One stage correction of hypoplastic—tuberous breast using the hockey-stick muscle splitting dual plane breast augmentation technique and the Northwood Index.

<u>Introduction</u>: A lot of different techniques have been described for the correction of tuberous breast. We believe that two abnormalities are presented in tuberous breast:

- 1. Herniation of breast tissue through the nipple areola complex.
- 2. Skin shortening at the level of Inframammary Fold (IMF) only.

<u>Materials and Methods</u>: We used the Northwood Index (NI) as described by Dr Pacifico in 2005. When the index was above 0.3, we performed peri-areola tightening and released the skin at the level of IMF. When the Index was below 0.3, we released only the IMF. In all patients we use round silicone implants to restore the volume and the hockey stick muscle—splitting dual plane technique (MUST technique) for the pocket dissection.

From March 2005 to May 2013, we have performed the aforementioned technique in 81 tuberous breasts. Mean age of patient was 27 years old. Mean follow-up was 3 years.

<u>Results</u>: Three patients developed double-bubble deformity . No hematoma or infection of the implant was observed. No revision was necessary. Three patients developed infection at the site of periareolar incision but this was resolved with antibiotics. One patient developed seroma two months after surgery

<u>Conclusions</u>: We introduce a one-stage surgical correction of tuberous breast. Based on the Northwood index we can decide whether we will perform peri-areola correction with release of IMF or only release of IMF for correction of the tuberous breast. With the MUST technique we achieve the best expansion of the lower pole of the tuberous breast.