

## The Study of Wound Scar After Breast Reconstruction with DIEP Flap

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### Abstract

The deep inferior epigastric perforator (DIEP) flap has become the golden standard for breast reconstruction. The disadvantage, however, is the long abdominal scar. There are scattered reports that patients themselves are not satisfied with the scarring of the DIEP flap. Other factors that reduce patient satisfaction include wound complications such as hyperpigmentation, hypertrophic scars, and keloids.

In this study, we evaluated the presence of hyperpigmentation, hypertrophic scars, and keloids in the abdominal scar at the skin valve extraction site in 71 of 101 patients who underwent breast reconstruction using DIEP flap from January 2015 to March 2022, at least six months after surgery.

32 of the 71 patients showed hyperpigmentation and 21 had hypertrophic scars. There were no cases of keloids. There were no significant differences between the groups.

The DIEP flap is a useful skin flap for breast reconstruction, but abdominal scarring is a shortcoming. Considering patient characteristics and postoperative care, surgery should be devised so that scars are less noticeable.