



Chapter 39

Main consequences and diseases related to augmentation mammoplasty using silicone prosthesis

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1 INTRODUCTION

Currently, several reports defend and encourage breast augmentation with the use of breast prostheses without also bringing consent to the risks generated by this. Even with little epidemiological data on the risks generated, even if the patient decides to opt for surgery, it is the plastic surgeon's responsibility to know and offer knowledge to the patient who opts for the implant.

2 OBJECTIVE

To know and analyze the main consequences and diseases caused by breast augmentation associated with silicone implants.

3 METHODOLOGY

This is a systematic review of the literature, based on the analysis of 7 articles, of which 3 were selected. To search for these articles, the descriptors “silicone disease AND silicone AND augmentation mammoplasty AND consequences of mammoplasty” were used, and Google Scholar, Scientific Articles, Pubmed, Biblioteca Virtual da Saúde, Brazilian Journal of Implantology and Health Sciences.

4 RESULT

Based on the bibliographic analysis, an explanation of the main risks generated after breast augmentation was observed. It was obtained as the main result for other precursor lesions caused by pressure on the pectoral muscles, such as ulcerative, structural, metabolic, relationships with anaplastic large cell lymphoma, effects of decency on children born to mothers with breast implants, neurological disorders, and mental illnesses, however, still not very defined in the last three associations. **DISCUSSION:** since the prosthesis exerts compression on the mammary gland and adjacent tissues. The musculature is more easily injured due to its low capacity to resist mechanical compression, and this can progress to ulcerative lesions more easily than other tissues. It is known to the surgeon that when performing the procedure, there is a morphological change in the site and imbalance of homeostasis, due to vascular impairment leading to changes in blood flow, oxygenation, and hemoglobin concentration. In addition to this risk, there are others reported and that the vast majority of patients were not informed before the surgery, including the risk of developing anaplastic large cell lymphoma, with an incidence of 1 in every 30,000 cases in 100,000 women who have a breast implant per year, research done by the article "US epidemiology of anaplastic lymphoma associated with breast implants" without having a causal explanation. Furthermore, there is an increase in younger patients who underwent breast augmentation, and consequently suffer changes in the breast parenchyma earlier, such as atrophy, changes in the chest wall, inability to lactate, and sensory impairment.

5 CONCLUSION

It was observed through this literature review of the scientific evidence relates to consequences and diseases after breast prosthesis surgeries. It is the responsibility of the doctor and the prosthesis supplier to make them aware of all the risks that the surgery/prosthesis offers. Failure to do so offers an inappropriate process of informed consent.

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