Reverse Abdominoplasty, a Viable Option for Breast Reconstruction

Eugene Koh, MBBS, MSSc; David I. Watson, MBBS, MD; Nicola R. Dean, MBChB, PhD

Disclosure/Financial Support: Supported by Flinders University Postgraduate Research Scholarship (to Dr. Eugene Koh). None of the authors has a financial interest in any of the products, devices, or drugs mentioned in this manuscript.

Introduction: The reverse abdominoplasty was first described in the 1970's, and since then, it has been described for reconstruction of thoracic wall defects, upper abdominal wall contouring, and augmentation mammaplasty.¹ It has received little attention in the literature, it can however be a useful method of breast reconstruction in a select group of patients, such as those who are obese. We present a series of 3 patients who underwent post-mastectomy breast reconstruction with the reverse abdominoplasty flap after being found unsuitable for other methods of breast reconstruction.

Methods: Three patients underwent breast reconstruction with reverse abdominoplasty, and complication and Breast-Q data were obtained prospectively.

Patient 1 is a 55-year-old lady with a body mass index (BMI) of 48.30, who underwent 2 stage bilateral breast reconstruction with reverse abdominoplasty and insertion of tissue expanders.

Patient 2 is a 49-year-old lady with a BMI of 38.40, who underwent 2 stage bilateral breast reconstruction with reverse abdominoplasty and insertion of tissue expanders.

Patient 3 is a 36-year-old lady with a BMI of 28.00, who underwent reverse abdominoplasty to correct a unilateral partial mastectomy defect.

Results: Patients 1 and 3 did not experience any post-operative complications, and Patient 2 experienced minor wound healing problems. All three patients were satisfied with their outcomes, everyone having significant improvements in the Breast-Q scores across various domains.

Conclusion: Although not for everyone, we present a safe and satisfactory option for breast reconstruction, when other usual methods of breast reconstruction are not available, especially in the obese patient group.

References:

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