, please do not hesitate to pick up the phone and call (02) 9222 9333 or (02) 96892244 for an appointment to see Dr. Lai.

At consultation your concerns and requests will be taken into account. A thorough examination will be carried out, measurements and sizing performed. You will see, touch and feel the implants that are used. You will do yourself justice with an honest opinion from Dr. Lai.

Thank you for reading this special report.

Dr M. F. Lai

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