

Supplemental Digital Content 1

Authors, years	System of classification	Operative procedures T.B. Type I	Operative procedures T.B. Type II	Operative procedures T.B. Type III	Operative procedures T.B. Type IV	Type of approach: 1 vs 2 stage	Unilateral rate %	Follow-up time
Von Heimburg D. 1996 (4)	sec. Von Heimburg	Augmentation, contralateral Reduction Mammoplasty	Augmentation, Spreading, Augmentation + spreading, Red. Mammoplasty, Maillard, Flap	Augmentation, Spreading, Maillard, Augmentation + spreading, Flap, Expansion	Augmentation, Spreading, Augmentation + spreading, Flap, Expansion	1 stage and 2 stage	30% (12 / 40 patient)	Mean 6.1 years (minimum of 2 years and a maximum of 17 years)
Muti E. 1996 (15)	sec. Muti Type 1-3	Laterally pedicled Rectangular glandular flap (similar H. Branck Flap) is transposed from the upper pole to the lower pole + radial incision hypoderm of lower pole sec. Rees-Aston + round Prostheses	Periareolar deepithelialization + vertical rhomboid deepithelialization in the central part of the lower pole from the nipple to the existing sulcus + triangular flap pedicled from lower pole + round Prostheses prepectoral plane (same skin incision flap)	Periareolar deepithelialization + Round block + caudally based quadrangular flap folded deeply towards new sulcus + Prostheses + through-trough stitches (new sulcus) + little vertical scar.		1 stage		5 years or more
Ribeiro L. 1998 (17)		Periareolar deepithelization Round block + inferior glandular flap bent over itself to fill up the inferior pole	Never prostheses only autologous tissue!			1 stage		Minimum of 8 months maximum of 2 years)

<p>Grolleau J-L 1999 (5)</p>	<p>Von Heimburg modified Type I-III</p>	<p>Periareolar incision +/- periareolar deepithelization + subcutaneous undermining of lower quadrants + replacing of inframammary fold + L-shaped scar + if necessary, Prostheses</p>	<p>When breast volume is adequate: Ribeiro's technique. When breast volume is inadequate: Puckette & Concannon's technique + retromuscular implant</p>	<p>Augmentation, Spreading, Maillard, Augmentation + spreading, Flap, Expansion</p>		<p>Type 1 and 2: 1-stage Type 3: often 2-stage</p>		
<p>Foustanos et al. 2006 (6)</p>	<p>sec. Von Heimburg</p>	<p>1 stage: periareolar incision + retropectoral anatomic tissue expander (500 mL) + Overexpansion in 3-6 months. 2 stages: same periareolar incision + or areolar reduction + exchanging Tissue expander for a round silicone gel implants + capsulotomy + when necessary inframammary fold + mastopexy or breast reduction.</p>	<p>1 stage: periareolar incision + retropectoral anatomic tissue expander (500 mL) + Overexpansion in 3-6 months. 2 stages: same periareolar incision + or areolar reduction + exchanging Tissue expander for a round silicone gel implants + capsulotomy + when necessary inframammary fold + mastopexy or breast reduction.</p>	<p>1 stage: periareolar incision + retropectoral anatomic tissue expander (500 mL) + Overexpansion in 3-6 months. 2 stages: same periareolar incision + or areolar reduction + exchanging Tissue expander for a round silicone gel implants + capsulotomy + when necessary inframammary fold + mastopexy or breast reduction.</p>	<p>1 stage: periareolar incision + retropectoral anatomic tissue expander (500 mL) + Overexpansion in 3-6 months. 2 stages: same periareolar incision + or areolar reduction + exchanging Tissue expander for a round silicone gel implants + capsulotomy + when necessary inframammary fold + mastopexy or breast reduction.</p>	<p>1 stage and 2 stage</p>	<p>25% (2/8)</p>	<p>Max 6 years</p>

<p>Pacifico MD and Kang NV (20)</p>	<p>Northwood Index (NI > 0,4)</p>	<p>0,4 < NI < 0,5 Mild deformity: Inferior inframammary incision + placement of sub-glandular implant + circumareolar deepithelization + undermining of surrounding skin circumferentially as round block (circumareolar mastopexy)</p>	<p>0,51 < NI < 0,6 Moderate deformity: idem</p>	<p>NI > 0,6 Severe deformities: idem</p>		<p>1 stage</p>		<p>3-56 months</p>
<p>Serra Renom JM 2011 (18)</p>	<p>sec. Grolleau</p>			<p>1 stage: periareolar access + modified Puckett's technique + anatomic prostheses. 2 stages: after six months, fat with serial infiltration of fat</p>		<p>2 stages</p>		<p>Mean 33, 54 months (14 – 57 months)</p>

<p>Claudio Silva-Vergara, C., Fontdevila, J., & Weshah O. 2018 (11)</p>	<p>sec. Grolleau</p>	<p>Mild deformity: infiltration with saline solution containing epinephrine and lipoaspiration with 3 mm cannulas at 40 kPa with a vacuum pump. Fat is centrifuged at 2000 rpm (400 G) for 2 min to obtain purified fat. Then it is injected through four punctures around the areola rim and one at the anterior axillary line. Volumes of fat infiltrated in each breast varied from 80 to 250 ml per procedure (average 210 ml).</p>	<p>Moderate deformity: idem</p>	<p>Severe deformity: idem</p>		<p>1 stage for mild deformity to 2 or 3 stages for moderate to severe deformities</p>		<p>Mean 29.7 months</p>
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