INTRODUCTION: In 2014, a population analysis of the ‘perfect breast’ identified that an upper-to-lower pole ratio of 45:55 was deemed the most attractive of four Caucasian women’s breast proportions, as ranked by 1,315 members of the public. However, no other studies to date have confirmed these findings; furthermore, we do not know to what extent this may extend to women of other ethnicities. The aim of this study is to analyze preferred breast proportions in a larger, more ethnically-diverse panel of women, to inform the definition of an aesthetic ideal breast and aid surgical planning.

METHODS: In January 2017, a survey was distributed via a Crowdsourcing platform to members of the general population, who were asked to rank the attractiveness of images of fifteen women’s breasts (three Caucasian, three Black, three South Asian, three East Asian and three Hispanic). The right breast was changed into four different upper-to-lower pole ratios (35:65, 45:55, 55:45 and 55:45, as per previous study), creating one panel. Photographs were standardized (angle, background, left breast obscured) and panels displayed in random sequence within the survey. Respondent demographics were also collected.

RESULTS: There were 407 respondents. The majority of respondents were male (63.1%) and Caucasian (48.9%), with a mean age of 34.7 years. The majority were from North America (56.3%), followed by Asia (34.6%). Overall, the majority of respondents (33.9%) expressed preference for an upper-to-lower pole ratio of 50:50; this was followed by 55:45 (26.4%), 45:55 (24.9%) and 35:55 (14.8%). When subcategorized by ethnicity of women in the panel, the preference for 50:50 persisted in the South Asian and Black panels; but was 55:45 in the Caucasian and Hispanic panels, 45:55 in the East Asian panel.

CONCLUSION: These results do not support previous literature suggesting a preference for 45:55 breast proportions; the next most popular choice in the previous study was 50:50, which our results highlight as being overall preference in the present study cohort. Surgical planning should maintain a flexible approach when considering aesthetic ideals.

Reference Citations:
1. Mallucci P, Branford O. Population Analysis of the Perfect Breast: A Morphometric Analysis. Plast Reconstr Surg. 2014;134:436–47.
measurement, levator plication advancement was performed on the patient. During levator plication advancement, if there was only 1 stitch, point of suture was fixed at the midline, and additional sutures were done symmetrically. Same measurement procedure done prior to the surgery was repeated after a while reduced swelling. Patients were grouped according to the number of fixation, then, the difference in mean length at each angle among the groups was examined.

RESULTS: From May 2012 to Jan 2017, 26 patient cases underwent the operation. The patients were excluded due to complication or inaccurate measurements taken before and after the surgery. 18 cases of plication surgery were performed on the left eye and 22 on the right eye, and the number of fixation was between 1 and 3. The mean length of plication for the right eye was 7.58mm and 6.70mm for the left. When 3 fixations were done, compared to 1 or 2, the vertical length of the eye increased at angles between 60 and 120 degrees on the right eye (p=0.026 and p=0.041, respectively).

CONCLUSION: In conclusion, increase in the count of fixation during levator plication advancement seems to benefit functionally and aesthetically. It did not have statistically significant difference for the left eye, which may be due to shorter mean length of plication. The limitation of our study is that the difference in plication length at each fixation was not considered. Further study should take into consideration not only the count of fixation but also the difference in fixation length.

The Prevalence of Psychiatric Disorders Among Elective Plastic Surgery Procedure Patients

Presenter: Benjamin Jang, BS
Co-Author: Dhaval Bhavsar, MD
Affiliation: University of Kansas School of Medicine, Kansas City, KS

INTRODUCTION: Psychiatric disorders are one of the predictors of poor outcomes in cosmetic plastic surgery patients. 1 A U.S. study in 1960 showed that 72.4% of 98 cosmetic plastic surgery patients had a psychiatric disorder. 2 We hypothesize that the prevalence of psychiatric disorders will be statistically significant among patients seeking elective plastic surgery in comparison to general U.S. population. This study provides an updated view of the 1960 literature by having a larger sample size, inclusion of elective plastic surgery procedures, and comparison of results to national data.

METHODS: We performed an IRB approved retrospective review of 1000 adult patients seeking an elective plastic surgery procedure at The University of Kansas Medical Center Plastic Surgery Department from 2011 to 2016. The data obtained from charts included psychiatric history, medications, and plastic surgery procedure. The national prevalence data used for comparison came from a study in 2005. 3 We used a Chi-squared test to analyze our results.

RESULTS: From 1000 patients seeking elective plastic surgery procedure, 441 (44.1%) of the patients have a history of psychiatric disorder(s). The predominant psychiatric disorders are major depressive disorder (n=223, 50.6%) and generalized anxiety disorder (n=145, 32.9%) with some of these diagnoses being co-morbid. From the 1000 elective plastic surgery procedures, 803 were classified as cosmetic. The cosmetic plastic surgery procedure patients had similar proportion of patients with psychiatric disorders (n=375, 46.7%). The national data from 2005 states that 26.2% of 9282 individuals in U.S. have some psychiatric disorder. 3 Chi-squared test analysis shows that the prevalence among elective and cosmetic plastic surgery procedure patients is statistically significant (P < 0.0001) compared to national data.

CONCLUSION: Our study illustrates that psychiatric disorders are prevalent in patients seeking an elective plastic surgery procedure at our institution. Anxiety and depression are the most common diagnoses and this is possibly due to it being the most common psychiatric disorders in U.S. population. 3 In comparison to the 1960 study, our results show that the prevalence of patients with psychiatric disorders seeking elective plastic surgery procedures decreased. This could be due to undocumented psychiatric history, underdiagnoses of patients with a possible psychiatric condition, or changing psychiatric diagnostic criteria over time. Our results highlight the importance of psychiatric history review prior to elective plastic surgery procedure.