Pre-pectoral breast reconstruction with TiLOOP® Bra Pocket: a single center prospective study


Method

Between August 2017 and January 2018, 18 patients were enrolled in this prospective study. The patients were diagnosed with breast cancer or a genetic predisposition (BRCA1 or BRCA2 mutation). They underwent mastectomy and pre-pectoral breast reconstruction with the titanised mesh TiLOOP® Bra Pocket and an expander or an implant.

Endpoints:

- Peri- and postoperative complications
- Capsular contracture rate evaluated by Baker scale
- Recording the time for intraoperative positioning of the implant

The mean follow-up was 12 months.

Short implantation time*

- Average implantation time: 4 minutes (range: 3-10 min.)
- Fast positioning of the implant due to ready-to-use mesh pocket
- Thereby: short exposure time to sources of contamination

*Time for positioning the implant in the TiLOOP® Bra Pocket and for the fixation on the musculus pectoralis major

Results

- From a total of 18 patients included in the study, seven patients underwent nipple-sparing mastectomy and eleven patients skin-sparing mastectomy.
- A total of 22 TiLOOP® Bra Pockets were implanted.
- Complications were reported in three patients. Types of complications: seromas in two patients, a wound healing disorder/wound dehiscence in one patient.
- No clinically significant capsular contractures (Baker grade III and grade IV) occurred.
Conclusion

The pre-pectoral breast reconstruction with the titanised mesh TiLOOP® Bra Pocket allows a short implantation time and thus leads to a short exposure time to sources of contamination. The short implantation time shows the simple and efficient use of the TiLOOP® Bra Pocket.

References

Further information: www.pfmmedical.com/meshimplants-professionals