

BREAST IMPLANT CONTRACTURE

There is no established or scientifically documented absolute cause for breast implant contracture, so this can be a very challenging problem. Capsular contracture is an exaggerated response of one of our body's very normal reactions to any implanted foreign material. That is, to form a collagen layer between it and the normal tissues. This collagen layer is always our friend, but if it becomes thickened, then it looks more like our enemy. It can harden, become calcified, distort, hurt and disfigure the breast. It may occur at any time after your surgery, and occur on one or both sides. There are several grades of contracture severity which are labeled from I-IV.

Diagnosis (call the office if you notice any of these)

1. You should be able to pinch your breast in the midportion and your fingers almost touch. If not, you may have some contracture starting
2. You notice one breast harder than the other
3. You notice one breast higher than the other
4. You notice distortion of shape on one side or the other

Depending on the grade of contracture the treatment options are as follows:

1. **Ultrasound treatment.** This is using ultrasonic sound waves which may serve to heat up and then break up the scar tissue, followed by aggressive massage afterwards. The treatment lasts about 15-30 minutes and is painless. The number of treatments depends on the success you are obtaining. If this is successful, you will notice some softening of your breast right away. If you see improvement, then continue the treatments until your goal is obtained or no further improvement is noted. Dr. Romano has had good success in obtaining improvement in contracture with this intervention.
2. **Review your vitamins and supplements.** Please review with Dr. Romano any vitamins and supplements which you are currently taking. There are some which increase scar tissue contracture such as MSM and maybe chondroitin, Vitamin C, and glucosamine which should be avoided.
3. **Vitamin E 800-1200 mg** a day. This is believed to interfere with the formation of collagen and thus, soften scar tissue and prevent contracture. There is no proven efficacy once capsular contracture is established.
4. **Omega 3 Fatty Acid.** This is reported to lessen contracture but only in high doses of 5-10 grams a day.
5. **Singulair** and **Accolate** are asthma medications which have been reported by various doctors to decrease smooth muscle contractions. Since collagen contracts through the action of myofibrils or smooth muscle fibers, we have occasionally seen some effect in improvement of this condition. This is an off label use. Please read the specific documents about these medications. It is available through prescription through our office. It is used for 3-6 months and if no improvement, then discontinued. Dr. Romano favors Singulair.

6. **Aggressive breast massage.** This is used to manually stretch the collagen capsule and soften the breast, and prevent contracture. It should be done at least daily and aggressively and for the life of your implants. It is helpful after contracture is established, but is usually most effective in combination with ultrasound. Massage should be done 4-6 times a day when combined with ultrasound.
7. **Closed capsulotomy.** This is an old and time-honored method used to rupture the breast capsule. Pressure is applied until a “pop” is heard or felt. This usually represents tearing the capsule and if successful, immediate softening is the result. Since this may cause internal bleeding, Dr. Romano does not perform or recommend this procedure. Many patients elect to do this on themselves.
8. **Revision or repeat surgery** which may or may not be successful. It involves removal of the entire scar tissue capsule and replacement of the implants with either textured or smooth surface implants. Often this is successful, but there is no guarantee.
9. **Removal of implants** is a very reasonable option. More often than not, your breasts will go back to looking almost or very much like what you started with, even without a lift or extra incisions.
10. **Do nothing** is a good option. Especially if you have had a lot done, with no improvement, your body may be telling you that we have reached an endpoint.