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Redefining the Axillary Aesthetic: Surgical Management of Axillary Tissue Hypertrophy

Background: Axillary tissue hypertrophy consists of ectopic breast tissue and occurs in up to six percent of women. Women complain of pain, interference with activity, and dissatisfaction with appearance. While it is recommended that accessory breast tissue be removed via surgical excision, there is lack of consensus on management of axillary tissue hypertrophy. In this study, the authors present a simple and effective method to treat axillary tissue hypertrophy and contour the axilla.

Methods: A review of all patients (n = 16) who presented with accessory breast tissue hypertrophy between December 2019 and August 2021 was conducted. All patients underwent a technique that included direct crescentic dermato-lipectomy and glandular excision with axillary crease obliteration. Tissue was sent for histological analysis after removal. During a six month follow-up period, all patient outcomes were recorded.

Results: The authors treated 16 women with mean age of 36 years (range, 17 to 53 years) and mean BMI of 27.8 (range, 21.95 to 39.44 kg/m2). Histologically, all specimens contained benign breast and adipose tissue. Only two of sixteen patients required scar revisionary procedures. There was one case of superficial surgical site infection that improved with oral antibiotics. Axillary cording was found in two patients and managed with physical therapy.

Conclusion: Detailed is the optimal technique and surgical management approach that can be used to treat both adipose and fibroglandular axillary tissue hypertrophy simultaneously while providing a favorable axillary aesthetic.