

Inferior Dermal Flap in Immediate Breast Reconstruction

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ABSTRACT

Background. The inferior dermal flap can be used in conjunction with implants or tissue expanders to avoid need for acellular dermal matrix in breast reconstruction and on occasion can serve as an alternative to an autologous flap by functioning as a reconstructed breast mound. Candidates for this procedure are women with high BMI or breast ptosis who desire a decrease in breast size at time of mastectomy with reconstruction. This procedure recruits the de-epithelialized excess skin inferiorly and laterally from a skin-sparing mastectomy and uses this to eliminate the need for acellular dermal matrix in a cost-conscious environment.

Methods. The skin-sparing mastectomy is performed, and the inferior skin flap is de-epithelialized to create the inferior dermal pedicle. A gel implant is placed

retropectorally, and the inferior dermal flap is sutured to the inferior border of the pectoralis major muscle and laterally to a muscle-sparing serratus pedicle to provide support and coverage of the implant.

Results. We have performed this procedure in several patients and present a video outlining the technique of this procedure in a 54-year-old female diagnosed with left breast DCIS. Postoperative pictures taken at 6 weeks showed an excellent cosmetic result without complications.

Conclusions. The inferior dermal flap is a simple and reproducible procedure that can reduce cost by eliminating the use of acellular dermal matrix. It provides an excellent cosmetic outcome in women undergoing mastectomy with large BMI and breast ptosis seeking reduction in breast size.

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