

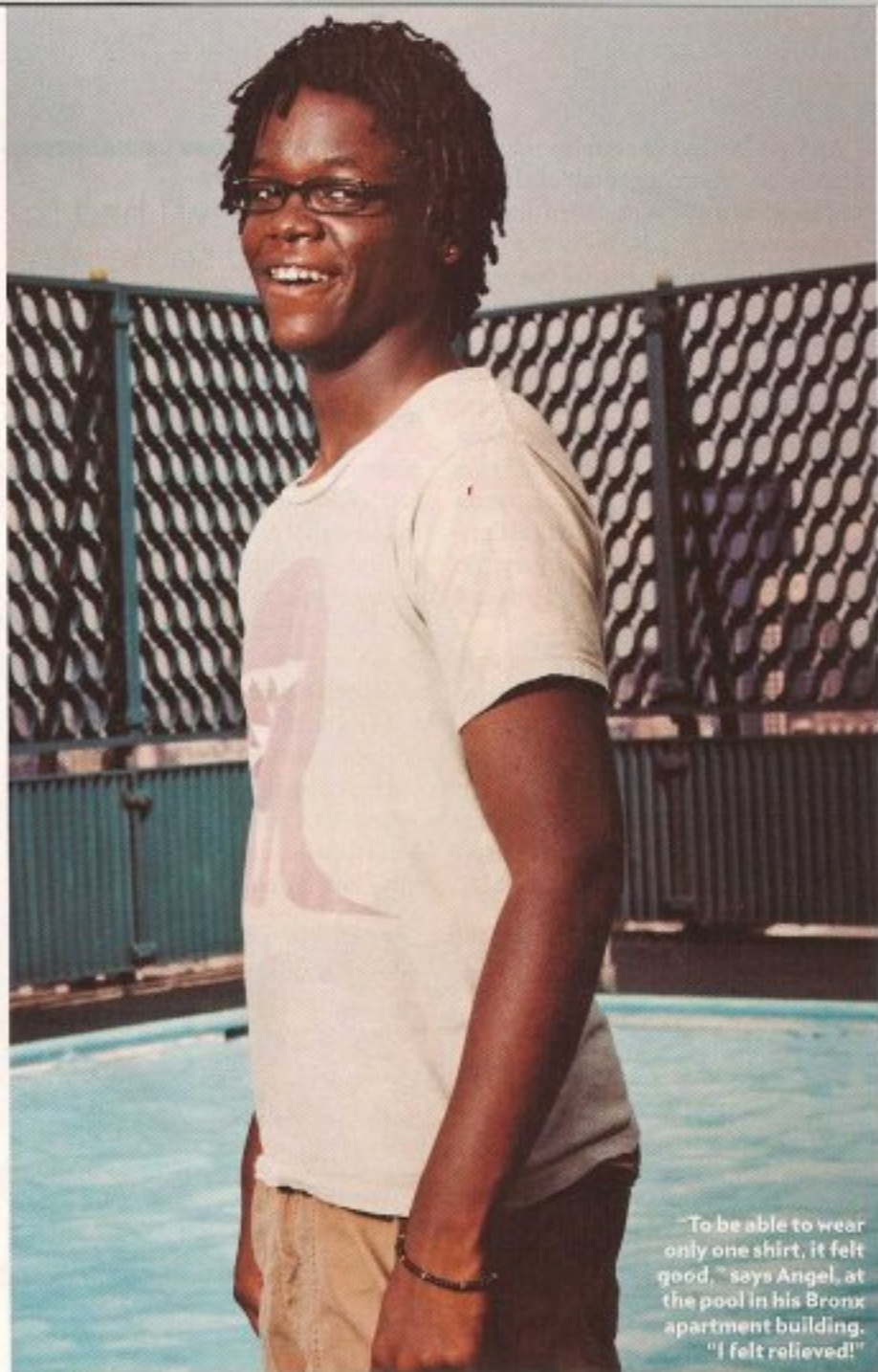
One Boy's Private Shame

Like a growing number of teenage boys, Brian Angel turned to surgery to deal with what he calls a "really embarrassing" condition: gynecomastia, or male breasts

BY CHARLOTTE TRIGGS

They took his wallet, his cell phone and his Nike Air Raid sneakers, but when thieves broke into Brian Angel's locker at the Bronx's Crotona Pool last summer, he was worried about losing only one thing: his T-shirt. "Even when I was young, I would wear a shirt to go swimming," he says. "I'd want to play basketball and take my shirt off, but I couldn't. I could never even sleep without a shirt on."

No, Angel doesn't suffer from a case of extreme modesty—but, rather, an extreme condition called gynecomastia, an enlargement of the breasts in men. (See box, right.) Typically the result of hormone fluctuations during puberty or excess fat, some doctors believe gynecomastia has risen as the number of overweight teens shot up 7 percent in the last decade. It is estimated that between 40 and 60 percent of all men have had some degree of gynecomastia at some point in their lives. The condition is persistent in about 8 percent of those cases.



"To be able to wear only one shirt, it felt good," says Angel, at the pool in his Bronx apartment building. "I felt relieved!"

WHAT IS GYNECOMASTIA?



This condition presents itself in a variety of ways. Grade 1 is "a tiny enlargement usually confined to the nipple area," says Dr. Guy, and can be left alone. Grades 2 and 3 are defined by moderate enlargement, while grade 4—what Angel had—means "skin is stretched to a severe degree, the location of the nipple and areola is distorted and tissue is more firm," says Dr. Staffenberg. Liposuction can leave such breasts saggy, so a better option is reduction surgery, in which the tissue is cut out and extra skin removed.

And yet instead of simply enduring what is, for many, a source of shame, more and more boys and men are opting to undergo breast reduction surgery: In 2006, over 19,000 men—70 percent of whom, like Angel, were teenagers—had their breasts reduced, an increase of 22 percent from the year before. “This is something these patients have been embarrassed about since they were 12 or 13 years old,” says Dr. David Staffenberg, a plastic surgeon at the Bronx’s Montefiore Medical Center, who performed Angel’s surgery. “So when they find out that something can be done, it’s a real relief.”

But the increased reliance on surgery to correct a problem that can, in many cases, either be outgrown during puberty or resolved through diet and exercise has provoked controversy in some corners of the medical community. “Most of the time, gynecomastia just goes away naturally,” explains Dr.

“I knew I had to find some way to get rid of them”

—BRIAN ANGEL, ON HIS DECISION TO UNDERGO SURGERY

Roxanne Guy, president of the American Society of Plastic Surgeons. In our image-conscious culture, however, it’s understandable that boys bombarded with shirtless photos of Matthew McConaughey and David Beckham “can’t wait for it to go away,” Guy says, adding that doctors generally consider age 16 (or the end of puberty) as the earliest point at which a teen should opt for breast-reduction surgery.

Angel, 17, waited as long as he could before going under the knife. By the time he visited a doctor last fall, his

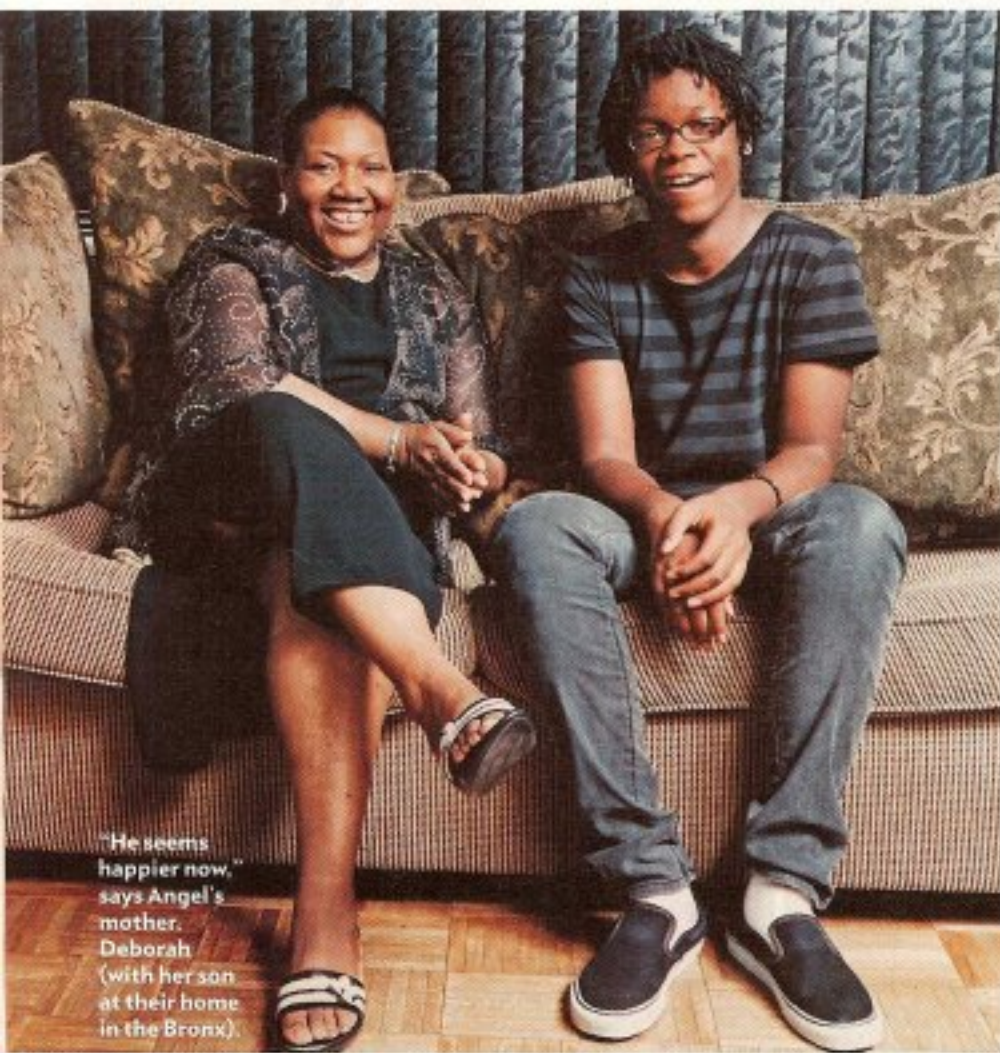
breasts—which started growing when he was 12—had filled out to almost a C cup. The doctor’s initial recommendation for the 5’11”, 208-lb. Angel? Lose weight. Within 9 months, Angel had dropped 40 lbs. by going vegan, but “the breasts were still there,” he says. “Actually, they were worse, because my gut was in, so they looked more prominent. I was really depressed.”

Teased by his friends for having “manboobs,” Angel would try to disguise his figure by wearing “a tank top under my shirt and tuck it in really tight so it would bring them down.” But that trick didn’t work in gym class. “I could see people watching and making fun of [them bouncing] up and down,” he says. “They’d shout, ‘Get a bra!’ I was like, I can’t deal with this for the rest of my life.”

After researching options on the Internet, Brian asked his mother, Deborah, 53, a retired human resources manager, about surgery. “I was a bit uncomfortable with it,” she admits. “But I had to be there for him. I felt like [the gynecomastia] would only hinder him.” And so on July 11, Angel underwent an 80-min. operation (the \$4,000 tab was covered by insurance), during which Dr. Staffenberg removed more than 1.5 lbs. of breast tissue and excess skin and affixed Angel’s areolas to a new position on his chest.

Despite battling physical pain the night after the operation, the first time Angel glanced in a mirror, “I was like, ‘Wow, I did it!’” he recalls. “I felt relieved.” Within only a few days, he was able to pick up the guitar he has been playing since age 15 and “hold it up to my chest!” he says. “Usually, I had to keep it low; now, it’s so much easier.” Adds his mother: “He’s more outgoing—now he can be himself.”

In the weeks since, Angel has taken up running (“I couldn’t run before—my chest would ache,” he says) and may even try out for the track team as a senior at Central Park East High School in Manhattan. And those aren’t the only updates he’s planning. “I’ve changed my style a lot,” he says. “I’ve gone from tight clothes—to really, really tight!” ●



“He seems happier now,” says Angel’s mother, Deborah (with her son at their home in the Bronx).