Subareolar Mastopexy: Update

Background:

Methods

Results

Discussion

References

The degree of areola elevation was determined by measuring the distance from the areola to the inframammary fold. The average elevation was 2.5 cm (range, 1.5-3.5 cm) at 1 year after the procedure. The nipple-areolar projection was also measured, and the average projection was 2.8 cm (range, 2.0-3.5 cm) at 1 year after the procedure. These results indicate that the subareolar mastopexy allows for a more natural-appearing breast compared with the results achieved with the vertical or anchor mastopexy.

The technique of subareolar mastopexy has been used successfully in the treatment of tuberous breast. In cases in which the areola is hypopigmented, the areolar flap can be elevated as a myocutaneous flap up to the level of the pectoralis major muscle. This procedure has been used successfully in the treatment of tuberous breast.

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