

World Congress on **Breast Cancer**

August 03-05, 2015 Birmingham, UK

Wide Local Excisions Re-operation Rates at Tameside General Hospital

K Ludwig, N Rahman, S Sabri and P Arora
Tameside General Hospital, UK

Background: After diagnosis with a breast tumor most patients can be offered breast conserving surgery by performing a wide local excision (WLE) rather than a mastectomy. This provides better breast cosmesis while maintaining the survival rates of a mastectomy. On reviewing the histology NICE guidelines suggest that if resection margins are less than 2mm that re-excision should take place after discussing the risks and benefits with the patient.

Aims: This audit was undertaken in order to compare the WLE re-operation rates at a district general hospital with the national and global averages.

Methods: Anonymous data was collected from patients who required re-excision after a WLE between 1st April 2012 and 21st August 2013. Data was collected anonymously from clinical, histology and radiology letters.

Results: A total of 77 patients underwent WLE. 18% of which went on to have further operation, either a repeat WLE or mastectomy. 11 patients were found to have larger tumors on histology than initially suggested on radiography.

Conclusion: Re-excision rate was 18%, with 54% of those going on to have a mastectomy. Wide local excision rate was 10.3%. Nearly all patients who underwent re-excision had the size of their tumor underestimated on radiology. With a large cohort study quoting a 20% re-excision rate this audit suggests that Tameside General Hospital is performing similarly with many other NHS trusts.

Biography

My name is Katherine Ludwig, I graduate from Dundee Medical School in June 2014. I am currently an FY2 at Tameside General Hospital. During my foundation year 1 I undertook placements in gastroenterology, breast surgery and old age psychiatry. I hope to pursue a career in general surgery with an interest in breast surgery.

Notes: