Breast implants: silicone cash cow

The use of silicone for breast augmentation began with Japanese prostitutes trying to suit the tastes of American soldiers and later grew into a vast American industry, a cash cow as some would have it. Until lately, 150,000 women had silicone implants each year, for cosmetic reasons (80%) or for cancer. Then the Food and Drug Administration became alarmed by reports of untoward reactions such as capsular contracture, rupture, and autoimmune or scleroderma-like illnesses, and in November it called for a “voluntary” 45-day moratorium, saying it could not guarantee the long-term safety of these implants.

In the maelstrom of diverse pronouncements that followed the feminists wanted women to have a choice but regretted their need for a certain stereotype of beauty that left them “implanted and ignorant.” “Glee fully misled for profit.” Consumerists noted that cosmetic surgery was the most rapidly growing specialty, “whose experimental subjects were 87% female” and deplored the full-page advertisements of a famous model selling breasts. They also blasted the profit hungry companies even though the largest group of shareholders were pension funds.

Cancer support groups said their studies showed that 85% of recipients were satisfied. 90% of people believed silicone implants should remain an option and 87% of mastectomy patients attributed their emotional recovery to having implants. Many patients also protested against the ban saying that saline devices were far less aesthetically pleasing but patients with complications sued or gave exhaustive interviews to the newspapers. The plastic surgeons were “surprised” upset “frustrated,” flooded with calls.”

Pointing out that no device could ever be 100% safe, they noted the less agreed that women should be fully informed of the risks of the procedure.

The contingency lawyers smelled blood and were seen circling. Some invested heavily in the business buying $750,000 to sue kits from advocacy groups, consolidating single cases into class action suits, confident that the women make credible witnesses and sympathetic victims. Several columnists thought the lawyers were destroying America’s competitiveness and spirit of innovation there being more lawyers in one single skyscraper than in the whole of Japan.

The free marketeers thought that government agencies should stay out of people’s business because they botch up everything they touch, also that their “experts” were biased and in conflict of interest being paid $350 hourly for giving evidence. But the newspapers had a field day hardly a week passing without sensational headlines and startling revelations.

And so the debate continued until April when the Food and Drug Administration ruled from up high. It would allow implants only as part of strictly controlled clinical studies, with protocols, certifications, consent forms, data collection and field inspectors to check compliance. They would be available to patients with cancer and to some 2000 women yearly for breast augmentation. “It’s all over for silicone breast implants,” said a prominent consumer advocate but others predicted that women would soon be flocking south of the border as the cash cow relocates to greener pastures in Mexico and the Caribbean—George Duna, attending physician, Cook County Hospital, Chicago.