

## **Mastopexy With The "Dermoglandular Autoaugmentation" Method. Increased Stability Of The Result. Personalized Technique**

**Authors :** Maksim Barsakov

**Abstract :** Introduction. In modern plastic surgery, there are a large number of breast lift techniques. Due to the spreading information about the "side effects" of silicone implants, interest in implant-free mastopexy is increasing year after year. However, despite the variety of techniques, patients sometimes do not get full satisfaction from the results of mastopexy because of the unexpressed filling of the upper pole, extended anchoring postoperative scars and sometimes because of obtaining an aesthetically unattractive breast shape. The stability of the result after mastopexy depends on many factors, including postoperative rehabilitation. Stability of weight and hormonal background, stretchability of tissues. The high recurrence rate of ptosis and short-term aesthetic effect of mastopexy indicate the urgency of improving surgical techniques and increasing the stabilization of breast tissue. Purpose of the study. To develop and introduce into practice a technique of mastopexy based on the use of a modified Ribeiro flap, as well as elements of tissue movement and fixation designed to increase the stability of postoperative mastopexy. In addition, to give indications for the application of this surgical technique. Materials and Methods. It operated on 103 patients aged 18 to 53 years from 2019 to 2023 according to the reported method. These were patients with primary mastopexy, secondary mastopexy, and also patient with implant removal and one-stage mastopexy. The patients were followed up for 12 months to assess the stability of the result. Results and their discussion. Observing the patients, we noted greater stability of the breast shape and upper pole filling compared to the conventional classical methods. We did not have to resort to anchoring scars. In 90 percent of cases, an inverted T-shape scar was used. In 10 percent, the J-scar was used. The quantitative distribution of complications identified among the operated patients is as follows: worsened healing of the junction of vertical and horizontal sutures at the period of 1-1.5 months after surgery - 15 patients; at treatment with ointment method healing was observed in 7-30 days; permanent loss of NAC sensitivity - 0 patients; vascular disorders in the area of NAC/areola necrosis - 0 patients; marginal necrosis of the areola - 2 patients. Independent healing within 3-4 weeks without aesthetic defects. Aesthetically unacceptable mature scars - 3 patients; partial liponecrosis of the autoflap unilaterally - 1 patient. Recurrence of ptosis - 1 patient (after weight loss of 12 kg). In the late postoperative period, 2 patients became pregnant, gave birth, and no lactation problems were observed. Conclusion. Thus, in the world of plastic surgery methods of breast lift continue to improve, which is especially relevant in modern times, due to the increased attention to this operation. The author's proposed method of mastopexy with glandular autoflap allows obtaining in most cases a stable result, a fuller breast shape, avoiding the presence of extended anchoring scars, and also preserves the possibility of lactation. The author of this article has obtained a patent for invention for this method of mastopexy.

**Keywords :** mastopexy, mammoplasty, autoflap, personal technique

**Conference Title :** ICPSA 2025 : International Conference on Plastic Surgery and Aesthetics

**Conference Location :** Dubai, United Arab Emirates

**Conference Dates :** February 15-16, 2025