



THE Brazilian bOOB Job

DR VERNON CHING reports on a procedure called “The Brazilian Boob Job” - a method of performing breast augmentation that seems to have taken Australia by storm...

In 2013, almost 300,000 women and teenagers underwent surgery to have their breasts enlarged with silicone or saline implants - and almost 100,000 breast cancer patients had reconstruction after mastectomy, often with implants. The popularity of breast augmentation has tripled since 1997, when there were just over 101,000 of these procedures. From these stats, it's easy to see why breast augmentation is still regarded as the most sought after cosmetic surgery procedure to date.

Since more and more women are visiting their plastic surgeons to invest in their chests, it's vitally important that any patient considering breast augmentation should be fully informed about the safety of the surgical procedure, the choice of implants available and the correct location for their placement. When it comes to implant choice, there are two options available to the discerning patient - these being saline and

silicone (although majority of patients in South Africa opt for the silicone counterpart).

However, there is also another silicone breast implant on the market which many women are going for. This particular implant has a Polyurethane coating, and is sometimes referred to as the “furry Brazilian” or “fuzzy implant” (mainly because the implant surface has a textured coating which is “foamy or furry”, and are produced in Brazil). This implant has been used in cases of intractable capsular contracture formation, as well as reconstruction cases in an attempt to reduce further risk of capsular contracture.

The Furry Logic Behind the Brazilian Boob Job

It is claimed that by using the Brazilian manufactured implants, which is combined with a gentler, less traumatic manner of inserting the implants - patients can be discharged on

the same day following surgery. They are also able to resume most normal activities the following day. Other than the shortened downtime, the major advantage of these implants (according to clinical data published), is that the unique covering of these cohesive gel filled implants decreases the risk of capsular contracture (scar tissue that can form around breast implants) - to less than that of the more commonly used textured or smooth silicon shelled implants.

Polyurethane coated implants are not new and have been used worldwide for many years. In the 1980's, there were fears that there was a risk of breast cancer occurring from the breakdown products of the polyurethane foam (especially 2,4 toluenediamine [TDA]).

This has since been disproved by many studies, including reports from the Food and Drug Administration (FDA) which stated that polyurethane foam is safe - and that the concen-

tration of TDA in the urine of patients with polyurethane-covered implants is minimal. It also concluded that no statistical difference in TDA concentration was found between patients with polyurethane-covered implants and a control group.

The FDA also reported that the lifetime risk of the polyurethane implants inducing cancer in women was about 1 in 1,000,000. Because the risk was so low, the FDA did not recommend explanation of these devices. Bristol-Meyers Squibb, the manufacturer of the polyurethane foam-covered implants used in the United States, voluntarily withdrew the product in 1991, by which time it had been implanted in 110,000 American women. Since so many American women have polyurethane implants (and because they remain popular outside the United States), continued monitoring of their long-term safety and effectiveness is mandatory.

In 2007, Vasquez and Pellon reported their experience with 1,257 surgically treated patients, and concluded that the advances in the quality of implants (vulcanized instead of adhesive and a more cohesive gel) contributed to even better outcomes with these implants. It is thought that the polyurethane layer has a “Velcro Effect” (which stops the implants from sagging) and a “Lattice Effect” (which stops them from going hard).

It must be noted that although polyurethane coated implants are available in more than 75 countries worldwide, they do not have FDA approval - and as such are not available in the USA.

'Flash Recovery'

The concept of the “Flash Recovery Breast Augmentation” (where the patient is discharged on the day of procedure and returns to normal activities the following day), is not new and was first advocated more than

10 years ago. Essentially, the technique involves minimal tissue trauma, minimal tissue stretching and the protection of pain sensitive structures (such as the lining of the ribs). By using meticulous surgical technique to dissect out the implant pocket - and paying special attention not to rip or tear tissue - resulted in minimal discomfort and an ultra-short recovery time. The recovery is also much easier as there is no bruising, or a need for tight bras or bandages after the operation.


Patients are given instructions as to what exercises need to be done post operatively, and they are generally able to go out to the next day and return to work after the weekend. High impact exercises such as jogging needs to be avoided for a longer period of time. This technique is of great use for those who cannot take time off work, and for those who have been frightened by the thought of postoperative pain.

Although the thought of a relatively pain free breast augmentation combined with an implant that has less likelihood of developing complications later is appealing, many other factors need to be considered before expecting this result.

The Pros & Cons


Due to the polyurethane coating on these implants, they are more difficult to use and require greater surgical precision, more careful planning and more acute clinical judgement. Once positioned, they will stick in place so there is little room for error.

The Brazilian Breast Augmentation



It is claimed that by using the Brazilian manufactured implants, which is combined with a gentler, less traumatic manner of inserting the implants - patients can be discharged on the same day following surgery

is yet another variation on one of the differing ways in which breast enlargement can be performed. More importantly, each patient is different and their breast augmentation experience needs to be tailored specifically to their unique circumstance with respect to breast width, height, volume, symmetry, shape, pain threshold and new breast size.

There needs to be a perfect fit of implant make and type to the patient's breast size and shape. In the same way that one would not buy a pair of Jimmy Choo's or Manolo Blahnik shoes one size too large - let your plastic surgeon assist you to make the right choice with regard to size, shape, implant type, make and operation technique. 



Dr Vernon Ching
MBBCh (Wits)
FCS (SA)