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The Extended Superomedial Pedicle: Advancing Mammoplasty Techniques

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ABSTRACT

Many variations can be applied to traditional mammoplasty techniques to improve outcomes in certain situations. The purpose of this report was to demonstrate the indications and benefits of mammoplasty autoaugmentation using an extended superomedial pedicle. All patients who underwent transfer of an extended superopediclete to other parts of the breast for autoaugmentation were included. Indications were determined and outcomes were assessed. Forty-eight patients were included in the series. The average follow-up was 2.1 years. Indications were categorized into reconstruction of a partial mastectomy defect (oncoplastic group, n = 18), upper pole volume in the contralateral mastopexy (implant reconstruction group, n = 9), and volume improvement and suspension (massive weight loss group, n = 21). The overall complication rate was 15% (n = 7/48), with a revision rate of 10% (5/48). The extended superomedial pedicle is a reliable and versatile adjunct to regular mastopexy techniques for various indications. It gives us the ability to transfer vascularized tissue from the lower pole to areas that require autoaugmentation.

KEYWORDS

Autoaugmentation; Mastopexy; Massive Weight Loss; Oncoplastic

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