Letter to the Editor

Response to "Intra- and Inter-Shell Roughness Variability of Breast Implant Surfaces"

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We would like to thank the commenters¹ for the interest they expressed in our findings.² We note that although it is interesting to consider surface classification systems in light of breast implant-associated anaplastic large cell lymphoma (BIA-ALCL), it is important to recognize that to date there has been no clinical validation of these systems across the set of different types of textured implants grouped into the same texture categories. The etiology of BIA-ALCL remains to be proven (with considerable discussion and debate ongoing). In the absence of either a clear consensus understanding of etiology or a full clinical validation of such surface classification systems with longterm epidemiologic or clinical findings, it seems unwise to assume specific physical measurements will be reliably determinative or predictive of BIA-ALCL risk. Given the long time interval (average, 7-10 years) from implantation to onset of BIA-ALCL, it would seem a prudent choice for surgeons and their patients with concerns about BIA-ALCL to select an implant with a surface for which very substantial long-term clinical and epidemiologic data sets exist.

Disclosures

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