

Breast reconstruction

Between 60 to 78 per cent of breast cancer patients in Hong Kong undergo mastectomy (surgery to remove cancerous breasts). Having lost a breast, most women want a replacement, and opt for breast reconstruction. Nowadays, a rebuilt breast can look almost like the original one, and most of the operation are being done immediately after the affected breast is removed.

A saline implant can be used for the reconstruction, but some patients may need muscles, fat and skin from other parts of their bodies to hide the defect and build a new breast. Breast reconstruction, using an implant, is a simpler and faster operation, compared with other forms of surgery. But there is a risk of infection because of the presence of a foreign tissue. It is also more difficult to achieve symmetry with the other breast with an implant. But generally the cosmetic outcome is acceptable.

The procedure involving the use of the patient's own muscles, fat and skin is called TRAM flap. The flap remains attached to the original blood supply and is tunneled up through the chest wall to form a breast. Using one's own tissues reduces the risk of infection, and the shape of the breast also looks more natural. But the duration of the operation is longer and the patient's abdominal muscles may become weaker which, in turn, may lead to the patient developing a hernia.

Another operation, called DIEP, is a new technique which uses less muscles but continues to use the abdominal skin and fatty tissue to rebuild the breast. The risk of hernia from this procedure is less.

As for the nipple, patients may choose to have it built with skin from the reconstructed breast, while the colour of the nipple and the part around it can be tattooed. This is usually done a few months after the breast is reconstructed, and is carried out under local anaesthetics. The tattooing of the nipple and areolar usually requires several visits to the clinic.

Breast reconstruction helps reduce the physical and emotional impact from mastectomy. This can be offered to most patients who had undergone mastectomy. Some scars remain on the reconstructed breast, but most women are satisfied with the end result because it enables them to look and feel whole.