

# **The permanent expandable implant in breast aesthetic, corrective and reconstructive surgery.**

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## **Abstract:**

Since 1986 we have considered the permanent expandable implant (PEI) as the first choice of prosthesis in breast surgery. The possibilities offered by multiple over-expansions and deflations have been explored; 187 PEI were utilized in 136 patients for aesthetic (32 with bilateral hypoplasia), corrective (17 with asymmetry, tubular breasts or Poland's syndrome) and reconstructive breast surgery (87 patients for immediate or delayed reconstruction following radical, modified radical, partial and subcutaneous mastectomy). All implants were positioned submuscularly; a latissimus dorsi muscular flap was transposed when the pectoralis major was absent or damaged. Either the Becker or the Gibney implant was used. The filling port was retained in order to take permanent advantage of the properties of the PEI. The dome was placed deep in the axilla, where it could not readily be palpated by patients. All PEI were immediately or progressively overinflated by 25-80% and then deflated to the planned optimal volume. Twenty-two patients developing capsular contracture were treated by overinflations and deflations with subjective and objective improvement. Many of the augmentation mammoplasty patients refused implant deflation to the planned preoperative volume. The over-expansion/deflation process proved to be effective in obtaining ptosis, in maintaining permanent volume symmetry and in keeping the base of tubular breasts unfolded. Moreover, the psychological advantages of patient's involvement in the procedure are significant.