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Single incision for early stage breast cancer: A minimally invasive approach

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Breast conserving surgery (BCS) with sentinel lymph node (SLN) biopsy is standard of care for the treatment of early stage breast cancers. The use of a minimally-invasive single incision has not been rigorously compared to multi-incision traditional approach. A tertiary surgical oncology database was retrospectively reviewed over two years study period. The single incision approach used one incision to resect the tumor and the Lymphazurin-tagged axillary SLNs. The multi-incision group used a breast and a separate axillary incision. Patient satisfaction was collected in the first postoperative visit and documented as excellent, good and poor. BCS-SLN accounted for 110 patients with median age 63 years, with 64 (58%) cancers occurring in the upper outer quadrant (UOQ). There were 48 patients in the single incision approach showed no difference in percentage of biopsy clip removal or frequency of tumor-free margins and did not prolong operative time. Overall, eight patients (7.2%) had positive margins; seven underwent to re-excision and no residual disease was found, one patient refused additional surgery. Patient satisfaction was excellent in all patients treated with a single incision approach for BCS-SLN is safe and effective. This technique should be considered for upper outer quadrant breast cancers, and has the potential to improve patient satisfaction and cosmetic results.

Biography

Monica Rizzo is an Associate Professor of Surgery at Emory University School of Medicine. She is Board Certified by the American College of Surgeons. She did her Surgical Oncology Fellowship at Emory University. She is an academic surgeon and her clinical expertise includes the surgical treatment of breast cancer, melanoma, and soft tissue sarcoma. As a researcher, she has published more than 50 research articles in peer reviewed journals. She is currently serving at many international committees. She is the Chair of the Society of Surgical Oncology Disparity Committee.

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