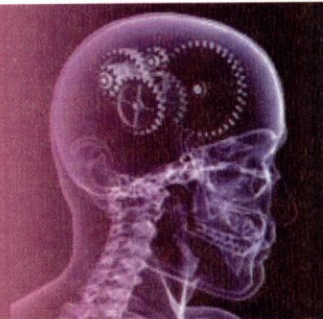
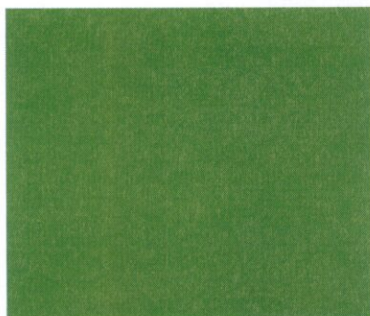


The Innovator



Who: Mr Adrian Richards
What: Inverted nipple correction
Why: Transforming lives



In this series of articles, *Cosmetic Surgery & Aesthetics Guide* tells the stories of the men and women who are pushing forward the boundaries of aesthetics. In this issue the spotlight is on Mr Adrian Richards and the inverted nipple correction procedure he has developed

We often talk glibly about life changing surgery, but the simple, incredibly effective procedure that Mr Adrian Richards of the Aurora Clinics has developed to deal with inverted nipples really does just that. In just thirty minutes, this man can change your life.

Can you explain how you first came into contact with this condition?

I am a plastic surgeon and specialise in breast surgery of all types, which led me into contact with women suffering from inverted nipples.

Essentially one in ten women have some stage of inverted nipple so it's a lot more common than people think. But what we've discovered is that most women are incredibly conscious of this problem – they are a lot shyer than, say, women with a small bust.

They don't like talking about it to friends and family; they are embarrassed about changing in public or in front of others which has impacted on their relationships; it has undermined their enjoyment of life, such as holidays with friends; it has even

What exactly are inverted nipples?

There are three grades of inverted nipples. The first is where the nipples can come out and stay out for a short amount of time, the second is where they can come out but go



affected their careers.

One patient of mine was a successful dancer but gave it up because she had to change in front of the other dancers. Many women fear that it makes them abnormal.

straight back in again and the third stage is where they never come out.

The position of the nipples is a balance between the milk ducts that go from the breast gland to the nipple and the muscles and

normally the ducts aren't too short and the nipple protrudes. In grade one cases, when you stimulate a muscle contraction – either through cold weather or if they are stimulated manually – the muscle can overcome the tight milk ducts for a short period of time but eventually the nipple retracts. In grade two, the muscle can just about overcome it but the nipple goes back in immediately and, in grade three, the ducts are just too short.

Generally with grade one cases, we suggest they try the Niplette suction device first. You place it on the area and it sucks out the nipple out to an everted position and that basically lengthens the ducts.

Over time this can correct grade one cases, but rarely works for grade two or three patients. To be honest, for the majority of our patients who have tried it, it hasn't worked and it has left them quite sore. The device is widely available at Boots and other chemists and it is worth a try, but if it doesn't work the best thing to do is to correct the problem with an operation.

What impact does this problem have on women's lives?

If you don't suffer from inverted nipples, I don't think you can really realise the impact it has on a woman's self confidence and how much this simple operation transforms their lives.

One patient said she married a man who she didn't love or respect because she knew he wouldn't judge her about her nipples. Another lady was 60 when she the procedure and afterwards said if she'd had the operation years ago then she would have lived her life very differently.



“ One in ten women have some stage of inverted nipple so it's a lot more common than people think ”

As it is not really talked about, the internet is often a good resource. I put a video of me doing the operation on YouTube and nearly 150,000 people have watched it in the last six months which I was shocked about. But even the internet isn't enough. Recently, I had one lady come to see me who is incredibly

successful in her career, but she was too embarrassed to even type the term into Google in case somebody saw her search history.

How did you come to develop the procedure?

Breast surgery is my speciality and there are lots of techniques

for nipple correction, but I have developed it into a very simple but effective procedure. It is all done under local anaesthetic, takes about half an hour and patients are awake and chatting to me throughout and they are left with just one small little stitch and instant results.

Last week I did a lady who wanted to see everything that was being done, which I was quite surprised about, as I wouldn't want to watch it, but she was just so happy to have it done.

In the operation, a small incision is made in the lower

outer border of the nipple and depending on the grade of inversion, the ducts leading to the nipple are then divided. Once released, the nipple is held in an everted position with an absorbable stitch which is placed internally and then is naturally melted away by the body. Following the procedure most people just experience mild discomfort, with most returning to work within one to two days.

The dressings are removed five to seven days following the procedure and once corrected the nipples are very unlikely to become inverted again.



A life-changing procedure

"It was something that had bothered me for an awfully long time. I always felt paranoid about getting changed in the changing room at the gym or in front of boyfriends. People had never made comments; it was just my own paranoia that my nipples looked weird and I just wanted to be able to take my top off without being worried about it"

Claudia

"I had lost my confidence since my teenage years and it took me twenty years to do something about it. I have two children and I wasn't able to breast feed them which I found difficult to deal with. I only recently found out that there was a solution by searching on the internet"

Jane

"My problem really started after breast feeding my children. I was able to breast feed my first child but it got worse after that and I wasn't able to breast feed my second child because the nipples were inverted. I became uncomfortable in my own body and didn't like wearing nice clothes. I thought people were looking at my breasts as opposed to looking at me, so I used to cover up by wearing padded bras and loose-fitting clothes"

Dawn

Are there any downsides to the procedure?

The good things about the procedure are that it is reliable, with minimal scarring and effective. The only downside is breast feeding. If you are planning to breast feed in future then you just won't be able to because I divide the milk duct. There are a lot of other techniques that are based on stretching the ducts in the hope that people can breast feed in the future, but the milk ducts aren't that stretchy so these techniques often fail.

But you also need to take onboard that breast feeding with inverted nipples is not straightforward anyway. Grade one women normally can, grade two is about fifty-fifty, but with grade three it is very unlikely.

So women who are still planning to have children have to make a hard decision. This is particularly tough for very young girls of about 17 and 18. They want things done immediately and they are not thinking about ten years down the line and obviously if they have the operation then they will have a very different experience of their formative years. But you are giving up the chance of breast feeding and there is a lot of pressure on women now to breast feed.

CS&AG

Treatment: Inverted nipple correction

Price:

Time taken:

Anaesthetic type:

Hospital stay:

Available from: For more information on Mr Adrian Richards and the full list of procedures he performs, visit www.aurora-clinics.co.uk or call 0800 328 5743