## Reconstruction Options: A Comparison Chart



PROCEDURE	TIMING	APPROXIMATE LENGTH OF SURGERY	WHO IS A GOOD CANDIDATE?	PROS	CONS
implant Alone	Immediate (only for small implant)	1 hour	Women with small to medium breasts with enough excess skin left over after mastectomy	No extra scars, fast placement, immediate final results, unlikely to delay radiation and chemotherapy	Doesn't have natural breast consistency; may have high position without natural droop; hard to customize size without initial use of expander; can dislodge, wrinkle, leak, encapsulate, cause pain; implant usually has to be replaced in 10 to 20 years; cosmetic outcome may be compromised by radiation
TISSUE EXPANDER FOLLOWED BY IMPLANT	Immediate or delayed	1-2 hours	Thin women who don't have enough extra fat or skin for autologous reconstruction	No extra scars, fast placement, unlikely to delay radiation and chemotherapy, an option for smokers or women with circulatory problems	Final results happen many months after mastectomy; tissue expander may need multiple injections; second surgery required if expander is replaced by permanent implant; doesn't have natural breast consistency or droop; implant can dislodge, wrinkle, leak, encapsulate, cause pain; implant usually has to be replaced in 10 to 20 years; cosmetic outcome may be compromised by radiation
TRAM FLAP	Immediate or delayed	3–8 hours, depending on surgical skills and whether blood supply remains intact or needs to be reattached with microsurgery	Women with enough extra skin and fat in belly; non-smokers who don't plan on getting pregnant	Feels like a natural breast; get tummy tuck as a side benefit; most breast sizes can be recreated	Extra scars; longer surgery and anesthesia; longer recovery; delays radiation and chemotherapy; can cause fat necrosis, hernia, persistent breast and belly pain, and abdominal weakness; can be done only once; not for smokers, women with a history of diabetes, women with circulatory problems, or women who want to become pregnant
DIEP FLAP	Immediate or delayed	5–8 hours	Same as TRAM Flap	Same as TRAM Flap	Same as TRAM Flap
SIEA FLAP	Immediate or delayed	5–8 hours	Same as TRAM Flap	Same as TRAM Flap	Same as TRAM Flap

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PROCEDURE	TIMING	APPROXIMATE LENGTH OF SURGERY	WHO IS A GOOD CANDIDATE?	PROS	CONS
GAP FLAP	Immediate or delayed	9–12 hours	Women with enough extra skin on buttocks and hips; non-smokers with no history of diabetes	Feels like a natural breast; most breast sizes can be recreated; can be done more than once; good choice for women who want to become pregnant or have had abdominal surgery already	Long operation with risk of more complications; higher risk of tissue breakdown; can be done only by a plastic surgeon skilled in microsurgery techniques; can cause fat necrosis; could delay radiation and chemotherapy; usually causes some pain and discomfort while sitting
PAP FLAP	Immediate or delayed	3-5 hours	Women with small to medium breasts	Feels like a natural breast; incisions are easily concealed; good choice for women who want to become pregnant or have had abdominal surgery already	Relatively new procedure so some surgeons may not have experience with it; thigh skin texture may be different from chest skin; long operation with more possible complications; higher risk of tissue breakdown; can be done only by plastic surgeon skilled in microsurgery techniques; could delay radiation and chemotherapy; pain and discomfort in pelvic area
TUG FLAP	Immediate or delayed	5-8 hours	Same as PAP Flap	Same as PAP Flap	Same as PAP Flap
LATISSIMUS DORSI FLAP	Immediate or delayed	3–6 hours	Women with small to medium breasts	Simpler operation than TRAM flap; feels like a natural breast; good choice for women who want to become pregnant or have had abdominal surgery already	Recovery takes longer than implant surgery (but less time than TRAM flap surgery); can cause fat necrosis; may cause discomfort and limit vigorous back and shoulder activity; can be done only once; could delay radiation and chemotherapy