



# Breast Celebration

October has become pink ribbon time, synonymous with runs, walks and other events to promote breast health awareness. This month, VERNE MAREE celebrates our “lovely lady lumps”, the mystifying attraction they hold for men, and their myriad implications for women’s happiness and health.

**W**hat are breasts? My dictionary defines them as “the soft, protruding organs on the upper front of a woman’s body that secrete milk after pregnancy”. Not bad, as definitions go, but it barely hints at the complexity of their role in our lives.

As a woman, I’m still puzzled by the fascination that these twin orbs of fatty and glandular tissue hold for men. It makes sense that male appreciation of breasts, and this influencing their selection of mates, would favour the survival of the species – but really, the extent of the obsession can be hard to fathom.

Of course, the other essential role of our mammary glands is the production of milk, the best possible food for babies. It’s ironic that breast-feeding remains such a fraught issue, even in an otherwise permissive world where breasts are bared on beaches and billboards alike; and also an indication of our society’s conflicted attitudes to women’s bodies.

Remember those first pubescent buds on your bony 11-year-old chest? The itchy physical discomfort, the embarrassment mixed in equal parts with relief that they’d finally made an appearance? (A good 18 months later than classmate Maria Buttazoni, who had also begun to grow a moustache.)

Or Dad chuckling at that first 30AA training bra, whose yellow rosebud print satisfactorily showed through a white school

shirt: “Training bra? What are you training them to do? Balance balls on their noses?”

And as they gradually swell to match the other changing curves of your teenage body, there’s a gratifying awareness of incipient womanhood and burgeoning sexuality, along with vague unease about just what you are going to do with all this feminine power.

## And then...

And then, to your horror, you realise that your breasts are not *right*. They’re too small, too big, too wide apart, too close together; they’re the wrong shape, one is bigger, higher or lower than the other; your nipples are a funny colour, they stick out too much or they don’t stick out enough. Your breasts are not perfect, and you’re utterly mortified.

When we were 16, I envied my friend Sally’s washboard stomach, curvy lower body and tiny breasts that looked great



braless (I thought) in spaghetti-strap tops. She *didn't* think so, but it took her another 30 years to go for implants. I'm happy to report that she's thrilled with the result, but now I'm jealous that her perfect 36Cs are as jaunty as a bloody 20-year-old's.

Which brings us (or me, anyway) to the droop. Even if we're happy with our breasts to start with, time and gravity take their toll. So do pregnancy and breastfeeding, which can deplete fatty tissue and tend to stretch supportive tissue such as skin, ligaments and muscle.

### What's perfect, anyway?

Plastic surgeon Dr Karen Sng agrees that breasts are an essential part of the female identity, being an important element of what distinguishes us from men. But who decides the ideal size and shape?

"Media such as magazines and television play a role in what we perceive to be beautiful breasts, but that perception varies from individual to individual," she tells me.

"There are those who are perfectly comfortable with having very little breasts and would never dream of undergoing augmentation; and others, like your friend Sally, who feel so much happier after doing so."

Norms and ideals also differ from culture to culture. In North America they like them bigger, and it's common to see what I regard as unnaturally large breasts on an otherwise skinny body. But in South America, as Dr Sng points out, big breasts are less of an issue: *they* place more emphasis on having a bouncy bottom.

### Augmentation and reduction

Augmentation is far more common than reduction, which tends to be a more complicated procedure. Whichever it is, however, proper consultation is extremely important, says Dr Sng, especially as many women have a more or less skewed body image. "As plastic surgeons, we hate to talk in cup sizes," she adds. "That's because sizes vary so much from country to country, from store to store and from brand to brand.

"Instead, we advise them on what can be done to achieve a pleasing

## Breast Quotes


"You start out feeling happy that you have no hips or boobs. All of a sudden you get them, and it feels sloppy. Then just when you start liking them, they start drooping."  
– Cindy Crawford

"Breasts are a scandal because they shatter the border between motherhood and sexuality."  
– Iris Marion Young

"I love women's breasts. I love how they don't blink when I stare at them."  
– Jarod Klintz

"I do wish my breasts were bigger. Not big... but less small."  
– Calista Flockhart

"Scientists now believe that the primary biological function of breasts is to make males stupid."  
– Dave Barry



proportionality: we talk about what would be most appropriate for their individual body, and also what can actually be achieved in terms of what you are naturally endowed with. Be it an augmentation or a reduction, your eventual outcome is limited by your given shape and size.

So, few of us can realistically point at a picture of Pamela Anderson and say,

"I want to look like that." What's more, plastic surgeons are bound by the sizes and shapes of the implants that are available; they can't custom-make them to fit an individual body. And similarly, there are limitations as to what can be achieved by a reduction.

"Surgery is surgery," she says. "It's not magic."

### Up where we belong

Someone who has small breasts will experience a slight drop in her 30s and 40s; heavier breasts may drop more noticeably.

A breast lift involves rearranging the existing breasts to sit better on the chest, and removing excess loose skin. While the procedure addresses the breast droop that has developed over time, it's important for the patient to understand that it will not restore breasts to their original youthful state.

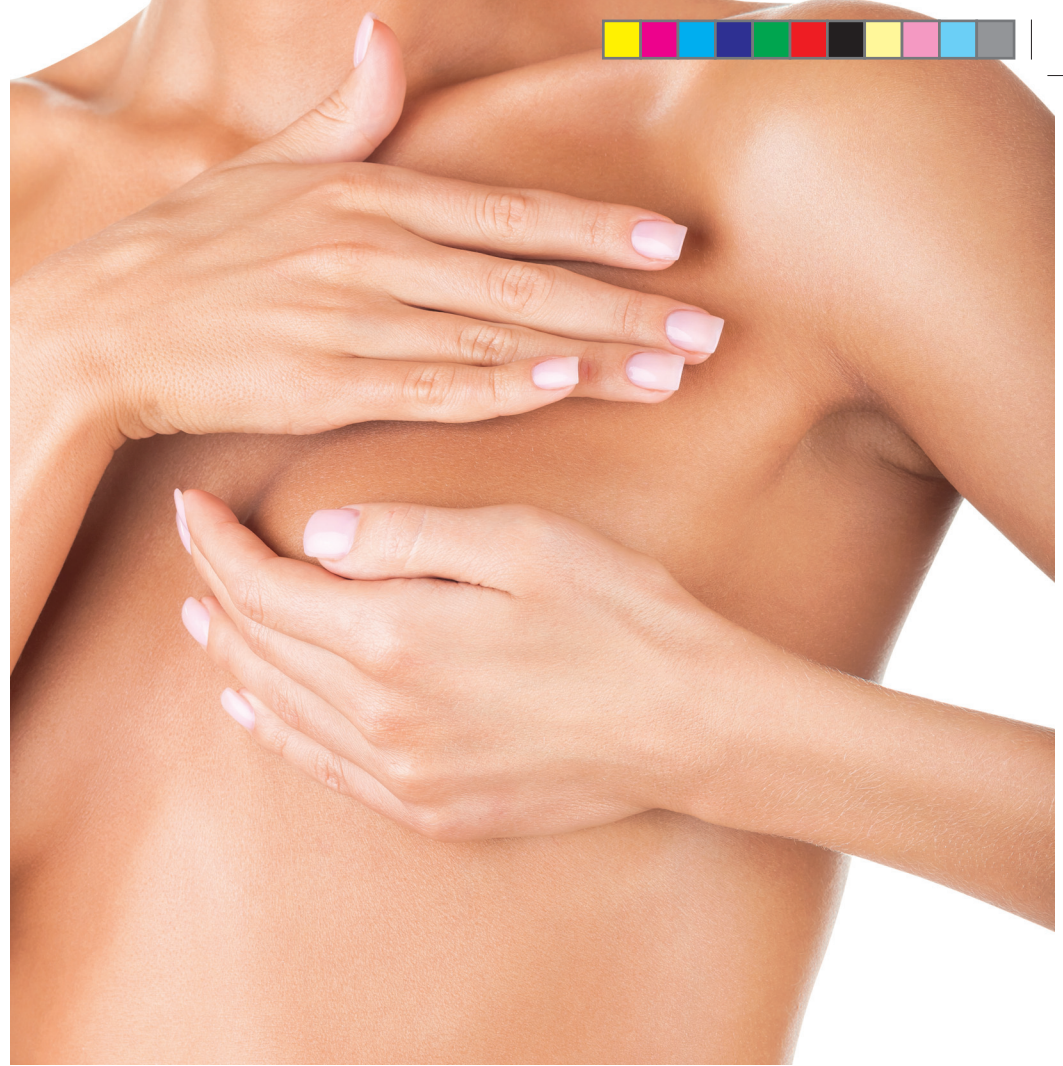
Neither is it a permanent solution, Dr Sng explains. "Like the rest of our bodies, breasts continue to change and to age, and they will drop over time. That's why a good bra is especially important after surgery."

Sometimes, they will appear to have less volume after a lift, especially in the case of a woman who has breast-fed. Adding volume to achieve a bigger size, for example with implants, makes recurrence of the droop more likely.

### Post-mastectomy reconstruction

The take-up rate of post-mastectomy breast reconstruction has gone up a lot compared with ten or 20 years ago. This is partly because there is more awareness of this option, and also because more women are being diagnosed with breast cancer at a younger age, explains the doctor. That said, she has one reconstruction patient who is 70!

"I've seen breast cancer patients who are so intent on the need to get rid of their breast cancer that they don't want to think about reconstruction. But the



message I would like to get across to your readers is that reconstruction after mastectomy is a readily available option – and that it's not a frivolous choice."

Which is better – immediate or delayed reconstruction? "For a more aesthetic result with less visible scarring, it's better to do it immediately, says Dr Sng. "What's more, it's completely safe and will not interfere with any cancer treatment such as chemotherapy or radiation that you may have to undergo."


Depending on the tumour, it may be possible to save the nipple, and then the breast skin can be filled with tissue from elsewhere in the body, such as the stomach.

"In the case of Angelina Jolie, of course, where the operation is done before cancer has set in, the whole external skin is preserved; it's only the inside that is removed and replaced."

(Note: Like Aira Flanagan, whom I interviewed for our August issue, Angelina underwent a pre-emptive double mastectomy and reconstruction; but it must be emphasised that both of these women have the rare deleterious BRCA-1 gene mutation that put them at exceptionally high risk of developing breast cancer.)

Delayed reconstruction can benefit a woman at any stage, however. One of Dr Sng's patients is a woman in her sixties who asked for a reconstruction 25 years after her mastectomy. Having lived without a breast for some time, she and others like her are generally very pleased with the result, and glad to fit properly into their clothes once more.

What's more, the loss of one or both breasts can affect relationships, and it's not necessarily due to a change of attitude of the part of the spouse or partner. If a woman's body image has suffered, she may not feel the same about her sexuality; a reconstruction can help put that to rights.

**COSTS:** basic implant surgery costs about \$15,000 all in, including post-surgery follow-ups. Reductions and breast-lifts tend to cost more. 



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