

Evaluation of prepectoral implant placement and complete coverage with TiLOOP® Bra mesh for breast reconstruction: a prospective study on long term and patient reported BREAST-Q outcomes

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Method

Between January 2012 and March 2015, 179 patients were enrolled in this prospective study. Patients underwent mastectomy and immediate pre-pectoral breast reconstruction with the titanium-coated mesh TiLOOP® Bra.

Primary endpoint

- ▶ Quality of life of patients 2 years postoperatively and the comparison to preoperative assessment measured by BREAST-Q questionnaire

Secondary endpoints

- ▶ Peri- and postoperative complications
- ▶ Capsular contracture rate evaluated by Baker scale
- ▶ Aesthetic outcome
- ▶ Oncological outcome

Exclusion criteria: BMI > 35, breast size > C cup, pregnancy

The mean follow-up was 38.5 months.

Quality of life

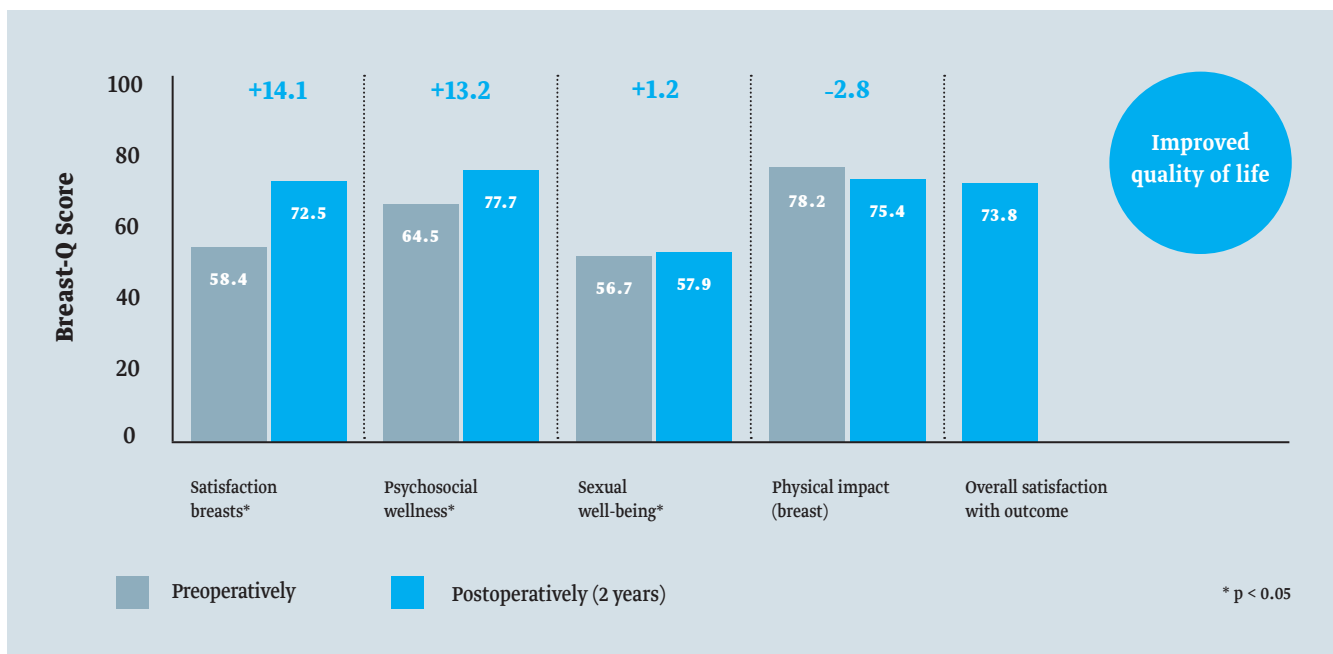


Fig. 1: Quality of life of the patients measured by BREAST-Q questionnaire; comparison of the preoperative and postoperative evaluation (mean values); the higher the score, the higher the quality of life (score scale from 0-100 points)

Capsular contracture rate according to Baker

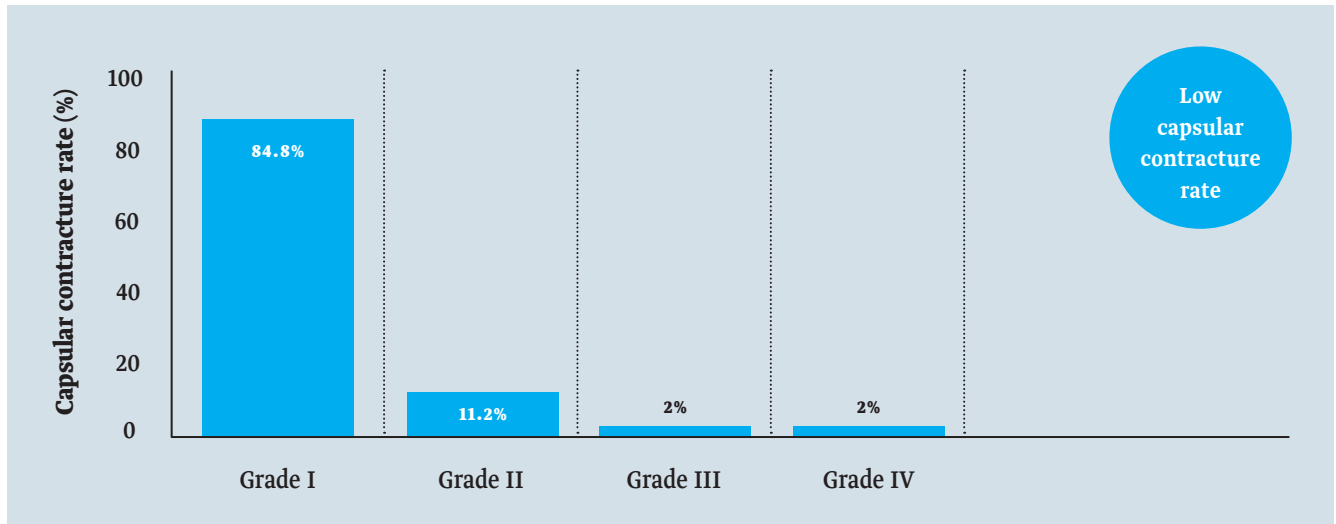


Fig. 2: Capsular contracture rate evaluated by Baker scale, 2 years postoperatively

Results

- ▶ From a total of 179 patients included in the study, 71 patients underwent bilateral surgery and 108 patients unilateral surgery.
- ▶ Accordingly, a total of 250 mastectomies were performed, of which 136 (54.4%) were nipple-sparing mastectomies (NSM) and 114 (45.6%) skin-sparing mastectomies (SSM)
- ▶ Of the 250 mastectomies performed, 6 cases (2.4%) showed complications requiring a re-operation; types of complications: two necroses of the nipple/skin (0.8%), two infections (0.8%), one wound dehiscence (0.4%) and one haematoma (0.4%)
- ▶ Implant losses with following sub-pectoral placement of an expander were reported in 3 cases (1.2%).
- ▶ The overall postoperative aesthetic outcome was evaluated on a 10-point scale and achieved an average of 8.7 out of 10 points (1 = very poor result, 10 = very good result)

Conclusion

The pre-pectoral primary breast reconstruction with the titanized mesh TiLOOP® Bra improves the quality of life of the patients, leads to a very high patient satisfaction as well as very good aesthetic results and a low complication rate. The results confirm that the muscle-sparing pre-pectoral technique can be a valid alternative to traditional sub-pectoral breast reconstruction.

References



Further information on titanised mesh implants.



The entire study can be found here.

Contact

Should you have any questions our Regulatory and Clinical Affairs Team will be glad to advise you.

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