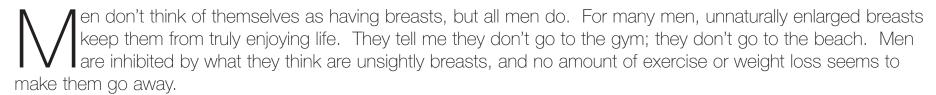
HARA Fixable Problem

Most Men Don't Want To Discuss

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The great news is we can successfully address excessive male breasts (called gynecomastia) with surgery. In my experience, men who have the procedure have little downtime and over-the-top satisfaction.

First, why do some men have the problem?

Whether a man's breasts are flat to the chest or enlarged like women's breasts can depend on several factors, or simply, genetics.

Some men are born with the tendency for larger breasts; others acquire the trait.

Having larger male breasts often has to do with a hormonal imbalance, which can result from medications or lifestyle. For example, commonly prescribed medications, such as cimetidine for heartburn and ulcers, digitalis for heart failure, diazepam (Valium), and the cholesterol-lowering atorvastatin, known as Lipitor, can cause gynecomastia.

Other gynecomastia culprits: frequent use of body-building steroids, marijuana or alcohol. Weight loss

can leave men leaner everywhere but the breasts. The condition can also result from more serious health issues, such as malnutrition, cirrhosis of the liver, overactive thyroid, breast or testicular cancer.

Understanding the cause is an important step in treating the condition. We have to rule out the more dangerous underlying conditions, including male breast cancer, *before* addressing the cosmetic concern.

Unfortunately, correcting the underlying problem doesn't usually undo the cosmetic problem of women-like breasts. Abundant breast tissue lingers even after a man stops using body-enhancing steroids, for example.

Solving gynecomastia

There are two things we look for when treating gynecomastia: How much of the visible breast enlargement is due to fat and how much to underlying glandular tissue. In most men, we have to take out not only the excess fat but also the enlarged breast glands. These sit below the nipple and areola.

So, we address the fatty tissue by permanently liposculpting it away. Then, we make a small, arced incision just under each of the nipples, in the pigmented areola. We enter the breast through that incision and pull out the gland. The gland easily slides through the incision, which is masked by the pigmented area and hidden nicely after surgery.

The entire procedure is done with only a local anesthetic. Patients are awake and comfortable during the operation. They go home the same day and rest for a day or two (depending on how much tissue we remove). Men usually wear an elastic chest binder 24 hours a day the week following the procedure and part-time the week after that. Otherwise, most report little if any pain and minor discomfort.

This is one of the most gratifying procedures I do. Men, who are on a private emotional rollercoaster because they have enlarged breasts, emerge from the procedure as if we literally took a weight off their chest.

For more information about cosmetic solutions to restore a youthful appearance please visit http://www.milfordmd.com . You may also receive answers to any questions by calling 570-296-4000.