Commentary on the Discussion of: A New Method of Salvaging Breast Reconstruction After Breast Implant Using Negative Pressure Wound Therapy and Instillation

Ju Yong Cheong¹

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Breast implant failure has devastating consequences for the patient. As such prevention and treatment are essential. In our study, we have discussed the use of negative pressure wound therapy (NPWT) and instillation once such implant failure occurs (infection, wound dehiscence, etc.). The authors from University of Foggia raised a very valid point about use of NPWT prior to wound dehiscence. We absolutely agree with this. However, one point to note is that there are two types of NPWT. One that the author mentions can be used on the skin such as PICOTM (Smith and Nephew, London). Studies have shown that this increased blood flow in the skin flap and can improve healing [1, 2]. Such NPWT can be used to prevent wound dehiscence. The other NPWT such as VeraflowTM (KCI USA, Inc, San Antonio, TX) is one that is used inside a cavity once implant failure occurs (abscess/infection, or wound dehiscence). NPWT with instillation has the added

benefit of continuous removal of debris and biofilm from within the cavity. In our experience, this has expedited reconstruction through insertion of another implant within one week.

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Compliance with Ethical Standards

Conflict of interest The authors declare that they have no conflicts of interest to disclose.

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✉ Ju Yong Cheong
santiago-james@hotmail.com

¹ Division of Breast Surgery, Royal Prince Alfred Hospital and Chris O'Brien Lifehouse, 119-143 Missenden Road, Camperdown, Sydney, NSW 2050, Australia