

What you should know about silicone implants

MARIE KUECHEL & ROBERT SINGER: What you should know about silicone implants Today's silicone is far different from the filler used in the first generation of breast implants. Today silicone filler has the soft feel of a gel with elastic properties that allow it to bind to itself. Implants are available with smooth or textured surfaces, as well as round or contoured shapes in a variety of widths, sizes and projections. This means there's a silicone or saline implant to match just about every body's shape type, for a customized fit that leads to optimal results. Good decisions in the beginning in terms of implant size and shape selection lead to good long-term outcomes. Four myths about silicone implants

1. Silicone implants need to be replaced only if they leak or rupture. REALITY: If an MRI screening determines the integrity of an implant shell is compromised, the current standard calls for an implant to be replaced. The more likely reason why an implant may be replaced: a woman's desire to change implant size or shape to better match her figure as her body changes over time. When scar tissue hardens around the implant, it may also be a cause to remove and replace an implant.
2. Silicone implants can cause poisoning or autoimmune diseases like lupus, rheumatoid arthritis or scleroderma. REALITY: To date, there has been no independently reviewed and validated research that demonstrates a clear link between silicone implants and autoimmune diseases in women. It is estimated that some 300 studies have been conducted in attempts to demonstrate this link.
3. Silicone implants cause breast cancer. REALITY: According to an October 2000 report by the National Institutes of Health, researchers found "no association between breast implants and the subsequent risk of breast cancer."
4. Silicone can leak into your breast milk. REALITY: There is no indication that mothers with silicone implants should not breastfeed. The Institute of Medicine specifically stated "there is no evidence that mothers with implants pass silicone on to infants while breast-feeding."

Regardless of the type of implant you choose, it's important to understand the essentials.

1. All implants have an outer solid silicone shell.
2. All implants must be placed surgically.
3. All implants can interfere with mammography screening of the breasts. Additional views may need to be taken for better breast cancer detection, but having implants does not prevent or delay detection.
4. Capsular contracture, a primary risk of breast implants, can develop with any type of implant filler. This contraction of scar tissue that builds up around the implant can cause firmness ranging from mild to severe hardening that can alter the appearance of the breast.
5. Although an implant may last a lifetime, no implant should be viewed as a lifetime device that will remain intact forever without needing to be replaced. You may wish to replace your implants to better complement your body as it changes with age, or your plastic surgeon may recommend replacing the implants, even if they have not leaked.
6. Before choosing any implant, choose a plastic surgeon certified by The American Board of Plastic Surgery who has completed a special certification process for silicone breast implants. A complete informed consent process is a must. This means your doctor will explain all of the possible risks, complications and outcomes for both the short- and long-term, as well as your obligations as a patient for maintaining your health and results.

About the Author

source: <http://www.centredaily.com>

Source: <http://www.breast-implants-info.com>