

Many women do not undergo breast reconstruction after mastectomy

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Despite the benefits, only a small minority of women, regardless of age, are opting for immediate reconstructive breast surgery after undergoing mastectomy for treatment of breast cancer, according to data presented at the 2011 CTBC-AACR San Antonio Breast Cancer Symposium, held Dec. 6-10, 2011.

Research has shown that immediate breast reconstruction after mastectomy improves psychological well-being and quality of life and provides [women](#) with improved [body image](#) and self-esteem compared with delaying the procedure.

However, data from this study, presented by Dawn Hershman, M.D., associate professor of medicine and [epidemiology](#) at Columbia University Medical Center in New York, indicate that only about one third of women undergo the procedure.

Hershman and colleagues identified 106,988 women with [breast cancer](#) who underwent mastectomy between 2000 and 2010. They identified these women using insurance codes and then examined data on the frequency of reconstruction by a number of factors including age, race, number of procedures performed in the hospital and type of insurance.

Of the women examined, 22.6 percent underwent immediate reconstruction. Although overall rates of reconstruction have increased since 2000, the greatest increases were seen among women with commercial insurance — from 25.3 percent to 54.6 percent — and

among women aged younger than 50 years — from 29 percent to 60 percent. Among women aged 50 years or younger who also had commercial insurance, 67.5 percent underwent immediate breast reconstruction. Overall, women with commercial insurance had more than a threefold higher likelihood of undergoing immediate reconstruction compared with women without health insurance.

"We were surprised to see that although the use of immediate postmastectomy reconstruction has increased, the rates still remain low, with 41.8 percent of women aged younger than 50 years and less than 20 percent of women aged older than 50 years receiving reconstruction during this time frame," Hershman said.

Researchers found that patients were more likely to undergo immediate reconstruction if their surgeon did more mastectomies or they were in a hospital where more mastectomies were performed.

"This is something that could be modified by training and patient education," Hershman said.

Other factors associated with a decreased likelihood for undergoing [mastectomy](#) were increasing age, black race, rural hospital location, nonteaching hospital or having other medical illnesses.

Women who underwent immediate [breast reconstruction](#) postmastectomy did have a longer hospital stay, but in-hospital complication rates were similar between women who had reconstruction and those who did not.

"Our study shows that there are factors that can be modified to increase the likelihood that women undergo postmastectomy reconstruction," Hershman said. "Public policy should ensure that access to reconstructive surgery is available to all women regardless of insurance

status."

In the future, Hershman and colleagues plan to explore other factors that may be associated with immediate reconstruction to better target interventions to appropriate institutions.

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