

## Sugar & Spice

Monica and Gabrielle have been called the "Dynamic Duo." Every Halloween they dress up and patients tend to ask every year what their choice in costume will be. Last year they decided to be a duo that most may recognize: a devil and an angel. Many may agree that there are devilish thoughts even in the most angelic minds ;).



## Halloween Bark



Our patient coordinator Monica decided to get into the Halloween spirit and make some white chocolate bark. It is such a quick and easy treat to make. Monica took pretzel sticks, candy corn, broken Oreos, and Butterfinger pieces and poured white chocolate almond bark over it and then topped it with festive sprinkles. This Halloween you can give all treats and no tricks with this simple bark!



# Talking Shape

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## Doc Talk: College: Then & Now

by Bahram Ghaderi, MD



Our oldest daughter went off to college last month, and it seems just like yesterday she walked out the door to go to preschool. It does fly by very fast. I never believed that saying until now. I am sure my parents felt the same way when I moved out in 1986. So, if I do the math right, that makes it 31 years ago. That was painful even to write. I think I got another wrinkle from squinting as I did the math.

Many things have changed since then about going off to college. We just finished FaceTiming with her and could hear and SEE her! Thirty-one years ago, that was not even possible unless you ended up on the evening news somehow. I almost did one time, but that is for another article on another day - don't worry it was not for anything bad. It is easy

to forget that my parents had to adjust as well. Once I moved out, they did not see me unless I came home. My mom would always tell me that she missed seeing me and now I finally understand what she meant.

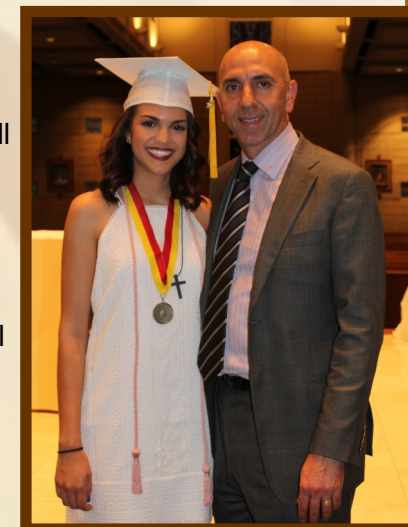
I did get in the habit of calling every week, but of course, I had to use a landline. My roommate and I shared one landline and one phone, and he used to talk to his girlfriend for hours, even though he had just seen her all day! We didn't get along too well. I am sure many of you remember going through the phone bill and splitting up the cost including taxes. We moved our daughter in, and there was not a phone to be found hanging on her walls. Now everyone has their cell phones, and there is no battle over who uses the phone more. I even texted my daughter this past week just to say hi. Back in 1986, the only way we shared written communication was to write a letter. Don't get me wrong, it was nice to get letters sometimes, but texting is so much faster.

Computers were just getting going back then too. I remember using a Commodore 64 computer to type my very first college paper and saving it on my floppy disk. The cloud was something that literally only existed in the sky. The printers had dot matrix and spools of paper that were perforated, and you had to tear off the sides. Of course, this all took place in a computer lab. It was unheard of to have any of this in your dorm room. Now my daughter has a laptop that is much better than that old clunky desktop and a laser printer that is way faster than any printer I ever used.

I suppose each generation improves and technology has certainly changed immensely in the last 30 years. Sorry - 31 years to be exact. I lined up my college applications in my typewriter with a bottle of Whit-Out at my side. I may or may not have been the recipient of an eye roll when I suggested she call schools and ask them to send her an application. I wasn't aware at first that calling was so "old school," because, duh, it is all online. She did all her applications on the computer with just keystrokes and clicks of the mouse.

One thing remains the same, however. We all grow up at some point and become adults. I am having fun watching her go through the process. Sometimes I laugh at the little mistakes that she makes because I know she will learn and not repeat the same mistake twice! She has made us extremely proud, and that is something technology cannot take credit for. Even with FaceTime, seeing her face to face in person is still the best! My mom was right (again).

Please feel free to share you're going off to college experience or when you first moved out on your own. I am sure some of you have very colorful stories.



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# Update on Breast Reconstruction

Breast reconstruction continues to evolve and some techniques remain as standards while others fade as not as good as expected. The most important advances in the last decade have been the use of acellular dermal matrices (ADM) and nipple sparing mastectomies. The results have improved immensely due to those two factors. Not everyone is a candidate for nipple sparing mastectomy but ADM is used in almost all cases of implant based reconstruction by most surgeons.

For many decades implants have been placed under the muscle for many reasons. The skin flaps that are left after a mastectomy are very thin and the muscle provides added thickness to help reduce implant visibility. In fact, for breast augmentation patients the preferred location for implants is below the muscle. Placing the implant below the muscle also helps with mammogram accuracy in augmentation patients. In breast cancer patients, surveillance for possible recurrence is also more accurate when implants are placed under the muscle since most recurrences occur and are found above the muscle. Capsular contracture rates have also been shown to be much lower under the pectoralis muscle. Of course, like most procedures, there is a downside as well. In the immediate recovery period, lifting the muscle to place the implant under it causes more discomfort. However, that only lasts in the short term during the healing process. Long term having implants under the muscle leads to what is described as animation deformity. It is not a medical condition and is definitely not pathologic. Since the implant is below the muscle, it moves as you flex your pectoralis muscle. In some patients it is more visible and more uncomfortable than others.

Recently there have been reports of placing the implants above the muscle. It is not a new concept by any means. It has been done in the past but now the implant is wrapped in ADM. To put it in perspective, when placing the implant above the muscle about 4 times the amount of ADM is used versus placing the implant under the muscle. Therefore, it is more expensive. There are only short term studies so far. The reported benefits are less discomfort during the immediate recovery period and avoidance of animation deformity.

There are some disadvantages as well such as increased implant visibility and palpability, higher seroma rates (fluid collection under the skin/in the mastectomy pocket), and less ability to surveillance the remaining tissue for any possible recurrence as the implant lies above the muscle. Patients must be chosen carefully for this technique as not everyone is a good candidate. Long-term outcomes are yet to be reported and is an area that requires further research. Like any new concept, there is initial excitement that it may be the next best thing to sliced bread. However, the long term risks vs. benefits will determine whether it will become the mainstay of treatment protocol or fade away. As always, please call or email with any questions.

## in office fat transfer without liposuction

Renuva® is a new product that's a quick and simple fix to certain small imperfections that have always bothered you. Renuva® is an allograft adipose matrix, meaning it is fat without having to have liposuction to get it. It is a safe injectable that can be done in the office.

Renuva® is ideal for small aesthetic defects such as cellulite dimples, facial lines, hand rejuvenation, and/or other small areas of concern. Contact our

office for more information about this great new product or to schedule a consultation to meet with Dr. Ghaderi.



## MUM TIPS



Fall is a great time to purchase chrysanthemums (mums) to brighten up a front porch, garden, or planter. They are super easy to take care of and come in great fall colors. Here are some tips on taking care of your mums:

- Choose a spot that gets at least six hours of sun a day. Plants that don't get enough sunlight will be tall and leggy and produce fewer, smaller flowers.
- Water newly planted mums thoroughly, and never let them wilt. After they are established, give mums about an inch of water per week.
- The key to those full, rounded domes of blooms that you associate with mums is pinching to create more branching and keep plants compact.



Source://www.bhg.com/gardening/flowers/perennials/all-about-mums/

# Check Your

October is breast cancer awareness month. As the staff of St. Charles Plastic Surgery, we witness first hand the struggles our patients encounter while fighting breast cancer. Our own lives are touched by their courage, strength and determination.

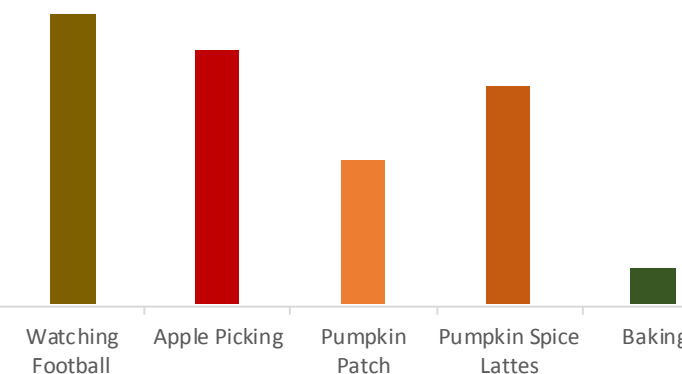


We ask that you schedule your annual mammogram appointment and check your "booo-bies" to promote early detection and encourage other women in your lives to do the same. Check your local hospital for convenient mammogram screenings.

# Booo-bies



Favorite Fall Activity



The weather gets cooler, leaves change colors, and pumpkin spice floods the grocery stores. In the Midwest, the only time of year these things happen is when fall arrives. With the changing of the seasons comes a ton of activities to do. At St. Charles Plastic Surgery, we value the opinions of our patients, friends, and family. We went to Facebook to ask our followers what they like to do when autumn comes around. The results are posted to the left. It seems like we have many football fans (Dr. Ghaderi being one of them). If you have not already, follow our Facebook page—Dr. Bahram Ghaderi. There are great articles as well as fun things about the office that are posted weekly.