Beyond the T-junction: reinforce strategic sites in superomedial pedicle mammoplasties using a dual dermal flap technique

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BACKGROUND

- T-junction and vertical-areolar junction are prone to **dehiscence** (**4-20%**)
- Many **preventive techniques** are described, but few use dermal flaps at strategic suture sites

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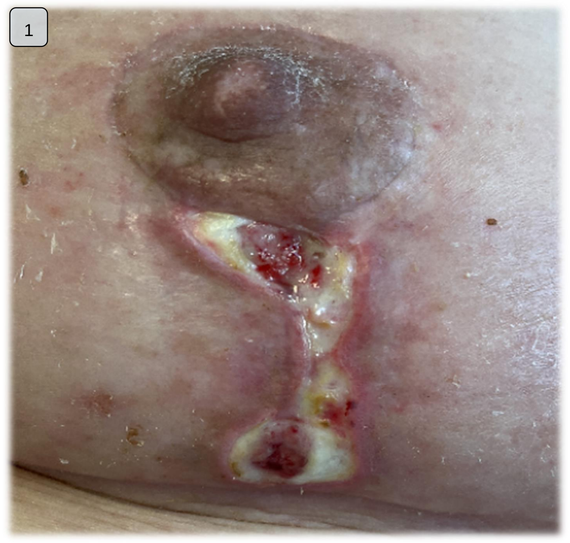


METHODS

- Systematic review of PubMed
- Summary of **currently existing techniques using dermal flaps**
- Modified superomedial pedicle technique with **two dermal flaps at strategic high-risk points**

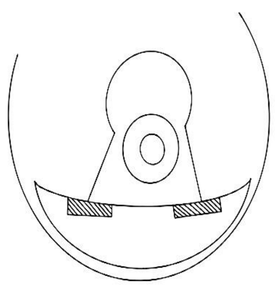
RESULTS

- **Three studies** reported the use of dermal flaps at T-junction
- **Statistically significant lower rates of scar-related complications (1.4 – 2.9%)**

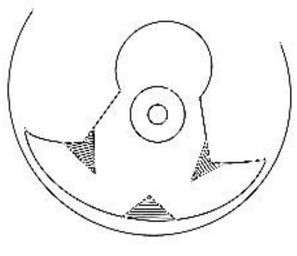
None of the studies reviewed described reinforcement of the vertical-areolar junction.

2

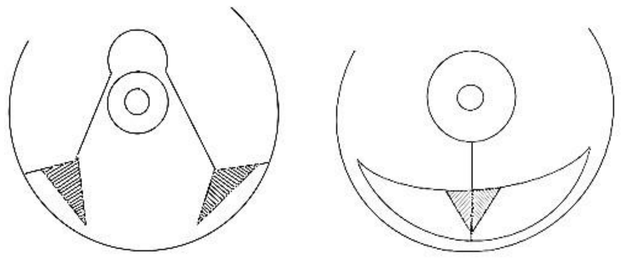
1. De Plaza et al., 2004



2. Domergue et al., 2014



3. Khalil et al., 2014



Our technique:

1. *De-epithelialization of super-medial pedicle and two dermal flaps*
2. *Dissection of the pedicle*
3. *Dermo-glandular excision*
4. *Positioning and suture of dermal flaps*
5. *Classic layered closure*

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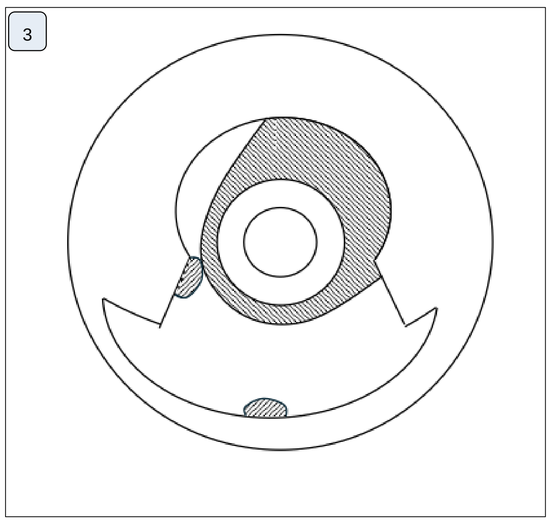

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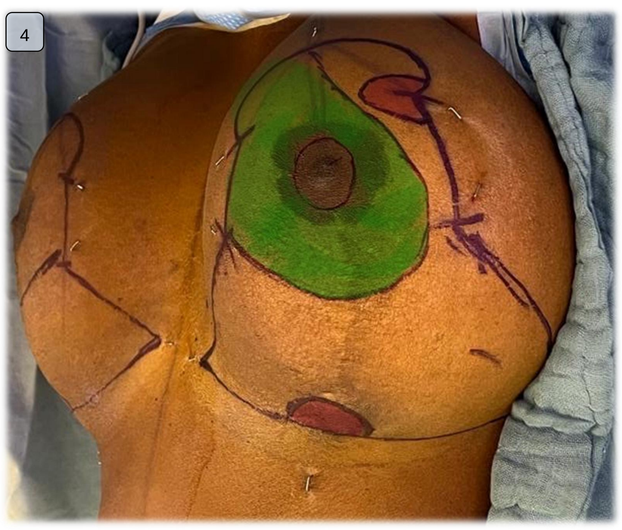

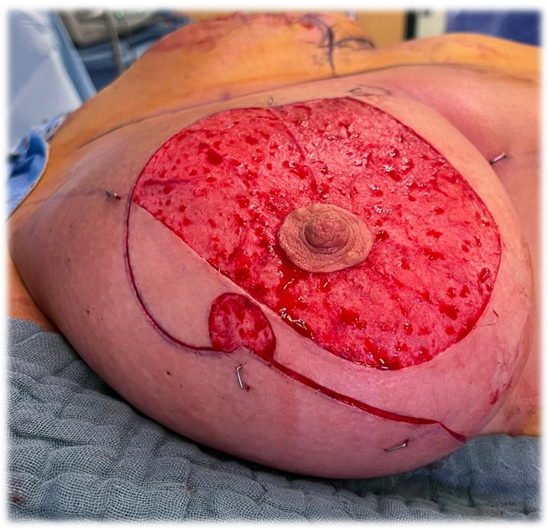

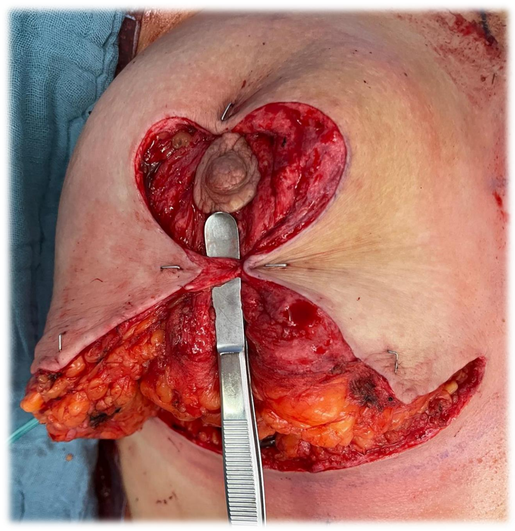

CONCLUSIONS

- Our technique is based on the concept of **tension redistribution and vascular enhancement**
- We believe that this modification may **help stabilizing the scar without increasing operative time and promoting a better postoperative healing**

1. Case example of dehiscence ; 2. Cited dermal flaps in the literature ; 3. Our technique of dual dermal flap ; 4. A recent case using our technique

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