

## Initial Clinical Experience with "Low Bleed" Breast Implants

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**Abstract.** Considerable data indicate that "low bleed" breast implants could lead to a reduction in the incidence of clinically evident capsular contraction. This paper represents an initial clinical evaluation of "low bleed" breast implants. Initial data indicate that there is a reduction of the incidence of capsular contraction in patients in which "low bleed" implants have been used.

**Key words:** Capsular contraction — Augmentation mammoplasty — "Low bleed" breast implants

The occurrence of capsular contraction following breast augmentation has been well documented [1, 2]. Domanskis and Owsley demonstrated on biopsy that silicone particles appeared to be present within fibrous capsules [3]. Subsequently, Barker and associates in several studies demonstrated implant "bleeding" and the subsequent reaction in animals [4, 5]. The development of "low bleed" prostheses followed and was reported in animals [6].

### Methods

All patients had transinfraareolar suprapectoral augmentation using "low bleed" implants of suitable size. Approximately one-third of the patients had 40 mg of triamcinolone acetonide instilled into the pocket around the implant. The other patients did not have steroid instillation. The usual postoperative routine was followed and at 3 weeks all patients were started on massage and the wearing of compressive brassieres.

The patients were divided into 2 categories depending on the period of follow-up. All patients had either Dow-Corning Silastic II "low bleed" implants or McGhan-3M Intrashiel implants. The results of the clinical evaluation are indicated in Table 1.

### Discussion

All patients were evaluated clinically and Baker's [7] classification for evaluation of capsular contraction was used. Any degree of capsular contraction on the Baker scale was counted as capsular contraction.

Our clinical results indicate that "low bleed" implants appear to be effective in reducing the incidence of capsular contraction. While we find our initial results encouraging, and plan to continue the use of "low bleed," we stress that this is an initial report and that much more investigation is needed. "Low bleed" implants do appear to reduce the incidence of capsular contraction.

### Addendum

Since the original preparation and presentation of this article, the authors have encountered an in-

**Table 1.** Results of clinical evaluation in 86 patients undergoing augmentation mammoplasty with "low bleed" implants.

Length of follow-up	No. of patients	No. of breasts	No. of hematomas	Capsular contraction (%)
6 weeks to 1 year	47	94	2	5 (5.3)
1 year	38	76	1	3 (4)

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creasingly high incidence of capsular contraction in patients that have Intrashiel implants. It is now our opinion, based on clinical and preliminary experimental data, that Intrashiel implants are, in fact, not "low bleed" implants and we have discontinued their use.

### References

1. Wilflingseder T, Propst A, Mikuz G: Constrictive fibrosis following silicone implants in mammary augmentation. *Chir Plast* 2:2, 1974
2. Baker JL Jr, Bartels RJ, Douglas RM: Closed compression technique for rupturing a contracted capsule around breast implants. *Plast Reconstr Surg* 58:137, 1976
3. Domanskis EJ, Owsley JQ Jr: Histological investigation of the etiology of capsular contracture following augmentation mammoplasty. *Plast Reconstr Surg* 58:689, 1976
4. Barker DE, Retsky MI, Schultz S: "Bleeding" of silicone from bag-gel breast implants and its clinical relation to fibrous capsule reaction. *Plast Reconstr Surg* 61:836, 1978
5. Barker DE, Schultz SL: Reaction to silicone implants in the guinea pig. *Aesth Plast Surg* 1:371, 1978
6. Barker DE, Retsky MI, Schultz S: The new low bleed mammary prosthesis: An experimental study in mice. *Aesth Plast Surg* 5:85, 1981
7. Baker J: Classification of spherical contracture. Presented at the Aesthetic Breast Symposium, Scottsdale, Arizona, 1975