

e-book

Are there risks to my areolas and nipples in the breast lifts?


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There are risks in breast plastics?

Many people want to have breast plastic surgery, and they also think about the risks of this surgery.

One of the biggest concerns is the sensitivity of the nipples. What you hear most when looking for this procedure is:

"Look carefully because otherwise your nipple will die".

Is there a risk or not for the areolas and nipples? Answer: There is, of course.

"My God in heaven, he said he has a risk, how am I going to decide?" Don't worry, we've decided on science based on statistics. But the risks are relatively low and calculated, which is why plastic surgery is worth it.

In this ebook I will explain everything about this procedure.



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[click here and learn more about me](#)

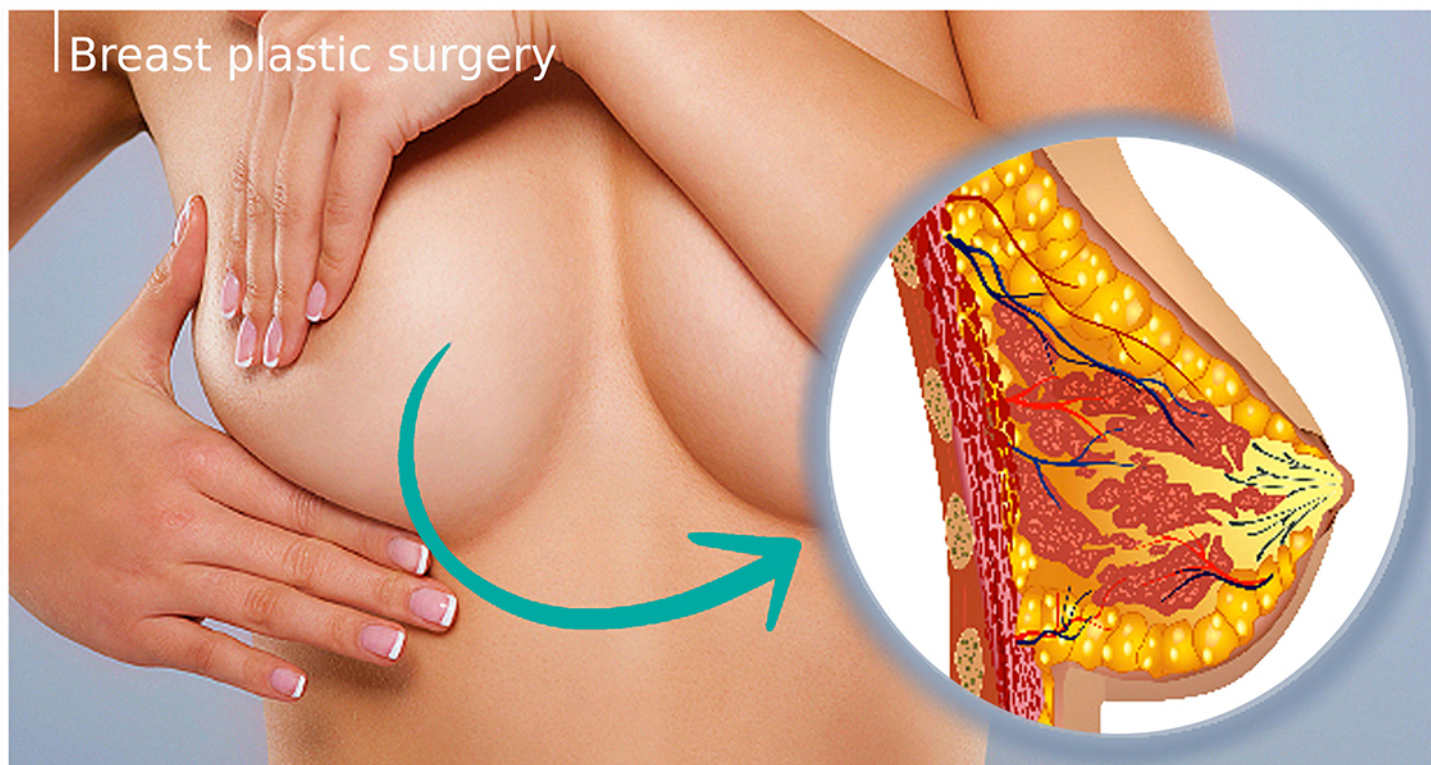


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Breast plastic surgery



How is the breast formed?

Mama is a skin bag, a skin gland! Funny, huh? It had to be treated by dermatologists, is that like a sebaceous gland or a sweat gland.

The mammary gland comes out of the skin, and it is formed by several ducts, which will produce milk in the case of lactation, and these ducts, they go together, and they come out there in the skin in the form of the nipple and areola, the breast. It is also made up of fat.

What forms our areola? Both men and women have areolas. And these areolas, they are formed by the endings of the ducts. So it's nothing more than the junction of those ducts that were down there.

They come together and they come together and they come together and they create a hull and they open up into the skin through the nipple.

So it's this pointy portion that people call a beak. And that darker formation around the nipple or the nipple or the papilla, that pigmentation, are the areolas.

In fact, there is an interesting detail here that many women and men have sebaceous glands in the areolas. It's those little balls that people think are carnations. They are not. They are normal components of our areolas.



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The importance of areolas and nipples.

The areola and nipple (also called papilla) are unique anatomical structures of vital importance in the aesthetics of the breast.

The absence or deformity of any of these structures, which together form the nipple-areola complex, can cause a decrease in self-esteem and consequent embarrassment when undressing.

In addition areola has the sensitivity that is important in sexuality, pleasure, well-being. So the areolas need to have that sensitivity.

In addition, they need to drain the milk when breastfeeding. So the areola is not a mole you can take off and throw away.

Types of nipples:



Inverted



Plan

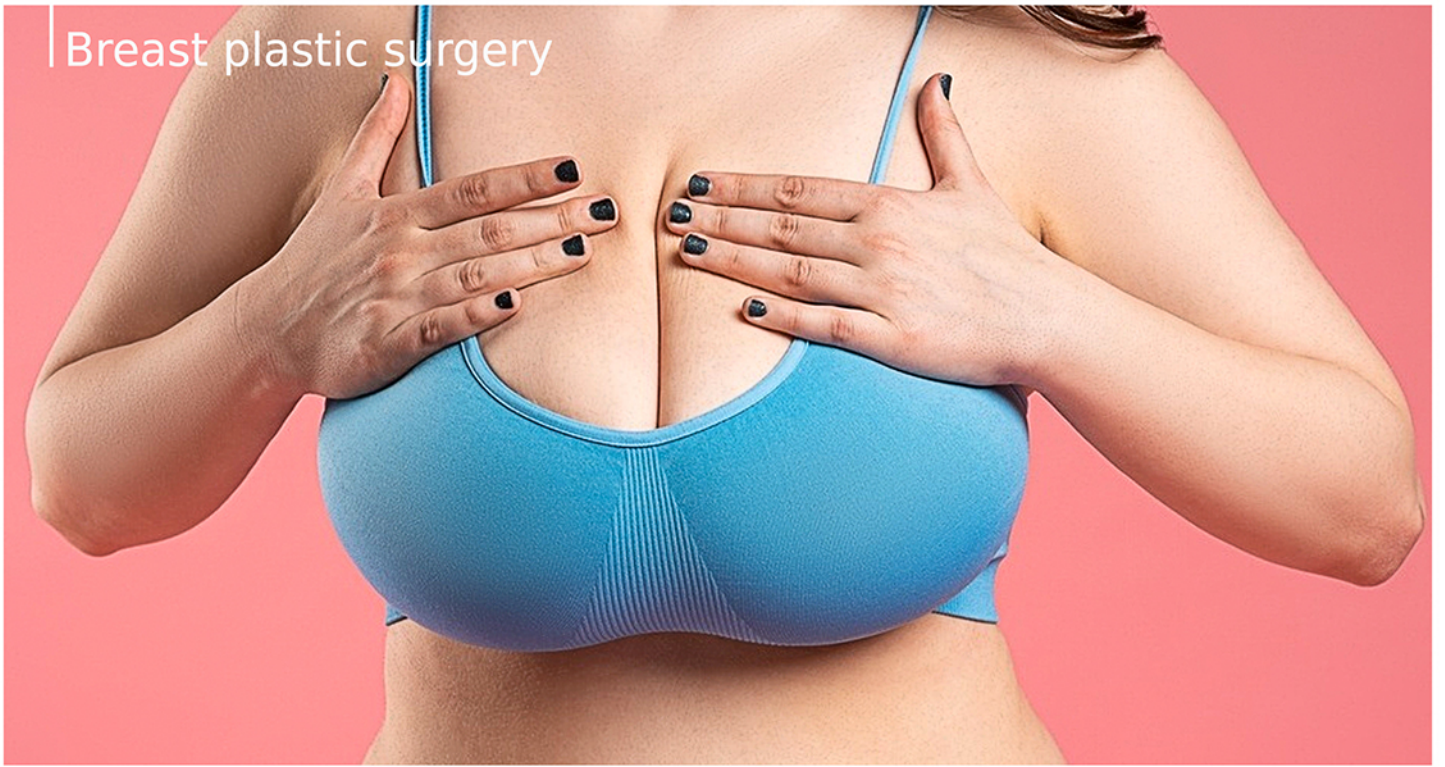


Short



Protusus

Breast plastic surgery



Types of surgery for the tits

Reducer

Reduction mammoplasty aims to reduce the size of the breasts.

When the breast is too big we will reduce it, lift it and that's that. Making her smaller and prettier.

Surgery is performed by removing excess fat, skin and breast tissue from the breasts.

After this step, the breast is remodeled, repositioning the areola and modeling it in the natural shape.



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Types of surgery for the tits

Mastopexy

Mastopexy is a plastic surgery of the breasts indicated to reverse the sagging of the breasts and repositioning the sagging skin in order to lift the breasts to the initial position and ensure their aesthetics and symmetry.

Also known as Breast Lifting, this procedure naturally corrects sagging due to aging, heavy weight loss, or breastfeeding.

The incision is made around the areola, descends vertically to the breast crease and there a cut is made that follows the fold of this region. So its final shape looks like an anchor. In any case, you can be sure that over time the scar will become quite discreet.

Curiosity!

How was this surgery performed?

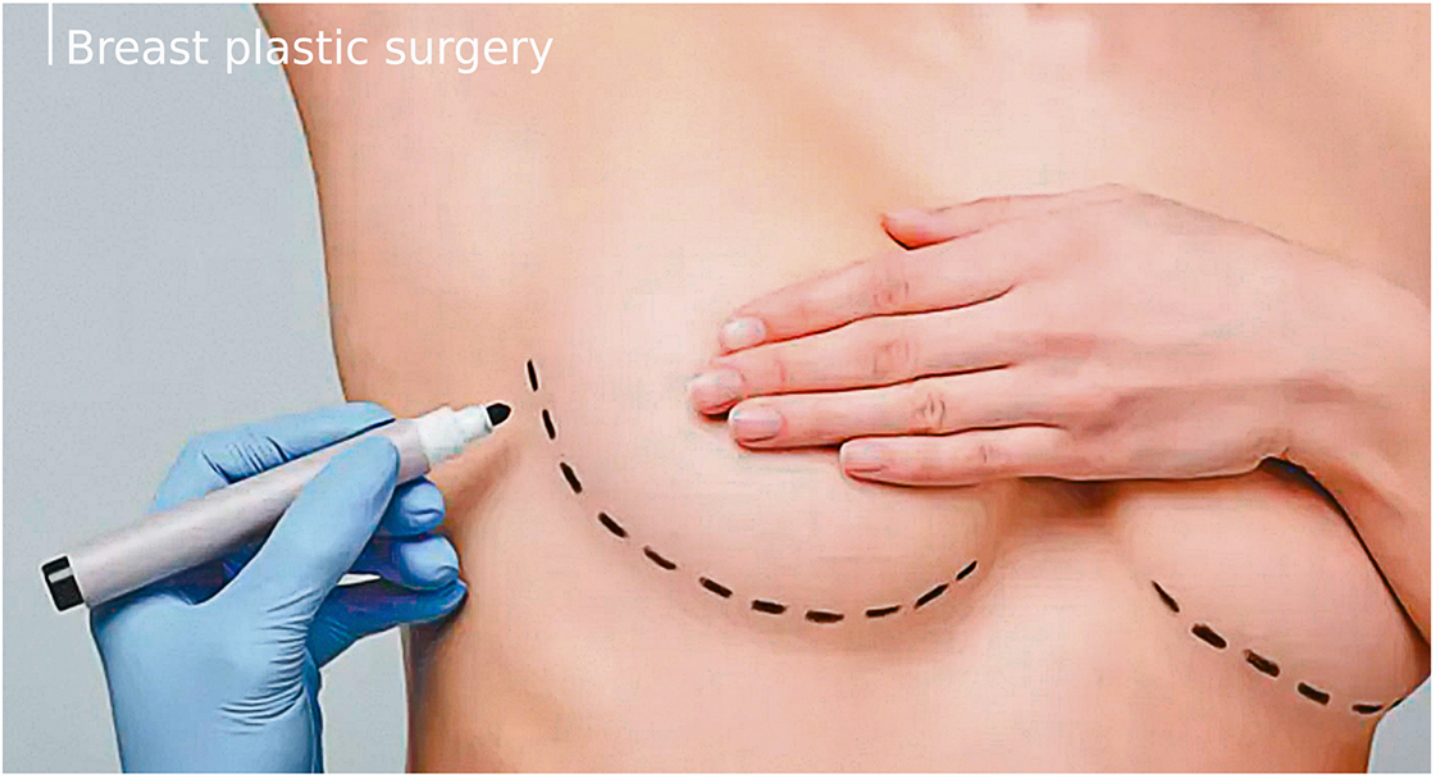
In the beginning of the 20th century until the thirties, how did they do breast plastic surgery?

“My colleagues at that time, they cut it, removed the areola, put it in a small cup of saline solution and left it there, reduced the breast, sewed everything together and then took the areola and grafted it.”

“What's the problem with that? Zero sensitivity. It was the same thing as you touching your fingernail. It does not give. So our colleagues back in the forties, nineteen-fifties did it that way. ”

The areola needs blood like all skin for it to live and it needs nerve for it to have sensitivity.





What are the chances of lose sensitivity?

Even with good techniques, with all care, there is a chance that you will lose sensitivity. Oh, what a complicated thing, isn't it? Yeah, but that's medicine. We don't deal with engineering, an exact science.

this varies from anatomy to anatomy. And then the answer to this question that doesn't want to shut up is: After all, what's the chance that I lose my sensitivity?

You have a 0.5 to 0.7% chance of losing sensitivity. The studies are not that clear. Do you lose everything or lose a little?

Is it just a little insensitive here in the middle or is it all areola? This is not very clear. But depending on the case, where I only took it off, when I identified the nerve, when I was very careful, the chance is half a percent.

Curiosity!

How long after surgery can I return to my normal activities?

Generally speaking in a month. You have to take good care of it in the first and second week, it's no use taking more or less care because the stitches will open and it will irritate your scar.

We always pick on patients. Caution. Have someone help you for the first two weeks.

The first week is essential. Don't do your personal hygiene alone. Don't eat alone, don't brush your teeth alone, don't comb your hair alone, don't get out of bed alone, ask someone to help you.

And when can I start working out again? When can I do leg, belly? With a month, a month and a half later. Arm, biceps, triceps, two months later generally speaking.



Still have doubts?

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