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Breast Augmentation Frequently Asked Questions

Please read over these frequently asked questions prior to your consultation with Dr. Walden; so we can make the most of our time together in the office!

Do you generally place the implants above or below the muscle, and why?

Dr. Walden places all breast implants for primary breast augmentations submuscularly, or below the pectoralis major muscle. This helps obtain a nice, natural look after surgery, helps hide the shell of the implant, decreases the rates of capsular contracture and helps with the visualization of your natural breast tissue during mammography. The only instance where breast implants may be placed above the muscle, or subglandular placement, is in the event of women who are competitive body builders, or in a revisional augmentation where the patient has implants previously placed in the subglandular location for many, many years

What type and style of implants do you recommend for me? Smooth or Textured? Round or Anatomical? High Profile or Standard Profile? Other?

Dr. Walden uses smooth round implants because these are the most natural appearing. Textured anatomical gel implants are reserved for reconstructive cases and are not approved by the FDA for use in the United States for cosmetic breast augmentation. There are several profiles and sizes of implants. Dr. Walden will recommend a size and profile for you based on your desires and your anatomy. You must choose an implant that will fit your base diameter, or width, of your breast. Implants come in low or moderate profile, mid-range or moderate plus profile and high profile. These profiles describe the projection, or height, of the implant given its base diameter. Dr. Walden cannot guarantee a specific bra size after surgery since bra companies differ in their sizing. If you have photos of breasts that you like this will help Dr. Walden decide on a size that is best for you.

With respect to deflations, what is the "replacement policy" for the implants you use?

In the event of a ruptured implant that is caused by a defect in your implant, the manufacturer of the implant may cover the cost of replacement and a portion of your anesthesia and hospital fees. You are automatically enrolled into a lifetime warranty with Mentor or Allergan implants.

(Only if you will be receiving saline implants) Would you "over-inflate" my implants? If so, by how much? What are the benefits of this, and what are potential problems associated with over-filling?

The manufacturers have stated the proper amount that saline implants may be inflated. Dr. Walden may over-inflate saline implants within the manufacturer's recommendations to obtain the size you desire and minimize rippling that can occur with saline implants.

Is there a good way for me to measure different sizes, and "try them out"?

We have several implants and rice bags in the office for you to try on if you like. You may place implants in your bra to get an idea of size.

Where would you make my incision, and how much of a scar should I expect to remain visible over time?

There are three possible incision locations: periareolar (at the border of the areola and adjacent skin), inframammary (in the fold beneath the breast), transaxillary (in the crease of the armpit), Dr. Walden does not perform the transumbilical (through the belly button) procedure. This is not a standard way to place a breast implant because of the indirect nature and the high risk of rupturing the implant during placement. The transumbilical approach may void the replacement policy of some implant manufacturers. Dr. Walden will make her recommendations for the placement of the incision based on your anatomy and desires. There may be a higher likelihood of difficulty with breastfeeding with the periareolar approach. Scars heal in a period of 12 months after surgery. You will have scars (this is inevitable) but they all heal very well. We will recommend scar therapy techniques and creams that you may use after surgery to help the scars heal flat and fade over time. Dr. Walden cannot predict your healing time or results and cannot control your genetics in relation to healing and scarring, but these techniques work well. It is ultimately up to you as to the incision approach, but all of the scars heal very nicely and your recovery time is not affected by the incision approach.

What is the risk for decrease or absence of nipple sensation after surgery?

Changes in sensitivity to the breasts or nipples can occur after surgery. In most cases this is transient and improves with time. In about 5% or less these changes are permanent.

Can having breast augmentation affect my ability to breast-feed in the future? Is breast-feeding safe for women who have breast implants?

We are unable to predict whether you will have difficulty breastfeeding after surgery, but women may safely breastfeed with implants. If you are very concerned with your ability to breastfeed after surgery, we recommend using the inframammary crease approach rather than periareolar because you may have increased difficulty with breastfeeding using the periareolar approach.

What happens to the shape of breasts after breastfeeding with implants? Will I need a second surgery? Should I wait until after I have children to get breast augmentation?

Your breasts will go through changes with childbearing and breastfeeding as if you did not have implants. Some women require a breast lift or revision if ptosis, or drooping,

occurs after childbearing and breastfeeding. If you are trying to get pregnant in the next 6 months or so, we recommend waiting until after you have children to undergo breast augmentation. Most people choose to go through with the surgery for themselves rather than waiting to have children, however it is your decision.

Is general anesthesia safe? What happens in case of complications during anesthesia? What type of tests do you perform before surgery?

Dr. Walden works with a known group of board-certified anesthesiologists so they know her routine and she knows theirs. For breast augmentation, general anesthesia is used, so you are asleep for the procedure and your airway is protected. The surgery is performed at Manhattan Eye Ear and Throat Hospital and they are fully equipped to handle an emergency situation if one should occur. The anesthesiologist remains with you the entire length of the procedure to monitor you. After you book surgery, the Surgical Coordinator/Registered Nurse will send you a pre-op packet that contains all of the paperwork you will need to prepare for surgery, including a lab order form that details the blood work and procedures (based on your medical history) that you will need to have performed prior to surgery. This will ensure that you are not anemic, do not have an infection, are not pregnant, etc. prior to undergoing surgery.

How long does it take to recover? What does the recovery process involve?

We ask that you refrain from any strenuous activity or heavy lifting for 2-3 weeks after surgery. The first few days or weekend after surgery we ask that you take it very easy. You may return to light exercise (light walking) around 10-14 days after surgery, but no heavy lifting for 2-3 weeks. You may not lift anything over ten pounds for 2-3 weeks.

What kind of medication will I have to take after surgery?

Dr. Walden's nurse will give you 5 prescriptions at your pre-op appointment - an antibiotic that you are required to take to prevent infection, an anti-nausea medication if needed, narcotic analgesic for pain if necessary, a medication for sleep if necessary, and a medication for anxiety and muscle spasm if necessary.

Narcotics tend to constipate me. Should I have a problem with this, is it safe to take a gentle laxative?

If you experience bloating or constipation after surgery, you may take Colace which is an over-the-counter stool softener.

How long will the pain last?

Most patients use the narcotic pain medication for the first week or less after surgery and then they switch to Tylenol. The soreness after surgery usually lasts about 2 weeks. The immediate post-operative pain is treated in the hospital before you leave. They will recover you in the hospital for about 2 hours after surgery.

Will I receive anti-nausea medication via IV while I'm in surgery?

The nurses in the recovery room will medicate you for pain or nausea should you experience any after surgery. If you have experienced nausea in the past with anesthesia you may inform your anesthesiologist, who can pre-medicate you to help prevent nausea

after surgery. You will also be given a prescription for nausea to use if needed after you get home from surgery.

Will I be able to exercise normally in the gym after recovery?

Yes, you may ease back into your normal exercise routine after about 2-3 weeks once you are released by the doctor to do so.

Can I hide plastic surgery from people who already know me?

Perhaps, as long as they don't see you immediately after surgery, we think most people can hide it, assuming you are not getting a dramatic size increase. We can't make any guarantees as to whether people will notice.

What are the risks? What kind of complications can arise during surgery and after surgery? And how will you assist during those complications?

Some of the risks of any surgery include infection, hematoma or a fluid collection, and capsular contracture (which is specific to breast augmentation). Infection is usually prevented through the use of antibiotics used during and after surgery. We prevent hematomas by having you avoid anything that can affect bleeding like Aspirin, Advil or Aleve two weeks before and two weeks after surgery and by having you limit your physical activity after surgery. Capsular contracture, or deforming scar tissue that can form, is reduced by placing the implants submuscularly. We also teach you implant massage that helps keep the capsules soft after surgery. There are risks to any surgery and we try to avoid these at all costs. In the event of a complication after surgery, like a hematoma that requires draining in the operating room, Dr. Walden would be available to you. If you had an emergency after normal business hours, Dr. Walden is available - you would call the office and the service will get a hold of her. Complications after elective breast augmentation are all relatively rare, but it is important that you are aware there are risks associated with any surgery. Financial issues related to complications are handled on a case-by-case basis, but more detailed information can be given to you regarding this by Dr. Walden's Surgical Coordinator/Registered Nurse at your consultation upon request.

If I have a problem in off-hours, will I be able to contact you, or will I have to see the plastic surgeon on-call at the hospital?

In the event of an emergency after normal business hours, Dr. Walden is available. You will need to call the office and the service will get a hold of her. In the event that Dr. Walden is out of town there will be a physician covering her practice who will see you if necessary.

Do you recommend I massage my implants post-operatively?

Yes, we will teach you implant massage after about 2-3 weeks to keep the implants soft.

How will my implants feel after surgery? What about my significant other?

The implants usually feel soft like natural breast tissue. They will become softer and softer as time passes after surgery, pending no issues with capsule formation.

How long does the procedure itself take?

The procedure takes about 2 hours in the operating room.

Is there any risk of implant leaking in the body?

Implant rupture can occur with silicone or saline implants. The rates of rupture are very low. If you had a saline implant rupture you would know immediately because your breast would go flat and your body would reabsorb the water. If you experienced a silicone rupture, the silicone is a cohesive gel that does not leak or bleed into the tissues. If you had a suspected rupture we would order an MRI to confirm this and schedule an implant exchange. Implant rupture is a very rare occurrence. Implants are made to withstand 25 times the pressure of a mammogram so it would take a significant impact or force to rupture an implant in the human body.

What happens to implants over time? Do they change shape or consistency? Will there be any need of substitution in the future?

Implants do not degrade after time. Manufacturers of implants have stated that implants last, on average, 10-15 years. They determined this after studying the average length of time women keep their implants - this includes women who get size changes or exchanges after childbearing, etc. This does not mean that, after 10-15 years, you must get them replaced. If you are happy with your implants and are not experiencing any problems, you could theoretically keep your implants for a much longer period of time.

Can I continue to sleep belly down?

We ask that you sleep on your back for 2 weeks after surgery, but you may return to lying on your stomach once you do not experience any soreness from doing so.

Do implants increase my risk of developing breast cancer? Are there any adverse, long-term effects of having breast implants?

No, implants are not linked to cancer, autoimmune disease, or any other conditions. They are approved by the FDA and are safe for human use. Cancer is not detected at a later stage in women with implants, nor is it harder to treat.

Do breast implants interfere with the detection of breast cancer? What are additional considerations regarding mammograms and breast cancer detection for women with breast implants?

No, when you are at the age to start annual mammograms you will need to inform the mammographer that you have breast implants and they will perform a few extra views. Submuscular (vs. subglandular) placement of implants makes visualization of your natural breast tissue easier for mammographers. Please let us know if you have a family history of breast cancer at your visit.

How much do you charge for this procedure?

Dr. Walden's Surgical Coordinator/Registered Nurse will go over all of the fees with you associated with surgery. She will also review the hospital logistics and scheduling process with you.

Is that an all-inclusive price for everything? Are all post-op visits free, and if I have a problem, will I be charged a fee if I need to see you?

Your quote will include surgeon fees, implant fees, anesthesia and operating room fees. Other costs which are your responsibility are obtaining pre-surgical testing (which you may claim on health insurance if you have it) and prescriptions (which you may also claim on health insurance if you have it). Dr. Walden's fee is an all-inclusive charge which includes all post-op visits.

How long before having surgery would I have to schedule with you?

Dr. Walden's Surgical Coordinator/Registered Nurse can look at the schedule with you at your consultation. You may choose a date for surgery based on your schedule and Dr. Walden's schedule.

Are there any special instructions I should follow before and/or immediately after the surgery?

Yes, Dr. Walden's nurse will review all of your pre and post-op instructions with you at your pre-op appointment. This appointment is usually two weeks prior to your surgery date. At this appointment, which usually takes about 30-45 minutes, you will discuss your prescriptions, consents, and pre and post-op instructions with Dr. Walden's Surgical Coordinator/Registered Nurse. We will also take your photos and review the surgical plan and decide on size with Dr. Walden.

How long do I need to take off from work?

Most patients take about 4-5 days off of work. As long as you do not perform any heavy lifting at work, you may return after about 4-5 days.

How do I schedule surgery?

If you decide to book surgery, you will let Dr. Walden's Surgical Coordinator/Registered Nurse know. We do not require a deposit to book surgery. She will arrange your surgery for you at the hospital and mail you a pre-op packet that walks you through the process of preparing for surgery. It will explain how to pay your fees and will contain your lab order form. You may take this form to a lab or your primary care physician to have the required tests completed. Then we will have you come in for your pre-op appointment.

Are you certified by the American Board of Plastic Surgery?

Yes. Dr. Walden's full resume is available to read on her website www.drjenniferwalden.com under the heading "Curriculum Vitae."

How many breast augmentations do you perform each year?

Dr. Walden performs 1-5 breast augmentations per week. She has been in private practice since 2004. Breast augmentation is her most often requested and performed procedure.

Do you have hospital privileges, and if so, with which hospitals?

Dr. Walden performs her outpatient surgeries at Manhattan Eye Ear and Throat Hospital. Her inpatient surgeries are performed at Lenox Hill Hospital. She also has privileges at New York Eye and Ear Infirmary.

Do you have before and after photos available for viewing?

Yes, there are a lot of before and after photos on Dr. Walden's website, and we encourage you to peruse them prior to your appointment. We also have a book of photos in the office, which her Surgical Coordinator/Registered Nurse can review with you.

Will I be seeing you for my post-op visits, or will I see someone else on your staff?

For surgeries performed on a Friday, your first post-op visit will be the following Monday. If Dr. Walden is in surgery that day, nurse will see you. Dr. Walden will likely see you at your next scheduled visit, which is most likely your suture appointment. Her nurse removes all of the sutures. All other post-operative appointments, the doctor will see you.

Is your practice affiliated with any finance companies, and if so, which ones?

Dr. Walden participates in two patient financing companies: Capital One and Care Credit. We will give you more information on these at your consultation if you are interested.

www.carecredit.com www.capitalonehealthcrefinance.com

Will I have dissolvable stitches, and if not, when will the stitches need to be removed?

Dr. Walden uses dissolvable sutures beneath the skin and non-dissolvable sutures above the skin that will be removed 6-7 days after surgery.

Do you use temporary sizers/breast implants during surgery, and if so, how many different sizes of breast implants will you take into the operating room?

Dr. Walden uses temporary sizers in asymmetry cases. She may bring more than one pair of implants to your surgery if you have not decided on a size prior to your surgery, and decide on a size in the operating room if you leave it up to her aesthetic opinion. This will be solidified at your pre-operative appointment.

Do you create over-sized pockets?

No, Dr. Walden places the implant within your precise natural breast pocket. She does not over-dissect laterally (out to the sides) or medially (towards to middle).

Which medications, herbal remedies, and vitamins should I stop taking prior to surgery, and when should I stop taking them?

Dr. Walden's Surgical Coordinator/Registered Nurse will give you a medications to avoid sheet that lists the medications you will need to avoid 2 weeks before and 2 weeks after surgery.

Does smoking affect the healing process, and if so, how far in advance of surgery should I quit?

We recommend quitting smoking 2 weeks before and 2 weeks after surgery. Smoking can lead to delayed wound healing and increase your risk of infection.

Do you recommend that I take Arnica Montana and Bromelain for bruising and swelling, and if so, when should I start taking it?

You may take Arnica Montana as directed prior to and after surgery if you like. We do not recommend taking Bromelain, as it can interfere with bleeding.

When can I resume sexual relations?

We ask that you refrain from sexual activity for 2-3 weeks after surgery.

When can I drive?

You may drive when you are pain-free and off any narcotic medication or medications that may cause drowsiness, which is usually after 1-2 weeks.

Will I need a mammogram prior to my surgery?

If you are under the age of 35 and do not have a family history of breast cancer, you do not need a mammogram prior to surgery. You may have a baseline mammogram performed prior to surgery if you like. If you are 35 years of age or older, or have a family history of breast cancer, you will need to have a mammogram performed within the last year prior to surgery.

How soon can I shower after surgery?

You may shower after your first post-op appointment. Shower with your back to the nozzle. You may get your breasts wet, but do not scrub your breasts.

When is it safe to soak my incisions in water (such as taking a tub bath, going swimming, or getting into the hot tub)?

You may soak your incisions after about 3-4 weeks, pending no post-operative issues.

Do you feel that Vitamin E helps to prevent capsular contracture? When may I start taking it?

Dr. Walden does not recommend taking Vitamin E routinely, but may recommend it in certain circumstances.

Do you perform surgery on women that are menstruating? If so, is there a rule on the type of feminine product that I use on the day of surgery?

Yes, you may have surgery during your menstrual cycle. Please wear a pad on the day of surgery.

Should I remove fingernail/toenail polish prior to surgery?

You should remove your fingernail polish for the day of surgery.

Can I wear contacts during surgery?

Please wear glasses the day of your surgery.

Can I wear makeup on the day of surgery?

No, you may not wear make-up, jewelry, lotion, nail polish or deodorant for the day of surgery.

Can I wear jewelry on the day of surgery?

Remove all jewelry and body piercings prior to surgery.

When will I receive my breast implant device cards?

We will give you these after surgery at your first or second post-operative visit.

Do you recommend diuretics for post-operative swelling?

No, Dr. Walden does not recommend diuretic therapy for post-operative swelling. This can cause changes in your electrolyte balance and is not necessary.

Do you recommend icing the breasts after surgery?

No, please do not ice your breasts after surgery.

Do I need to purchase a particular type of bra to wear after I get out of surgery?

What about a "strap"? Will I need to wear one of those?

You will be placed in an ace wrap after surgery. You will need to keep this on until we take it off at your first post-operative visit. We will place you in a bandeau (free of charge) at this appointment. You will wear this for 2-3 weeks after surgery to help the implants settle. In this time period when we are asking you to wear the bandeau we ask that you do not wear anything that will push up on the implants. You may wear a loose tank top that you can step into to for the first week and a loose job bra that fastens in the front after that. We will let you know when you may get sized for a new bra, normally about 3-4 weeks after surgery.