**May/June 2014 News Release for Dr. Cara Downey**

TITLE: Breast Reconstruction Surgeon Dr. Cara Downey Makes Cancer Patients Whole Again

Description: Houston Plastic Surgeon and Breast Reconstruction Specialist, Dr. Cara Downey helps breast cancer patients physically, mentally and emotionally as an educator and advocate for the success of her patients.

Many women facing breast cancer surgery are extremely concerned about their appearance afterwards. Fortunately these days, with extensive education from their doctors and many other resources they have numerous options for breast reconstruction directly after the cancer removal or at a later date. Dr. Downey works with her patients as well as their cancer surgeon to plan ahead for the most optimal and appealing outcome.

There are 3 main categories of Breast Reconstruction: Implants, Tissue Based Reconstruction, and a Combination of Implants & Tissue.

**Implant-Based Breast Reconstruction**

When implants are used, often tissue expanders are placed at the time or following mastectomy to expand the skin envelope to the desired size and shape. Expansion can be easily performed in the office setting over a period of time determined by the patient’s schedule and comfort. A second procedure is then done to replace the temporary tissue expanders with the permanent implants. Implants may be contraindicated when radiation is required for cancer therapy.

**Autologous Breast Reconstruction (DIEP, SIEA, TUG, SGAP)**

Autologous reconstruction involves using the patient’s own tissue to replace the breast. Tissue can be transferred from a nearby area or microsurgical techniques can be employed to transfer greater distances. The most common local transfer is the muscle and overlying skin of the latissimus dorsi. Many times this flap is used in combination with an implant (i.e. if radiation has precluded use of implant alone).

Free Tissue transfer and microsurgery can be used for transfer of excess abdominal tissue (diep inferior epigastric perforator flap –DIEP or superficial inferior epigastric perforator flap –SIEA), inner thigh (transverse upper gracilis flap – TUG) or buttock tissue (superior gluteal artery perforator flap – SGAP). Of these, the most common site is the lower abdomen, as patients tend to have more tissue in this area. For those that do not have enough abdominal tissue, buttock or inner thigh tissue can be substituted for modest sized breast.

As a plastic surgeon and breast reconstruction expert, as well as having helped hundreds of patients already, Dr. Cara Downey understands the importance of helping women to feel and look “normal” after their cancer surgery. She recognizes the direct connection between one’s self esteem and self confidence and their need to feel great about how they look. One of Dr. Downey’s primary goals beyond the successful surgery procedure itself is to help restore her patient’s physical appearance to as normal and aesthetically pleasing as possible.

For further information or to contact Dr. Downey’s Office,
Call **(713) 979-0526 or Visit the Website at** <http://www.houstonplasticsurgery.pro/>