

## **Innovative Breast Reconstruction Option Equals More Natural Results, Less Recovery Time**

**By Wendy Gray**

While Konstantinos Lekkas was a surgical resident at Southern Illinois University, he learned a revolutionary procedure that would later transform the way many women recover after mastectomy. However, this procedure, called DIEP Flap, had not caught on throughout the surgical community.

Like its predecessor, TRAM, DIEP Flap involves removing fat and skin tissue from a woman's abdomen to reconstruct the breast. The most notable difference between the two procedures is that DIEP Flap does not involve the muscle, so a woman's abdominal strength remains intact, lessening recovery time. Hernias and bulges are often side effects of the older TRAM procedure, neither of which comes into play with DIEP Flap. The procedure's incision is low enough to be hidden by a swimsuit and the need for pain medication is drastically reduced as well. DIEP Flap may be better for the patient, but the surgery is more difficult for the doctor because it involves hand-sewing tiny two-millimeter vessels.



**Konstantinos Lekkas, MD**

"I had the ability to perform DIEP Flap, but it just wasn't being presented as an option at the time," says Dr. Lekkas of his 2005 arrival in Iowa. "Then a mastectomy patient who had done quite a bit of research came to me for a consultation. When she asked if there were any newer options, I told her about DIEP Flap."

That patient, Marlene Siegel, is a Waukegan business owner who could not afford to take six weeks off work. "Dr. Lekkas told me about this procedure that he'd done as a resident. I talked with my family members – many of whom are in medicine – and learned as much as I could about DIEP Flap. It didn't concern me that I would be the first woman to have the procedure done in Iowa – it's important to know what all of the options are and choose what's best. This was best for me."

Marlene's surgery was on a Wednesday; she was back working at her desk the following Monday. She may have been first to have the DIEP Flap procedure, but now Dr. Lekkas and his partner perform about two per month, and demand is increasing as word gets out. Helping spread that word is Marlene Siegel, who promptly acquired a personalized breast cancer awareness license plate emblazoned with DIEP 1 after the positive experience of her surgery.

Dr. Lekkas says that DIEP Flap is not ideal for every mastectomy patient. Health, body composition and lifestyle factors enter into the equation. "I need to meet patients and talk with them to determine if DIEP Flap is their best option," says Dr. Lekkas. "But the bottom line is, most women want to feel like themselves again after mastectomy. DIEP Flap can help them achieve that quicker and more naturally – and that's why it's so rewarding for us."

**Published in the *Iowa Clinic News***