Over or under

 For years, plastic surgeons have preferred to place breast implants under the main muscle in the chest.

 But younger, athletic women having preventive mastectomies and some plastic surgeons have begun to challenge that conventional wisdom.

 If a woman is very athletic or lifts weights, some plastic surgeons believe she is better off having what doctors call pre-pectoral placement of the implant. The method is used with additional cadaver and animal tissue known as acellular dermal matrix products, or ADM.

 The discussion emerged at the annual conference in 2015 in Philadelphia of Facing Our Risk of Cancer Empowered, or FORCE. Women asked about the issue at several of the conference’s surgery sessions, which included a leading speaker on the subject.

 Dr. Hilton Becker, a Boca Raton, FL. plastic surgeon, said he has performed pre-pectoral implant placement for about seven years, after seeing too many patients develop distortions in their implants when they exercised or the devices moved too high up on their chests. He calls the first problem “animation distortion” and the second, “high-riding implants.”

 He uses an adjustable saline implant that can be filled with salt-water in stages. He also adds an ADM product to hold the implant in place, over the muscle.

 When the implant is filled to the desired size of the breast, Becker takes out a tiny valve from the implant and closes up the site. Sometimes, he swaps the temporary saline implant for a silicone one, for women interested in the more natural look they think silicone provides. He said adjustable gel implants are available in Europe and many other regions but not the U.S.

 Dr. Scott Spear, a Chevy Chase, MD plastic surgeon, said he has seen doctors change attitudes on the subject but he urged caution about the placement of implants.

 Doctors usually place implants under the pectoral muscle because they will be “less noticeable, more protectable,’’ he said. The addition of ADM products on top of an implant also will change the look of an implant, he said. “It’s not going to look as soft.” He said women should raise the issue with their plastic surgeons if they are very athletic.

 “If someone came to me and said they were really worried about the animation thing and they were worried about lifting weights, I’d do a pre-pectoral placement.”

 Dr. Steven Kronowitz, a professor of plastic surgery at the University of Texas MD Anderson Cancer Center, Houston, said placement of implants above the chest muscle makes it harder to find suspicious areas on mammograms. “We can see more of the breast tissue during a mammogram when the implant is below the muscle, making it easier to detect changes,” he said.