SEAM Virtual Mentor Experience: Exploring Gender Affirming Surgical Procedures

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Introduction
One of the gender affirming surgical chest procedures that is involved with gender reconstruction from female-to-male is the periareolar mastectomy. Even though there has been an increasing number of these surgeries performed overtime, there is still an absence of agreement and knowledge of the patient's anatomy before and even after the surgical procedure occurs. At the University of Minnesota, Plastic and Reconstructive Surgeons have observed that patients of theirs have encountered complications, scarring wise, post-surgical around the areola. There is a gap in the literature with no information about scarring of the areola after the surgery that helps distinguish what the scar could mean and the next steps going forward. The objective of this study is to see if laser therapy can assist in the reduction of scaring post-surgical chest procedure.

Methods
28 articles found by search approach on PubMed and Google Scholar using the words “top surgery” “transgender” “mastectomy” “outcomes” and “scarring”. Databases were also used to get plastic surgery journals including Annals of Plastic Surgery, etc.

Results
Out of the 28 articles, 8 mentioned the scarring revision and dermatology of it, and out of those 8, 6 of the articles discussed scarring after top surgery that had 2.2%-17.5% of periareolar patients having scar revisions. 20 of the articles presented findings of mastectomy top surgery. There were 3-4 systematic reviews that mentioned dermatology relating to scarring of top surgery.

Conclusion
There are variety of ways surgeons can go about performing female-to-male top surgery depending on the evaluation of a person's skin elasticity and skin excess in the chest area. This will help maximize satisfaction from the patient and minimize scarring revisions. Dermatologists can help provide the care for transgender patients after their procedure with lazer therapy. The technology over time has improved and widen the variety of treatments for patients with scarring. With that comes limitations when deciding if combination treatment is better than individual treatments because there is a lack of control over the process. However, a greater recognition and studies dedicated to the categorization of scarring and help after surgery will give more satisfied outcomes.

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