

Immediate Versus Delayed Breast Reconstruction after Mastectomy

Essay

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List of Abbreviations

Abb.	Full term
AJCC	American joint committee on cancer
BC	Breast cancer
BCS	Breast conservative surgery
CT	Computed tomography scanning
DCIS	Ductal carcinoma in situ
DIEP	Deep Inferior Epigastric Artery Perforator Flap
ELD	Extended latissimusdorsi flap
FDA	Food and Drug Administration
FNAC	Fine needle aspiration cytology
IMF	Infra mammary fold
LABC	Locally advanced breast cancer
LCIS	Lobular carcinoma in situ
LDMF	Latissimusdorsi muscle flap
MRI	Magnetic resonance imaging
MRM	Modified radical mastectomy
NAC	Nipple areola complex
NAR	Nipple and areola reconstruction
NSSM	Non Skin sparing mastectomy
PMRT	Post mastectomy radiotherapy
RTH	Radiotherapy

Abb.	Full term
SIEA	Superficial inferior epigastric artery
SLNB	Sentinel lymph node biopsy
SSM	Skin sparing mastectomy
TDAP	Thoracodorsalartery perforator
TRAM	Transverse rectus abdominis muscle
US	Ultrasonography
VRAM	Vertical rectus abdominis muscle

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Immediate Versus Delayed Breast Reconstruction after Mastectomy

Abstract

The breast is an important symbol of femininity. It plays an important role in woman's life whether functionally, psychologically or emotionally. Those with breast deformities often experience loss of self-confidence that may affect their everyday life and may lead to adverse consequences including anxiety, depression and change in body image. Breast cancer is currently the commonest cancer in women worldwide, both in the developed and the developing world. The majority of breast cancer deaths occur, where most of the women are diagnosed in late stages mainly due to lack of awareness and barriers to access to health services. The two main options for management of the primary breast cancer are total mastectomy (simple mastectomy, modified radical mastectomy, radical or Halstead mastectomy) and breast conserving surgery. There are two basic types of reconstructive breast operations those that use a breast implant and those use autologous, living tissue. Operative methods can be divided into the procedures after breast conserving surgery, and the procedures after total mastectomy. The aim of this work is to highlight the commonly used reconstructive modalities after mastectomy, with special emphasis on the timing of the reconstructive surgery whether immediate or delayed, and the reported benefits and drawbacks. A spectrum of techniques is available from which the patient and surgeon can choose. These techniques can involve non autologous (breast implants), autologous tissue, or both. Immediate breast reconstruction provides a psychological benefit to the patient by decreasing any feelings of physical mutilation and diminished femininity.

Keywords: Breast cancer, techniques, immediate, breast implants.

Introduction



Aim of the Work

