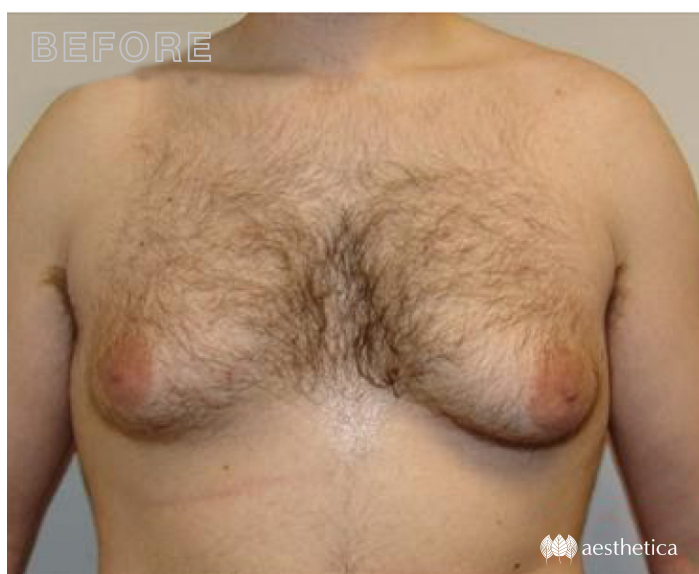


Gynecomastia

Gynecomastia is a term used to describe the abnormal enlargement of the male breast. This can be due to hypertrophy of the breast parenchyma alone, or from excess fat in the male breast area. Gynecomastia can be a very distressing, psychological problem - for some men - if not addressed.

The general approach to gynecomastia is a conservative one, in that around 40% of young males will experience some type of gynecomastia around the age of 13-15 years old. Typically, it will be a tender swelling in one or both breasts that is persistent. Most of these resolve within two years, and almost all by three years.

If the swelling did not start pre-adolescence or is bilateral, then it can be watched for approximately two years. If no resolution has taken place by two years, then surgical treatment is the next step. It is important that each of these patients be seen by an endocrinologist to address any underlying issues.



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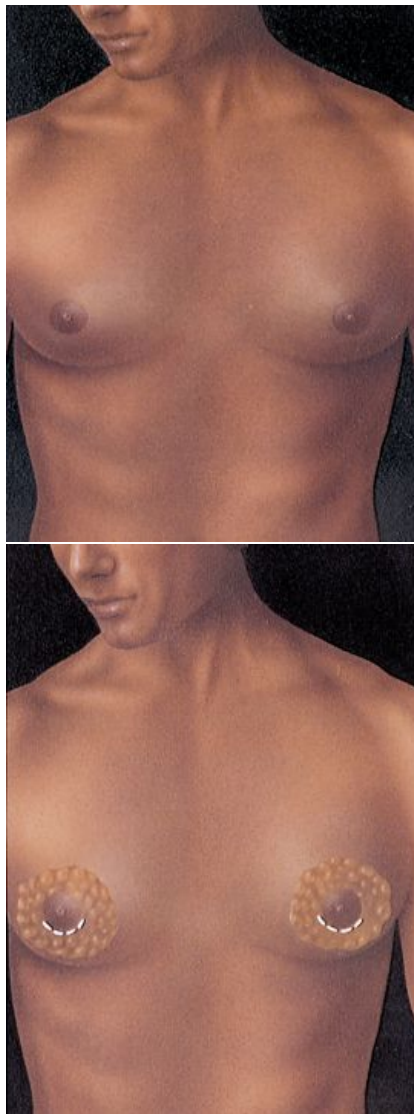
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Gynecomastia



PROCEDURE: If possible, most patients are treated with liposuction, which removes most of the fatty tissue. If there is a glandular nub or breast bud still present, then a small excision is made at the base of the areola and the breast tissue is excised directly. This is always done conservatively to prevent a depression in this area.

RECOVERY: Once the operation has been completed, the patient will wear a compression dressing (6-inch Ace wrap) for about six weeks postoperatively to try and help compress the tissues to aid in healing. Occasionally, a drain will be placed to help reduce collection of fluid.

COMPLICATIONS: Some potential complications and risks with surgery are infection, bleeding, delayed wound healing, wound dehiscence, infection, hematoma, seroma, asymmetry, scarring, unsatisfactory scarring, nipple necrosis, sensation alteration, loss of sensation, persistent pain, nerve changes, vascular and/or lymphatic changes.

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