Breast implants [1]

Dear Alice,

I always had small breasts until I became overweight. I am now going on a medically supervised diet. I know that I am ready to really lose the weight and keep it off. The only trouble is that I am only a size "B" cup now. When I lose the weight, I am sure to be an "A," or even an "AA." So, I have been considering the possibility of breast implants. Can you tell me some of the repercussions of breast implants? Can you breast-feed later? What happens during pregnancy? What are the health risks? Well, any information you have about the topic would be helpful. Thanks!

— Flatty but not a Fatty!

Answer

Dear Flatty but not a Fatty!,

It's a good idea to ask questions and do a bit of research as you consider the possibility of getting this surgery. There are a number of possible health risks involved with breast enhancement surgery. You also asked what, if any, effect the procedure might have on your ability to breastfeed and what might occur during pregnancy. The short answer to those questions is that it’s difficult to say for certain (more on that later). And, though your line of questioning specifically asks about health risks, there may be other relevant considerations before you decide on your optimal breast size.

In terms of the procedure itself, a consultation with a surgeon would typically entail a discussion about your general health, medical history, lifestyle, hopes, and expectations for the procedure’s outcome (check out the U.S. Food and Drug Administration’s (FDA) helpful list of questions [2] you might want to ask during an appointment). The surgeon would also explain various options such as outpatient versus overnight stay, sedation versus general anesthesia, type of implant, location of implant, and type of incision.

There are two different kinds of implants approved by the FDA: saline and silicone. Implant type and size is generally based on skin elasticity, desired size increase, breast anatomy, and body type. Saline implants are filled with sterile salt water. Silicone implants are filled with gel that feels
much like actual breast tissue. Manufacturers occasionally introduce new types of implants, so there may be additional options available.

Health risks of the surgery and of the implants can include (but are not limited to):

- Infection
- Pain, bleeding, swelling, and bruising
- Implant leakage or rupture
- Undesired cosmetic changes, such as wrinkling, dimpling, and puckering
- Improper healing around the implant or incision site
- Changes in nipple and breast sensation (temporary or permanent)
- Capsular contracture, or hardening of tissue around the breast
- The need for additional procedures/surgeries — implants often don't last a lifetime. Up to 20 percent of people with breast implants need to have them removed or replaced due to complications.

List adapted from the U.S. FDA.¹

In regards to the impact on pregnancy, baby, and the ability to breastfeed: there are some unknowns in this area. There have been a few studies that found no higher rates of birth defects in babies born to mothers with breast implants. Additionally, how breast milk supply develops during pregnancy and while breastfeeding will be dependent on a number of factors relating to augmentation. The placement of implants doesn't generally affect the mammary glands and breast ducts, which still allow for the production of milk. However, some breast tissue is removed during the surgery, so it may have the potential to interfere with how well milk is produced. It can also be dependent on the types of incisions that are used, as some may sever nerves in the breast necessary to breastfeeding. Due to this, some mothers with implants have the ability, while others don't. In addition to the production of milk, the appearance may also change as implants won't prevent any sagging that's associated with pregnancy or other life changes. A breast lift procedure would help to prevent sagging. Further, because there’s no established way to detect silicone in breast milk, it isn't known whether silicone can pass through the implant shell and into breast milk (and be passed to the baby). Although you're thinking about pregnancy and breastfeeding now, it's also key to know that breast implants can affect mammograms.² When the time comes, you may need more specialized tests to make sure health care providers can adequately see the breast tissue.

A surgeon will have a better sense of which concerns will be most relevant for you. Talking with others who have had the surgery can also be immensely helpful, not only in helping to identify a quality surgeon but also in providing a sense of what to expect. Considerations about the cost of getting breast implants and the possibility that implants may need to be replaced after a certain number of years may also factor into your decision.

Knowledge of health risks can certainly inform whether or not to go ahead with the procedure, but have you thought about factors beyond weight loss that might be influencing your decision? What are the benefits, as you see them, of having larger breasts? Are there any potential non-health related drawbacks for you? What would be your ideal size? And what was your process in deciding that this size would be better for you? People are bombarded by messages about how breasts "should" look. Family, friends, lovers, advertising, movies, and many other influences
shape people’s views on this. It may be a useful exercise to think back about your own influences as you work through a decision that feels right to you.

For more information about the procedure, associated health risks, and additional recommendations to consider, check out the FDA website [5].

Breast of luck to you!

Alice!

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