

MEME KORUYUCU CERRAHİ BREAST-CONSERVING THERAPY

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he objective of local therapy for breast cancer is to excise the tumor with adequate margins, minimizing the chance of local recurrence while achieving a cosmetically acceptable outcome.

The two therapy options are those of breast conserving surgery with radiation therapy, versus that of mastectomy with or without reconstruction. Most women presenting with early stage breast cancer are candidates for breast conserving surgery, with the relative contraindication of breast conservation being large tumor size compared to breast size, multicentric disease, and contraindications or unwillingness to receive radiation therapy. To date, multiple randomized prospective trials have demonstrated that breast conserving therapy has an equivalent survival to that observed with mastectomy. Therefore, breast conservation is a reasonable alternative to mastectomy for early stage breast cancer. There may be a slightly higher risk of ipsilateral breast tumor recurrence with breast conservation. Ipsilateral breast tumor recur-

rences may have very different biology based on whether they present true local occurrences, or new primaries. It is increasingly becoming clear that a local recurrence in the breast is not only a marker of prognosis, but also may be causally linked to a poor outcome. Therefore, surgically, every attempt should be made to minimize the chance of ipsilateral breast tumor occurrence. The predictors of local recurrence include a variety of tumor characteristics, as well as positive surgical margins, lack of radiation therapy, and lack of systemic therapy administration. Therefore, a variety of approaches should be undertaken to minimize the chance of having margins that are close or involved. Intraoperative margin analysis may be one such tool. Finally, there are a lot of factors that affect the cosmetic outcome with breast conservation, as well as influencing the ultimate quality of life and psychological well-being of the patient. All of these factors need to be taken into consideration to individualize the surgical therapy decisions for each patient.