Breast sparing treatment of mammary cancer

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Background. Conservative treatment of breast cancer is a valid alternative to mastectomy in the early stage of the disease. The purpose of the paper is to establish the subgroups of patients best suited for this type of therapy and the optimum therapeutic protocol.

Patients and methods. This is a prospective study that overviews the outcome of four groups of patients with stage I and II of breast cancer treated by the same medical team at the Bucharest Oncologycal Institute: Group A: 123 patients who underwent conservative treatment as they met the selection criteria for this type of therapy;

- Group B1: 30 patients who underwent conservative treatment because they had refused mastectomy;
- Group B2: 40 patients who underwent conservative treatment because of medical contraindication for extended surgery;
- Group M: 150 patients by whom mastectomy was performed, although they would have fulfilled the selection criteria for conservative treatment.

The most important selection criteria for conservative treatment were: unilateral, unicentric breast cancer, T<2.5cm, N0-N1, tumor/breast ratio that would allow proper excision with a convenient cosmetic outcome, and patient's wish.

Surgery for the primary tumor consisted of limited mammary resection, defined as excision of the tumor together with at least 2 cm of peritumoural mammary tissue. The amplitude of mammary resection depended on the location, size and histopathological type of the tumor and on the breast size. Axillary dissection was performed for diagnostic purposes and for local control of the axillary disease. Post-operative radiotherapy is an essential component of conservative treatment targeting the mammary gland and, under certain circumstances, the regional ganglionar areas. Chemotherapy and/or hormonal therapy were applied depending on the prognostic factors of the disease.

Results. Local recurrence rates at 5 years were 6.9% in Group A, 25% in Group B1, 12.5% in Group B2, 1.3% in Group M. Overall survival rate at 5 years was 91.37% in Group A, 70.83% in Group B1, 62.50% in Group B2, 88.60% in Group M. The cosmetic result of conservative treatment was good in over 70% of the cases.

Conclusion. Results confirmed that conservative therapy, with due observance of selection criteria and of the therapeutical protocol, is an appropriate therapy for a category of patients with early breast cancer.

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