



body

BREASTS & BODY

Q&A

PERTH COSMETIC DOCTOR **DR GLENN MURRAY** SPEAKS WITH GEMMA GARKUT ABOUT THE LATEST TECHNIQUES HE EMPLOYS FOR BREAST AUGMENTATION AND BODY SCULPTING.

BREASTS

Q: What concerns do patients typically present with when seeking a breast augmentation?

A: Women usually present with two sets of concerns. One case is the younger woman who is small-breasted and desires fuller and more evenly proportioned breasts. The other is the woman who, through changes from pregnancy and breastfeeding, has lost volume in the upper pole and may have slight sagging of the breast.

Q: What is involved in the consultation process?

A: The consultation process for breast augmentation is and should be quite extensive. It usually occurs over three to four consultations with a breast education nurse, a sizing consultation and the doctor.

In my clinic, we show the patient an informative DVD from the American Society of Plastic Surgery (ASPS), a TGA pamphlet on breast implants and show them photographic before and after slides, which also include associated complications.

These slides of complications are especially important as some patients have not been made aware of these and, very occasionally, some patients may decide not to go ahead with the procedure as a result.

Typically, patients also try on different sized bras and implants to gauge what size they prefer. Although this is not 100 percent accurate, it is a good trial run for choosing breast implants.

Q: Are there any new advancements in terms of breast implants?

A: There is a new polyurethane-covered implant on the market, called the 'hairy German'. Overseas reports have shown these implants offer the key benefits of minimising the risk of capsular contracture, implant rotation and displacement. Similar to the 'furry' Brazilian implants, its Velcro-like coating becomes part of the capsule, which stabilises the implant. This means teardrop implants can be used with a greatly reduced fear they will spin or turn. If teardrop implants do spin or turn they need to be removed and secondary surgery performed. In such cases, round implants are sometimes used as a replacement as the pocket for insertion may have become too wide.

Q: What about breast implant placement?

A: The incision site of the breast implant depends on the patient's preference, although in some instances the inframammary fold (in the breast crease) incision is preferred for larger implants. I find this site preferential for correcting cleavage deformities and preventing a "double bubble" appearance in sub-muscular implantation.

On average, placement of the implant is up to the patient, guided by her surgeon. Placement above the muscle is often better for ptosis in the breast (sagging), whereas below the muscle tends to be better for those who have no coverage and have very little natural breast tissue.



BEFORE

AFTER breast augmentation by Dr Murray



BEFORE

AFTER breast augmentation by Dr Murray



BEFORE

AFTER breast augmentation by Dr Murray

healing process. The shape of the implants will change over time for the rest of the patient's life, although the most noticeable change typically occurs during the first six months.

BODY

Q: What kinds of surgical and non-surgical body sculpting techniques are available?

A: There is the traditional 'dry' liposuction, which is slightly going out of favour and being replaced with tumescent liposculpture. Tumescent liposculpture is where fluid is infused into the fat – normal saline is used to dislodge the fat, adrenaline to stop the bleeding and lignocaine to make the area numb.

Thin cannulae are used to sculpt the area for refined results. Patients can have this done as a day procedure, going home that night under the supervision of family or a friend. The holes through which the cannulae are inserted are often left open for 24 hours to let the fluid drain out, which has been anecdotally shown to decrease the infection rate for some surgeons.

Q: What is involved during the surgery?

A: In my clinic, I administer tumescent anaesthesia, made of normal saline, local anaesthetic and adrenaline. The adrenaline stops the bleeding so less cauterising is needed and often drains are not used. Lignocaine (a form of local anaesthetic) makes the breasts numb. Often patients wake up and ask if the surgery has happened yet, as they feel numb and aren't experiencing any pain. However, there may be some pain during the first day post-op.

The normal saline helps to dissect the under-area of the pocket created for the implant. People often prefer this because they do not need to undergo a general anaesthetic. Instead they can have the sedation and return home to the care of their family with close follow-up by their surgeon.

Q: What can patients expect after surgery?

A: Immediately after surgery the patient feels numb in the area treated but quite awake. They are instructed to strictly rest and use their arms as little as possible, and return regularly to the clinic over the next few days. Any swelling and pain experienced can be controlled by strong medication, and after the first two to six weeks lifting can gradually be re-introduced. However, for the first six weeks it is crucial that great care is taken not to aggravate the

Q: What about non-surgical options?

A: A non-surgical procedure that has been quite popular is lipodissolve, or fat dissolve, which involves injecting phosphatidylcholine into the fat layer to break the fat cells down. Although initially controversial, histological studies have shown this to be effective in damaging the cells and causing them to be attacked by macrophages (a type of white blood cell).

This treatment is not intended to be a replacement for liposculpture, although it can be useful in treating smaller target areas.

Of late there has been great excitement about the new CoolSculpting machine, which uses cold temperatures to freeze the target fat and destroy the fat cells, and is good for localised areas such as the love handles. Bigger pads for the machine are being designed to treat larger areas and the treatment has been achieving effective results.

The treatment is quite pain-free and easy. It takes about one hour to treat each area, with two or three treatments usually required, although people are seeing fantastic results after just one treatment. The distinct advantages of CoolSculpting are that it is a non-surgical body sculpting treatment with no hospitalisation required, no downtime and very little side effects. **acsm**