



SIENTRA SILICONE
GEL BREAST IMPLANTS

quick facts

about breast augmentation
and reconstruction

• see yourself in
sientra®

Sarita, Actual Sientra Patient

The sale and distribution of this device is restricted to users and/or user facilities that provide information to patients about the risks and benefits of this device in the form and manner specified in the approved labeling provided by Sientra, Inc.

WARNING:

- Breast implants are not considered lifetime devices. The longer people have them, the greater the chances are that they will develop complications, some of which will require more surgery.
- Breast implants have been associated with the development of a cancer of the immune system called breast implant-associated anaplastic large cell lymphoma (BIA-ALCL). This cancer occurs more commonly in patients with textured breast implants than smooth implants, although rates are not well defined. Some patients have died from BIA-ALCL.
- Patients receiving breast implants have reported a variety of systemic symptoms such as joint pain, muscle aches, confusion, chronic fatigue, autoimmune diseases and others. Individual patient risk for developing these symptoms has not been well established. Some patients report complete resolution of symptoms when the implants are removed without replacement.



about this brochure

This brochure is intended to provide you with a high level overview of the facts about breast implant surgery with Sientra's FDA-Approved Silicone Gel Breast Implants. This brochure is not intended to replace consultation with your surgeon. For a complete review of the benefits and risks of breast implant surgery, please read the appropriate Patient Educational Brochure, **Breast Augmentation with Sientra Silicone Gel Breast Implants** or **Breast Reconstruction with Sientra Silicone Gel Breast Implants**, available from your surgeon and posted on www.sientra.com. You may also contact Sientra directly at (888) 708-0808 for a copy of the brochure. In addition, a Patient Decision Checklist that highlights key information regarding risks of breast implant surgery is provided in Section 14 of each Patient Educational Brochure mentioned above and is also located at Sientra's "[Commitment to Safety](https://sientra.com/commitment-to-safety/)" webpage (<https://sientra.com/commitment-to-safety/>). It is recommended that you review this Checklist with your surgeon. The Checklist will help ensure that you have read and understood the information in the detailed Patient Educational brochure and in the Boxed Warning, and that you have been informed of the benefits and risks of breast implants. Your surgeon will also sign this Checklist indicating that s/he has reviewed all of the information in the Patient Educational brochure with you and addressed all of your questions. Make sure all of your questions have been answered and you understand the information in the brochure, before you sign the Patient Decision Checklist.

You should also be aware that there is a Boxed Warning for all breast implants. It is critical for you to understand these warnings. In addition to on the over page of this Quick Facts, the Boxed Warning is located in the Warnings section of this brochure. Additional information regarding the risks listed in the Boxed Warning and other risks are briefly discussed below and are discussed in detail in Section 4 of both Patient Educational Brochures: Breast Augmentation with Sientra Silicone Gel Breast Implants and Breast Reconstruction with Sientra Silicone Gel Breast Implants.

indications

Sientra’s Silicone Gel Breast Implants are indicated for:

- **Breast augmentation for women at least 22 years old.** Breast augmentation includes primary breast augmentation as well as revision surgery to correct or improve the result of primary breast augmentation surgery.
- **Breast reconstruction.** Breast reconstruction includes primary reconstruction to replace breast tissue that has been removed due to cancer or trauma or that has failed to develop properly due to a severe breast abnormality. Breast reconstruction also includes revision surgery to correct or improve the results of a primary breast reconstruction surgery.

RISKS ASSOCIATED with breast implants

Undergoing any type of surgery involves risks. There are a number of local complications (problems at or near the breast/surgical incision site) that may occur after your breast implant surgery.

COMPLICATIONS

Table 1 presents the complication rates reported in Sientra’s Clinical Study through 3 years.

TABLE 1 - COMPLICATION RATES REPORTED
THROUGH 3 YEARS

Complication	Primary Augmentation N=1,115 patients	Revision Augmentation N=362 patients	Primary Reconstruction N=229 patients	Revision Reconstruction N=82 patients
Key Complications				
Reoperation	12.6%	20.3%	34.9%	42.5%
Implant removal with replacement	6.0%	8.7%	19.1%	23.2%
Implant removal without replacement	1.2%	2.9%	7.0%	10.3%
Capsular Contracture (Baker Grade III/IV)	6.0%	5.2%	8.8%	6.8%

Key Complications (continued)					
Implant Rupture	MRI Cohort	2.5%	0%	2.8%	0%
	Non-MRI Cohort	0%	0.4%	0%	0%
Other Complications Occurring in 1% or more of Patients ^{1,2}					
Asymmetry		1.1%	1.8%	8.7%	7.1%
Breast mass/cyst/lump		0.3%	0%	1.0%	3.1%
Breast pain		0.8%	0.9%	2.6%	1.4%
Delayed wound healing		0.2%	0.6%	1.9%	0%
Hypertrophic/abnormal scarring		0.6%	0.7%	2.7%	3.1%
Implant extrusion		0.1%	0.6%	1.5%	0%
Implant malposition		1.2%	3.2%	3.0%	5.5%
Implant visibility		0.2%	0.6%	1.0%	0%
Infection		0.7%	1.2%	5.1%	1.2%
Nipple sensation changes		3.2%	1.4%	2.0%	0%
Other complications		0.6%	0.7%	1.1%	0%
Ptois		1.8%	0.7%	2.0%	0%
Redness		0.3%	0.7%	3.0%	0%
Seroma/fluid accumulation		0.6%	1.2%	2.4%	1.3%
Swelling		0.5%	0.7%	2.0%	0%
Wrinkling/rippling		0.5%	2.4%	1.1%	1.5%

1 The following complications were reported at a risk rate of less than 1% in all patient cohorts: bruising, hematoma, implant palpability, irritation, necrosis, skin rash, skin sensation changes and upper pole fullness.

2 The following complications were reported at a risk rate of 0% in all patient cohorts: capsule calcification, lymphadenopathy, lymphedema, nipple complications (not related to sensation) and pneumothorax.

IMPLANT REMOVAL

Breast implants may be removed (with or without replacement) in response to a complication or to improve the cosmetic result. In Sientra’s Clinical Study, through 3 years, the most common reason for implant removal in all four Study cohorts was patient request for an implant size or style change (ranging from 40% to 56% of all implant removals).

Figures 1 through 4 below present the reasons for implant removal in Sientra's Clinical Study through 3 years.

Figure 1. Reasons for Implant Removal through 3 Years
Primary Augmentation Cohort
(n=103 implants)

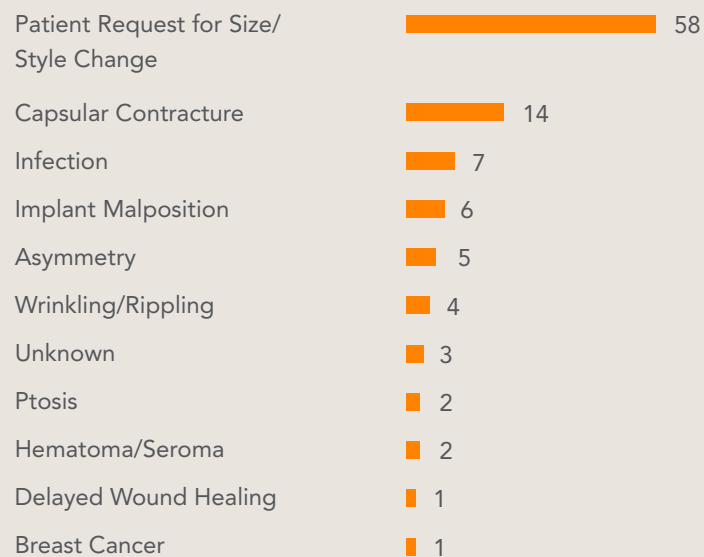


Figure 2. Reasons for Implant Removal through 3 Years
Revision-Augmentation Cohort
(n=68 implants)

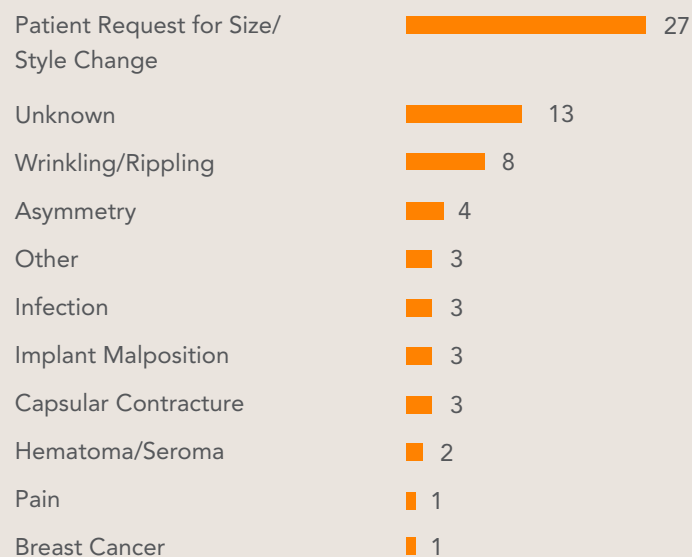


Figure 3. Reasons for Implant Removal through 3 Years
Primary Reconstruction Cohort
(n=76 implants)

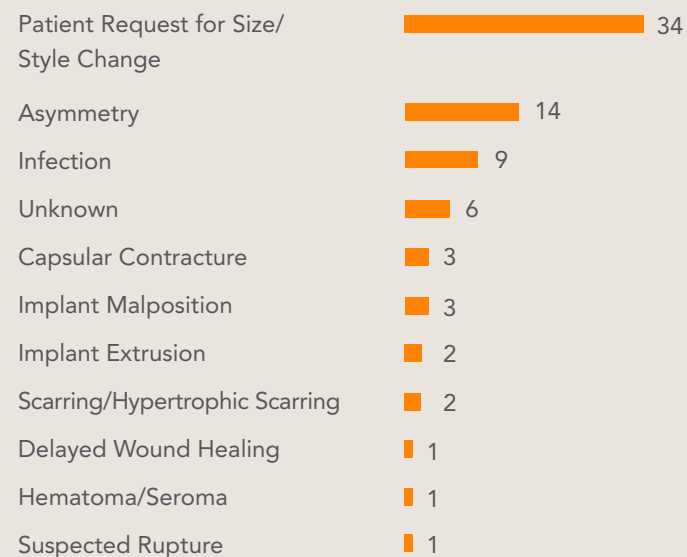
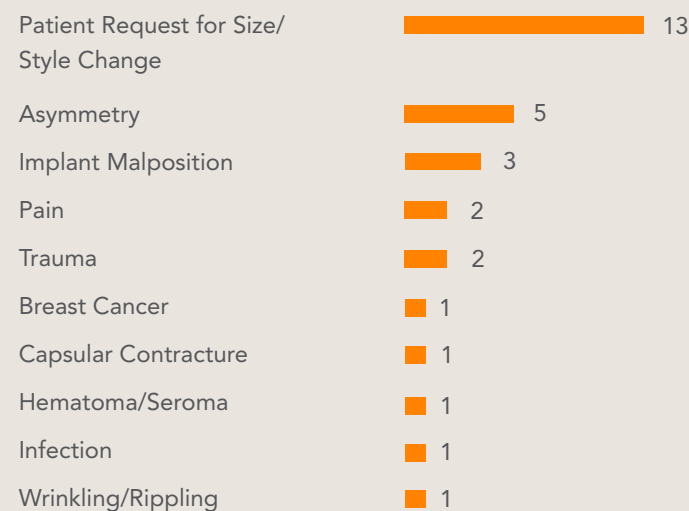


Figure 4. Reasons for Implant Removal through 3 Years
Revision-Reconstruction Cohort
(n=30 implants)



For a more detailed review of potential complications, please refer to Section 4, *Risks Associated With Breast Implants*, of the appropriate *Patient Educational Brochure* for breast augmentation or reconstruction with Sientra's Silicone Gel Breast Implants.

important factors to consider

Before you have surgery, you should have a detailed conversation with all of your doctors (primary care doctor, surgeon, and any specialists you see) about breast implant surgery in light of your medical history. In addition, you should also review the applicable Patient Educational Brochure for your situation: *Breast Augmentation with Sientra Silicone Gel Breast Implants* or *Breast Reconstruction with Sientra Silicone Gel Breast Implants, including the Boxed Warning* and Patient Decision Checklist, and discuss with your surgeon prior to deciding to have breast implant surgery.

CONTRAINDICATIONS

Breast implant surgery should **NOT** be performed in:

- Women with active infection anywhere in their bodies,
- Women with existing cancer or pre-cancer of their breast who have not received adequate treatment for those conditions, and in
- Women who are pregnant or nursing.

PRECAUTIONS

CAUTION: Notify your doctor if you have any of the following conditions as the risks of breast implant surgery may be higher if you have any of these conditions

- An autoimmune disease,
- A weakened immune system (for example, currently taking drugs that weaken the body's natural resistance to disease),
- Conditions that interfere with wound healing and/or blood clotting,
- Reduced blood supply to breast tissue,
- Chemotherapy or radiation to the breast following implantation, or
- Clinical diagnosis of depression or other mental health disorders, including body dysmorphic disorder and eating disorders. If you have been diagnosed with or treated for depression, an anxiety disorder, or another mental health condition, you should wait until your condition has resolved or stabilized before having breast implant surgery. Discuss any history of mental health disorders with your doctor(s) prior to surgery.

WARNINGS

WARNING: Below is a list of warnings associated with breast implant surgery including a Boxed Warning for all breast implants. It is critical for you to understand these warnings. For a more detailed review of warnings, please refer to Section 3.4, *Warnings*, of the appropriate *Patient Educational Brochure*.

WARNING:

- Breast implants are not considered lifetime devices. The longer people have them, the greater the chances are that they will develop complications, some of which will require more surgery.
- Breast implants have been associated with the development of a cancer of the immune system called breast implant-associated anaplastic large cell lymphoma (BIA-ALCL). This cancer occurs more commonly in patients with textured breast implants than smooth implants, although rates are not well defined. Some patients have died from BIA-ALCL.
- Patients receiving breast implants have reported a variety of systemic symptoms such as joint pain, muscle aches, confusion, chronic fatigue, autoimmune diseases and others. Individual patient risk for developing these symptoms has not been well established. Some patients report complete resolution of symptoms when the implants are removed without replacement.

- Smoking can make it harder for your body to heal. Do not smoke before your breast implant surgery or while you are recovering.
- Breast implants are not expected to last for the rest of your life, and breast implantation may not be a one-time surgery.
- Many of the changes to your breast that may occur as a result of breast implant surgery will be permanent and cannot be undone.
- Breast implants may interfere with your ability to produce milk (lactate) for breast-feeding.
- Mammography for detecting breast cancer (or cancer recurrence) may be more difficult with breast implants in place. Be sure to notify the technologist that you have breast implants prior to the procedure

- It is recommended that you have periodic imaging (e.g., MRI, ultrasound) of your silicone gel- filled breast implants to screen for implant rupture regardless of whether your implants are for cosmetic augmentation or reconstruction.
- Your implants could rupture without you noticing any change in your breasts (called a “silent” rupture). Because silent ruptures can occur and because they are difficult to detect, even if you have no symptoms, you should have your first ultrasound or MRI at 5-6 years after your initial breast implant surgery and then every 2-3 years thereafter for as long as you have your breast implants
- These recommendations do not replace other additional imaging that may be required depending on your medical history or circumstances (i.e., screening mammography for breast cancer).
- Routine self-examination of your breasts may be more difficult with implants. However, you should still perform an examination of your breasts every month for cancer screening.
- After undergoing breast implant surgery, you may experience changes in your healthcare insurance. Be sure to check with your insurance company about potential issues and understand the complete extent of your health coverage before having breast implant surgery.

For a complete review of the risks and benefits please read the appropriate Sientra patient educational brochure for breast augmentation or reconstruction,

Breast Augmentation with Sientra Silicone Gel Breast Implants or **Breast Reconstruction with Sientra Silicone Gel Breast Implants**.

BREAST IMPLANT SURGERY –

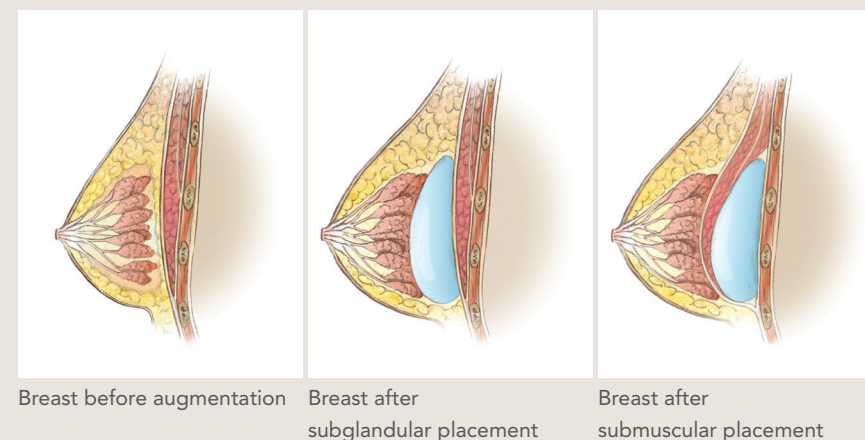
understanding the procedure

Before your breast implant surgery, you and your plastic surgeon will discuss the implant placement and surgical incision options, as well as your expected postoperative care.

IMPLANT PLACEMENT

Your surgeon will consult with you and suggest where the breast implant is to be placed. Implants are placed beneath your breast tissue, either on top of the chest muscle (subglandular placement) or underneath part or all of the chest muscle (submuscular placement).

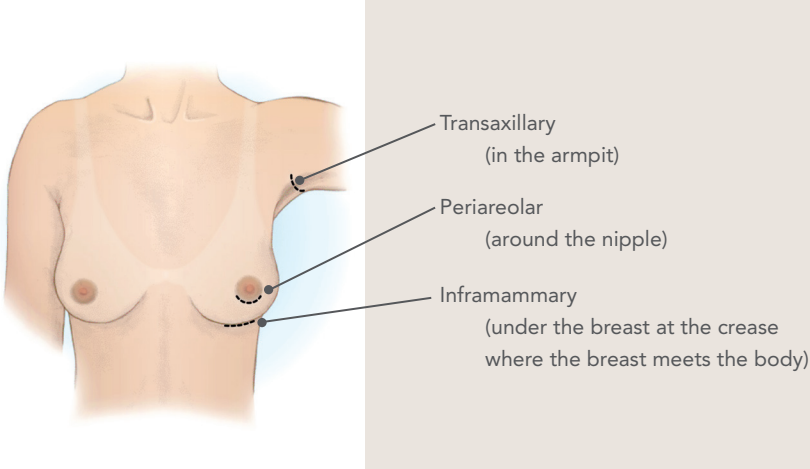
Figure 5: Implant Placement



INCISION SITES

Your surgeon will suggest the best incision site option for your particular surgery. There are three common incision sites to consider:

Figure 6: Incision Sites



ABOUT SILICONE-FILLED BREAST IMPLANTS

A silicone gel-filled breast implant is a sac (implant shell) made of silicone elastomer (rubber), which is filled with clear silicone gel. Sientra uses implant grade silicone elastomer and implant grade high-strength silicone gel to manufacture its Implants. Sientra’s Implants are available in a variety of shapes and sizes, with either a smooth or textured surface. You and your surgeon can choose the Sientra round or shaped implant option that best suits your individual needs. More information about the materials in Sientra’s breast implants are presented in Table 2:

TABLE 2 - SIENTRA BREAST IMPLANT MATERIALS

Component	Raw Material
Shell, inner/outer layers	High strength silicone elastomer
Shell, barrier layer	Fluorosilicone elastomer
Spherical cap	Liquid silicone rubber
Patch sheeting	High strength silicone elastomer Fluorosilicone elastomer High consistency rubber
Silicone gel filler	High strength silicone gel
Titanium dioxide pigmented silicone ink	Liquid silicone rubber
Position indicator	High consistency rubber Titanium dioxide

The potential toxicity of the chemicals and metals listed in the following tables have been evaluated with both toxicity testing and risk assessments to assess the exposure levels in comparison to the amount determined to likely be safe. However, individual responses to chemicals may vary, and all reactions cannot be predicted. Below are some definitions to help you understand the chemical information:

Volatiles: Chemicals that are released by breast implants as a gas.

Extractables: Chemicals that are released by breast implants following soaking in water and/or organic solvent (liquid).

TABLE 3 - CHEMICALS RELEASED BY SIENTRA BREAST IMPLANTS

Cyclic Siloxane	Shell (µg/g)	Gel (µg/g)
D3 Siloxane	0.87	ND
D4 Siloxane	0.60	73
D5 Siloxane	3.92	510
D6 Siloxane	25.39	2119
D7 Siloxane	20.64	2153
D8 Siloxane	14.01	1560
D9 Siloxane	8.29	952
D10 Siloxane	6.11	964
D11 Siloxane	5.05	1107
D12 Siloxane	5.76	1111
D13 Siloxane	6.94	1276
D14 Siloxane	9.0	1808
D15 Siloxane	10.93	2180
D16 Siloxane	14.08	2539
D17 Siloxane	18.0	2563
D18 Siloxane	14.84	2471
D19 Siloxane	15.75	2402
D20 Siloxane	21.79	1447
D21 Siloxane	15.24	ND
Total Extractables (µg/g)	219.45	27,234

ND=Not detected

Information about the heavy metals found in Sientra's breast implants are presented in Table 4:

TABLE 4 - HEAVY METALS FOUND IN SIENTRA BREAST IMPLANTS

Metal	Shell Concentration (ppm)	Gel Concentration (ppm)
Antimony	ND	ND
Arsenic	ND	ND
Barium	0.27	ND
Beryllium	ND	ND
Bromine	ND	19
Cadmium	ND	ND
Cesium	0.11	ND
Chromium	ND	0.27-0.28
Cobalt	ND	ND
Copper	ND	ND
Germanium	ND	0.07
Lead	ND	ND
Magnesium	ND	2.8-3.2
Manganese	ND	0.04
Mercury	ND	ND
Molybdenum	ND	ND
Nickel	ND	0.07-0.08
Phosphorus	4.0	4.7-5.8
Platinum	1.6-1.7	1.1-8.6
Potassium	ND	22
Selenium	ND	ND
Silver	ND	ND
Tin	0.39-0.95	0.15-0.19
Vanadium	ND	ND
Zinc	ND	0.33-0.37
Zirconium	0.46	ND

ND=Not detected

POSTOPERATIVE CARE

In the weeks after your breast implant surgery, the skin over your breasts may feel tight as it adjusts to your new breast size. After your stitches are removed, your doctor may tell you to massage your incision site(s) with a cream or lotion to keep the skin from drying out; this may make you more comfortable as well. Use the product(s) he or she recommends.

Your doctor may have special directions about avoiding exercise or activities that compress or put pressure on your breasts during the first weeks after surgery. Follow your doctor's directions. You will be given a Device Identification Card that includes the style and serial number of your breast implant(s) and other information. This card is for your permanent record and should be kept in a safe place. In the event you have a concern or problem with your implant, you can use this card to describe the implant to your health care provider or to Sientra.

BREAST IMPLANTS ARE NOT LIFETIME DEVICES

Breast implants are not expected to last for the rest of your life, and breast implantation may not be a one-time surgery. It is likely that you will need other surgery related to your breast implants over the course of your life. Patients may require a reoperation for a number of reasons, including size and/or style change, implant removal (with or without replacement), capsular contracture procedures, incision and drainage, implant repositioning, scar revision, or to address some of the complications mentioned in Table 1 on pages 4-5.

ADDITIONAL INFORMATION

For additional information or if you have questions regarding the Sientra Silicone Gel Breast Implants, please visit Sientra's website at www.sientra.com or call **Sientra at (888) 708-0808**.

Additional information about silicone gel breast implants can be obtained from the United States Food and Drug Administration (FDA) at www.fda.gov/breastimplants.



IMPORTANT SAFETY INFORMATION:

Sientra's Silicone Gel Breast Implants are indicated for breast augmentation in women at least 22 years old and for breast reconstruction. Breast augmentation includes primary breast augmentation to increase the breast size, as well as revision surgery to correct or improve the result of primary breast augmentation surgery. Breast reconstruction includes primary reconstruction to replace breast tissue that has been removed due to cancer or trauma or that has failed to develop properly due to a severe breast abnormality. Breast reconstruction also includes revision surgery to correct or improve the results of a primary breast reconstruction surgery. Breast implant surgery is contraindicated in women with active infection anywhere in their bodies, with existing cancer or pre-cancer of their breast who have not received adequate treatment for those conditions and, who are pregnant or nursing. Key complications include capsular contracture, implant removal, rupture and reoperation. For more detailed information about the risks and benefits of Sientra breast implants, please visit sientra.com/resources or call Sientra at 888.708.0808. Sientra breast implants with high-strength cohesive silicone gel are only available through board-certified or board-eligible plastic surgeons.

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