



Considering skin tone when grading gynecomastia: a new grading system

Levando em conta o tom de pele na graduação da ginecomastia: um novo sistema de classificação

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Hello,

Gynecomastia is a commonly treated cosmetic problem with an average worldwide incidence of 32%–36%¹. On clinical examination, gynecomastia is graded depending on the amount of breast tissue and the looseness of the skin over the breast. Simon's grading is simple and used widely². However, one additional factor that we assess is the skin tone, which means that while skin excess is the loose skin on top of the breast tissue, skin tone is the inherent capacity of the skin to shrink and contract after the surgery. As per Simon's grading, gynecomastia is graded as follows:

- Grade 1: Minor breast enlargement with no excess skin
- Grade 2a: Moderate breast enlargement with no excess skin
- Grade 2b: Moderate breast enlargement with excess skin
- Grade 3: Marked breast enlargement with excess skin

While skin excess has a linear progression from grades 1 to 3, skin tone can be independent of it. Moreover, this often neglected factor can be the difference between a well-sculpted chest and an average result.

The revised grading we suggest is as follows:

- Grade IT: Small enlargement, no skin excess, and normal skin tone
- Grade 1L: Small enlargement, no skin excess, and poor skin tone (indicating laxity)
- Grade IIAT: Moderate enlargement, no skin excess, and normal skin tone
- Grade IIAL: Moderate enlargement, no skin excess, and poor skin tone
- Grade IIBT: Moderate enlargement, minimal skin excess, and normal skin tone
- Grade IIBL: Moderate enlargement, minimal skin excess, and poor skin tone
- Grade IIIT: Marked enlargement, a lot of excess skin, and normal skin tone
- Grade IIIL: Marked enlargement, a lot of excess skin, and poor skin tone

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This gives us a better picture and assessment of how well the skin is likely to shrink for the same grade of gynecomastia. For example, a man with grade 2a Simon's gynecomastia can have a very poor skin tone that may lead to an imperfect skin retraction even after a similar surgery as in another individual with the same grade of gynecomastia. Once the surgeon takes into account the skin tone, he may even predict the extent of skin sculpting that can be achieved after gynecomastia surgery. Moreover, the skin tone may be affected by various factors like smoking, diabetes, and poor general health. Using this revised grading not only predicts the surgical outcome in terms of the skin sculpting but also helps during follow-up and in comparing different patients with the same grade in a more accurate manner.

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