A 32-year-old woman reported fever and a painful axillary tumor formation three months after the replacement of a breast augmentation prosthesis (Poly Implant Prostheses), which was identified radiologically as “siliconoma” or a lymph node infiltrated by silicone (Fig. 1). The lesion was resected (Fig. 2) using a combined technique of axillary reversed mapping with injection of methylene blue in the ipsilateral forearm and preservation of the anterograde stained lymph nodes in order to preserve the lymphatic drainage of the arm (Fig. 3). The pathology study confirmed that the mass was a lymph node that had been infiltrated with silicone. The postoperative course was uneventful; the symptoms had subsided and no lymphedema was observed during the follow-up.

Diagnosis: lymph node infiltrated with silicone.