BEFORE & AFTER



TESTIMONIALS -

"The entire process was so simple, and the results are fantastic."

Khwanrudee Boofpachaat.

Duration Of Surgery

Hospitalization

Removal Of Stitches

Stay In Thailand 8-10 days



PRICE



Mentor (less than 400cc)

110,000 тнв

Mentor Xtra Gel (less than 400cc)

225,000 THB



Motiva (less than 400cc)

180,000 THB

Motiva Ergonomix (less than 400cc)

260,000 THB

DOCTOR'S CV _____



KITTISAK VICHACHAI, MD. Plastic Surgery

Board Certifications

Doctor of Medicine, 1989

Specialization

Breast Surgery

This brochure is intended to help you learn more about breast augmentation and the various options available to you. It is not intended to replace any discussions you have with your doctor.





CALL CENTER International Department

02-888-2888 ext. 414









BREAST ()

AUGMENTATION

What is Breast Augmentation?

Breast augmentation is typically performed by inserting a silicone implant beneath the breast to make it appear larger. It will enlarge small breasts that have always been small, but it can also be used to II out larger breasts. Breasts that have emptied, possibly as a result of pregnancy, are one example.

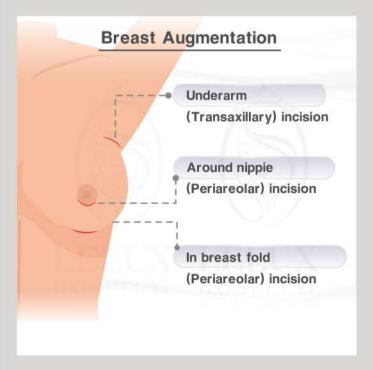
Breast augmentation will, to some extent, reshape the breasts. The procedure can also be used to correct unequally sized breasts.

Fat transfer, also known as lipomodelling, lipofilling, or fat grafting, is an alternative to implant-based enlargement. This procedure involves injecting fat from elsewhere on the body into the breast area. Fat transfer may be an appropriate method of augmentation for a few people, but it is not for everyone. This technique frequently requires more than one surgical episode. It can also be used in conjunction with augmentation. Patients who have breast augmentation are generally pleased with the results; however, you must have realistic expectations. You must be aware of what can and cannot be accomplished, as well as the limitations of surgery and the long-term consequences of having breast implants.

INCISIONS

Breast augmentation surgery is typically performed through one of three incision sites: around the nipple (periareolar), within the breast fold (inframammary), or under the arm (transaxillary).

- Periareolar This incision has the advantage of being the most hidden. It may, however, cause some interference with breastfeeding.
- Inframammary This incision is popular because it is hidden in the skin fold underneath the breast.
- Transaxillary This incision is less hidden, but it could be a good option for women who do not want scars on their breasts. Your doctor will go over each incision option with you in greater detail and assist you in making the best decision for you.



PLACEMENT

Breast implants can be placed directly behind the breast and on top of the chest wall muscle (known as subglandular placement), or behind the breast and the chest wall muscle (known as sub-muscular placement). Your surgeon will advise you on which is best for you.

Behind the breast

The insertion of implants behind the breast is thought to be the simplest of the available enlargement procedures, with the least likelihood of causing significant discomfort. This method is also useful for patients who have some drooping of the breasts.

Behind the muscle

Implants inserted behind the breast muscle provide more padding or coverage for the implant. This can be beneficial for slender patients and those with very little breast tissue because it reduces the chances of feeling or seeing the implant beneath the breast tissue.

Dual plane

Surgeons frequently combine these two approaches, inserting implants partially behind the breast and partially behind the muscle. Using this combined approach, surgeons attempt to provide patients with the benefits of both techniques. This is referred to as dual plane augmentation. Implants placed behind the muscle are likely to move when the muscle contracts. This is called animation, and it is perfectly normal.

What makes someone a good candidate for breast augmentation?

If your breasts are sagging, flattened, elongated, asymmetrical, or lack adequate cleavage or volume, you may be a good candidate for this surgery.