



New Breast Reconstruction Techniques Bring Significant Psychological Benefits

Dr Matthew Peters | Valley Plastics, North Lakes Day Hospital - Plastic and Reconstructive Surgeon Bsc. MBBS FRACS (Plast)

Breast reconstruction can help restore the look and feel of the breast after a mastectomy. Performed by a plastic surgeon, breast reconstruction can be done at the same time as the mastectomy ("immediate") or at a later date ("delayed").

Breast reconstruction is an option available to most women confronted with the physical changes following mastectomy. While breast reconstruction is considered elective surgery, undergoing breast reconstruction can have profound emotional and practical benefits.

It is also important to keep in mind that breast reconstruction does not interfere with the treatment of breast cancer or surveillance for recurrence. It can, however, help to enhance a woman's confidence and self-image after a mastectomy.

Many women now get immediate breast reconstruction. However, the timing depends on:

- Physical exam by the plastic surgeon
- Surgical risk factors (such as smoking and overweight)
- Treatments you will need after surgery
- Not all women can have immediate reconstruction

It is important to discuss options with a plastic surgeon, breast surgeon and oncologist (and the patient's radiation oncologist if having radiation therapy).

"Recently there's been a lot of research into why Australian women don't undergo breast reconstruction after a breast cancer diagnosis," says Dr Peters. "And the reasons may surprise many. It's not for fear of surgery or not wanting to go through a procedure such as reconstruction, but is actually due to a lack of education and awareness about the options that exist."

The rates of women undergoing a breast reconstruction in Australia sit around 10 to 12 %, whereas the take-up rate is far, far greater in the United Kingdom and the United States, where the public awareness campaigns are stronger.

"Legislation also exists in many states in the US," explains Dr Peters, "where there's a mandate that every woman diagnosed with breast cancer has the opportunity to see a plastic surgeon to discuss reconstruction options."

There are many exciting developments in breast reconstruction. Just a few worth noting are:

Allografts: An allograft is a term used to describe an organ or tissue donated from one individual to another.

"The allograft I prefer is a suppler, elastic allograft specifically for use in restorative breast surgery and is used to supplement remaining breast tissue," Explains Dr Peters. "It can provide support for the soft tissue and help prevent the implant from extruding through the skin. This allograft is not only a strong tissue substitute, it also supports the natural, full regrowth of the patient's own tissue, a process called tissue regeneration.

"In the long term, allografts can lead to less surgical revisions caused by obvious protrusions, rippling, muscle animation or contractions."

More choice than ever in surface, shape, size, base and projection of implants:

Traditionally, breast implant surfaces have been either smooth or textured. Textured surfaces have been manufactured by projecting salt, sugar or other particles on the implant shell. Lately, several studies have shown that aggressive textures, which are typically obtained with such materials, can have secondary effects for women.

"Several types of implants are now

available that create unique surfaces obtained without the use of foreign materials like salt or sugar, but instead are created with a controlled process designed for a better biocompatibility," says Dr Peters. "Additionally, these nano-surfaces promote a more natural interaction between the implant and the surrounding tissue, allowing the implant to better adapt to the normal movement of the breast."

The implant's shape has also evolved dramatically over the last few years and in addition to implant shape, plastic surgeons can now guide their patients to consider size, base and projection in order to achieve the desired breast aesthetic outcome. The base of the implant will define the resulting cleavage, the fullness is determined by the implant projection and the cup by the implant volume.

Self-managed tissue expanders:

These devices are game-changing and allow the patient greater control over their own body. For patients in remote locations or who find it difficult to attend frequent clinical appointments, the self-management devices are certainly less onerous, with less disruptions to daily routine and less painful than receiving injections for larger expansion doses.

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Dr Rodins Assists Triple M's 'Biggest Skin Check'

On the first day of Summer, Triple M's 'Biggest Skin Check' organised to provide free skin checks accross Brisbane.

Dermatoligst Dr Karl Rodins and Montserrat Day Hospital were involved with Triple M's 'Biggest Skin Check', where Dr Rodins performed skin check ups on hosts Marty and Robyn, to help promote awareness of the importance of regular skin check ups.



"The self-managed tissue expander system I prefer to use with my patients is comprised of two primary components: the tissue expander itself and the dosage controller," explains Dr Peters. "With one press of the single-touch button, the controller syncs with the expander and a dose of 10cc of carbon dioxide is released, allowing the expander to gradually expand."

Fat Grafting:

"Fat grafting techniques are getting better and better with the new equipment available," Says Dr Peters.

Autologous fat grafting increasingly plays a role in breast reconstruction and flexibility comes into play because the contours of a reconstructed breast mound may lead to step-offs in the reconstruction. The flexibility of fat gives surgeons the ability to sculpt and reconstruct the breast so that there is a more gradual contour from chest wall to breast mound.

"I think the range of possibilities in breast reconstruction is widely unknown and under-estimated – certainly by the general public and to a large extent amongst surgeons - and it can become a

barrier to women seeking reconstruction," Says Dr Peters.

"Many women have an outdated notion of what a breast reconstruction will look and feel like and decide it's not worth the perceived hassle to go down that path and that's a shame because the psychological benefits a reconstruction can bring are tremendous."

Welcome Dr Mackay to North Lakes Day Hospital

Dr Cameron Mackay
BSc MBBS MSc FRACS CIME
Hand Surgery and Rehabilitation

Dr Cameron Mackay is a Hand and Plastic Reconstructive Surgeon. Now consulting and operating at North Lakes Day Hospital and his primary interests include hand trauma & elective hand surgery.



In private practice Dr Mackay specialises in the management of trauma and the revision of post-traumatic deformity.

Road Boss Rally 2017 A Big Success

Recently Montserrat was a proud sponsor of the 'Road Boss Rally 2017', which is a charity road rally travelling from Gladstone to Tamworth, raising \$264,321 for the GIVIT Foundation.

"GIVIT is a national not-for-profit connecting those who have with those who need, in a private and safe way." - www.givit.org.au



Ben's Beardy Decembeard

Thank you to all who supported Montserrat CEO Ben Korst taking part in Decembeard, raising money in the fight to beat Bowel cancer.



Sorry to Ben's Wife, Nina.



Congratulations Lolly and Rakhee

Best wishes to Lolly and Rakhee from the Oxford Day Surgery (Perth), who are our first two employees to take advantage of Montserrat's additional paid Maternity Leave entitlements.



Welcome Renee to Samford Road Day Hospital

Welcome aboard Renee, who has recently joined Samford Road Day Hospital as their Clinical Manager.



Open Access Endoscopy Timetable March 2018

SPECIALIST	MON	TUES	WED	THURS	FRI
Dr Cliona Maguire	GAY	GAY	GAY°	GAY	
Dr Ammar Keir					IND#
Dr Mark Norrie		IND		IND	IND«
Dr Sam Islam	IND		IND#		IND#
Dr Rebecca Ryan	IND	GAY#/IND#	IND	IND	IND#
Dr Hugh McGregor		NLDH#			GAY°
Dr Daniel Mehanna	NLDH				
Dr Terrance Tan		IPS#/IND			IPS#
Dr Hadi Moattar			NLDH°	NLDH°	

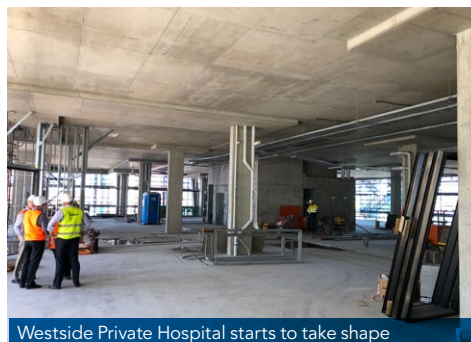
Saturday Service Rotates between Doctors at Indooroopilly

° Unless in Emerald or Longreach #Full day list usually available *Fortnightly only * Please note that whilst we offer an Open Access Service all our Gastroenterologists are available for consultations. ° Monthly only (Haemorrhoid Clinic)



Westside Private Hospital on track to open in 2018

Debra Pearce - Westside project Manager, Trish Mukasukas - Director of Clinical Services and Lauren Heggie - Indooroopilly Clinical Manager pretending that they understand the technical drawings.



Westside Private Hospital starts to take shape

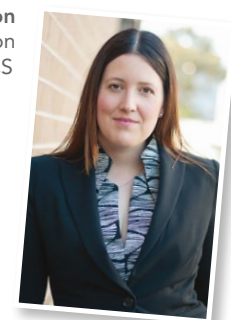


What a view from first floor consulting suites!



Get To Know Your Specialist - Dr Rebecca Won

Dr Rebecca Won
Plastic/Reconstructive and Hand Surgeon
B Med FRACS



Where were you born and raised?

Born in Royal Brisbane Hospital, grew up in Cleveland on a property with horses and cows, a little different to what it is now!

What's the #1 most played song on your iPod?

James Morrison - I won't let you go

What chore do you absolutely hate doing?

Ironing, avoid it at all costs and try very hard not to buy clothes that need it!

What is your favorite form of exercise?

Practically, weight based training. Ideally skiing, although last time I attempted that it resulted in a tibial fracture, so I'm clearly not much good at it!

If you knew the world was ending in 2018, what would you do differently?

Schedule in a lot of holidays overseas with friends & family

If you could choose anyone, who would you pick as your mentor?

I have been fortunate to have many people guide me along in my career. Michael Lanigan is a now retired Plastic Surgeon who's practice I have continued. He is a humble, talented Plastic Surgeon who never sought accolades. He had a long history with Interplast and designed the soft tissue flaps to close spina bifida defects in newborn babies many years ago. Plastic Surgeons still use his operation today. I can only hope to achieve as much in my career, and always endeavour to treat patients as well as he did.

If you could witness any event past, present or future, what would it be?

The announcement of the ending of either World War. To have been a fly on the wall in what must have been a heartbreaking and jubilant moment.

If you could learn to do anything, what would it be?

To be multilingual. Korean, French, German

& Spanish would be fabulous!

If you could meet anyone, living or dead, who would you meet?

Barack Obama. I want to know if he is the same as his public image.

What was the last movie, TV show or book that made you tear up?

I cry at everything, my husband bans me from watching movies on planes as it's too embarrassing for him to sit next to me! It's been worse since I had my daughter too.

What's the hardest thing you've ever done?

Plastic Surgical Training, it was long, tough and challenging, but I would make the same decision over again in a split second. The first few months of my daughter's life were fairly difficult also, something I wasn't expecting after managing Plastic Surgical Training!

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DR CLIONA MAGUIRE | Gastroenterologist MB BCH BAO MRCPI FRACP



DR TERRANCE TAN | Gastroenterologist MB BS FRACP PHD



DR MARK NORRIE | Gastroenterologist BHB MB CHB FRACP PHD



DR SAM ISLAM | Gastroenterologist MBBS PHD FRAC



DR AMMAR KHEIR | Gastroenterologist MBBS, MRCP (UK), FRACP



DR HADI MOATTAR | Gastroenterologist & Hepatologist | MBBS FRACP



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EFFECTIVE MARCH 2018



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Dr Peter Davidson 07 3121 4605
Dr Kieron Bigby 07 3859 0690
Dr Geoffrey Hawson 07 3859 0690

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Dr Joseph Rizk 1300 559 848
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