

Low long-term risk of breast cancer recurrence after nipple-sparing mastectomy

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Nipple-sparing mastectomy (NSM)—an increasingly popular option for women undergoing treatment for breast cancer—not only achieves good cosmetic outcomes, but also low long-term risk of recurrent breast

cancer, reports a study in the October issue of *Plastic and Reconstructive Surgery*.

Ten years after NSM, the rate of recurrent breast cancer is only 3%, according to the new research, led by ASPS Member Surgeon Mihye Choi, MD, of the Hansjörg Wyss Department of Plastic Surgery, New York University Langone Health. The researchers write that "nipple-sparing mastectomy remains a viable option in the appropriately indicated patient with regards to long-term cancer recurrence."

Not just improved cosmetic outcomes—NSM provides good long-term cancer control

In the NSM technique, the surgeon preserves the nipple and surrounding tissues for use in immediate breast reconstruction. Compared to conventional mastectomy, NSM allows for a more natural-looking reconstruction, leading to higher patient satisfaction. However, there is little information about the long-term risk of recurrent breast cancer after NSM.

Dr. Choi and colleagues evaluated breast cancer outcomes in 120 patients undergoing NSM for breast cancer treatment. The analysis included a total of 126 therapeutic NSM procedures. The analysis excluded prophylactic (preventive) NSM procedures to reduce the risk of breast cancer in women at high genetic risk.

At a median follow-up of 10 years after NSM, the analysis showed low recurrent cancer risks: 3.33% per patient and 3.17% per reconstructed breast. Of the four patients with recurrent cancer, two had local recurrences (breast only) and two had cancer spread to other locations (locoregional recurrence).

Recurrence risk was higher for women who had cancer involving the lymph nodes. However, on analysis adjusting for other factors, there were no demographic, surgical, or tumor-related variables that predicted the risk of recurrent breast cancer.

The researchers point out some key limitations of their findings—including selection bias related to the characteristics of patients likely to be considered good candidates for NSM. Most of the patients in the study had early-stage breast cancers: stage 1 in about 45% and stage 0 in 34%.

The finding of good long-term cancer control is especially important in light of the growing use of NSM and immediate reconstruction for women with [breast cancer](#). "Patients with NSMs have had low locoregional recurrence rates in a retrospective review of patients with a median follow-up of 10-years," Dr. Choi and colleagues conclude. They add that "despite low rates of recurrence, close surveillance remains important to continually assess for long-term safety of NSM."

More information: Carter J. Boyd et al, Long-Term Cancer Recurrence Rates following Nipple-Sparing Mastectomy: A 10-Year Follow-Up Study, *Plastic and Reconstructive Surgery* (2022). [DOI: 10.1097/PRS.00000000000009495](#)

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