

**Ordination**

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**BREAST LIFT**

**SHORT INFO**

Operation time:	ca. 2 - 3 hours
Anaesthesia:	general
Hospital stay:	2 - 3 nights
Presentable:	immediately
Sports:	after ca. 6 weeks

The breast can start sagging because of size fluctuations associated with pregnancy and breast-feeding, but also because the skin increasingly loses its elasticity with advancing age. Occasionally, a pathological lack of elastic fibres in the skin will occur at a young age already, with the corresponding consequences. This usually leads to a flattening of the upper breast pole, with a badly defined breast shape in the décolletage and a low, sometimes also heavily sagging lower breast pole. In some cases, the areola may be enlarged and unattractively distorted from its circular shape, or also point downward too much. In others, a lack of volume can cause the nipples to sink in.

Most cases call for a surgical shaping of the breast tissue and lifting of the skin envelope. Breast implants will only rarely lead to a meaningful and durable result, but occasionally a breast lift needs to be accompanied by their insertion.

General anaesthesia is required for performing this operation. The incisions applied in virtually all techniques will leave a relatively well-concealed scar at the edge of the areola, and in a vertical direction at the lower breast pole. If a more extensive skin reduction is required, this vertical scar will often veer in a sideways direction, into the fold below the breast. I always endeavour to give the newly created shape a particularly long life and avoid the typical deformations associated with breast lifts by means of a surgical technique developed by me, which provides a supportive "inner bra".

Immediately after the surgery, the operated area is supported and protected with a special breast bandage, which is replaced by a sports bra providing good support after about one week. The latter needs to be worn day and night for six weeks.