



Richard R. Orr, Jr., M.D.

www.BodyByOrr.com

Dear Patient:

You may have heard recent media reports regarding breast implants and a rare form of cancer. The FDA recently updated information regarding this disease (Breast Implant Associated–Anaplastic Large Cell Lymphoma (BIA–ALCL). The American Society of Plastic Surgeons is working closely with the FDA in monitoring the disease.

BIA–ALCL is not a breast cancer, but a rare and treatable T–cell lymphoma that usually develops as a fluid swelling around breast implants.

The lifetime risk for this disease appears to be about 1 case for every 30,000 textured implants. This equates to a 0.003% risk. Approximately 85% of these cases seem to occur around Allergan textured implants. Thus far, there have been no confirmed cases of BIA–ALCL in women who have had only smooth surfaced breast implants.

The FDA is not recommending removal of textured implants. Rather, the FDA recommends, as do I, that **every woman conduct regular self-examination.** If you develop swelling or a lump in your breast, contact my office right away. I will comprehensively evaluate you and order the appropriate tests to determine if any treatment is indicated. **Women who develop BIA–ALCL can often be cured by simply removing the implant and the scar tissue surrounding it.** The majority of these tumors appear to be benign. Some patients may require additional treatment (such as chemotherapy), especially if not handled appropriately when discovered. Following removal, replacement with a smooth surfaced implant may be an option.

I put this letter together to inform you of the current understanding on this issue. I have been using almost exclusively textured implants for over 28 years, and I have not seen a single case of BIA–ALCL.

For additional information about BIA–ALCL, consult the American Society of Plastic Surgeons website at **www.plasticsurgery.org/ALCL**. Of course, I'm happy to answer your questions personally.

I greatly appreciate having you as one of my patients, and will continue to monitor these developments closely. I will be glad to keep you informed of any new developments regarding this issue.

Sincerely,

Richard R. Orr, Jr., MD, FACS