

Good long-term quality of life after 'DIEP flap' breast reconstruction

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For women who have undergone mastectomy for breast cancer, breast reconstruction using the abdominal "DIEP flap" provides good long-term quality of life (QOL)—similar to that of women without breast cancer, reports a study in the May issue of *Plastic and Reconstructive Surgery*, the official medical journal of the American Society of Plastic Surgeons (ASPS).

The DIEP technique also provides better QOL than no [breast reconstruction](#) or reconstruction using other methods, according to the study by Dr. Vincent Hunsinger of Georges Pompidou European Hospital, Paris, and colleagues. They write, "Our results indicate that DIEP [breast reconstruction](#) allows patients with breast cancer to maintain a good QOL in the long-term."

Good QOL Scores Eight Years after DIEP Flap Reconstruction

The researchers sent a standard QOL questionnaire (the "Short-Form 36" survey) to women who had mastectomy for breast cancer treatment. In 111 women, mastectomy was followed by autologous reconstruction using the DIEP flap—a popular option using tissue from the abdomen to reconstruct the breast. (DIEP refers to the "deep inferior epigastric perforator," the major blood vessel used in the reconstruction.)

A comparison group of 205 patients underwent some other type of

breast reconstruction, such as implant-based techniques (70 women); or no reconstruction at all (135 women). Quality of life scores were compared between groups at an average follow-up of 8.6 years. The researchers also compared QOL in the DIEP group to those of about 3,300 women from the French general population.

For women who underwent DIEP flap reconstruction, QOL scores were similar to those for women of similar age in the general population. Women in the DIEP group actually scored higher on some QOL subscales. However, because of the relatively small number of patients, most of these differences were not significant.

Compared to other women who had mastectomy, QOL scores were significantly better with DIEP flap reconstruction. Women in the DIEP group had higher scores in all areas of QOL compared to those with no breast reconstruction, and on five out of eight subscales compared to those with other types of reconstruction.

Breast cancer and mastectomy have a major impact on physical and mental health and other aspects of QOL. The DIEP flap has emerged as a popular "muscle-sparing" technique, reducing some of the complications of other autologous breast reconstruction approaches.

The new study suggests lasting improvements in QOL for women undergoing DIEP flap reconstruction after mastectomy. With the DIEP flap, QOL scores are comparable to those of women in the general population, and better than in women who have had mastectomy without reconstruction or with other approaches.

Within its limitations, the study adds to previous evidence that DIEP flap reconstruction produces lasting physical and mental health benefits after [mastectomy](#). The researchers note that some of their patients were treated several years ago—before technical advances that further

improved the outcomes of DIEP reconstruction.

"Our study shows that DIEP flap breast reconstruction restores long-term quality of life after breast cancer surgery," Dr. Hunsinger and colleagues conclude. They suggest that undergoing breast reconstruction may enhance [women](#)'s ability to fight against the burden of [breast cancer](#), particularly in younger age groups.

More information: Vincent Hunsinger et al. Long-Term Follow-Up of Quality of Life following DIEP Flap Breast Reconstruction, *Plastic and Reconstructive Surgery* (2016). [DOI: 10.1097/PRS.0000000000002047](https://doi.org/10.1097/PRS.0000000000002047)

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