

The Management of Axillary Lymph Nodes in Breast Cancer – A Retrospective Single-Centre Study

Elena Mihaela Vrabie¹, Mihnea Alecu^{1,2}, Ciprian Cirimbei^{1,2}, Claudiu Daha^{1,2}, Virgiliu Mihail Prunoiu^{1,2}, Dana Lucia Stanculeanu^{1,2}, Daniela Zob^{1,2}, Alexandra Baci¹, Ina Petrescu³, Laurentiu Simion^{1,2}

¹“Carol Davila” University of Medicine and Pharmacy, Bucharest, Romania

²Department of Surgery, “Prof. Dr. Al. Trestioreanu” Oncology Institute Bucharest, Romania

³Department of Plastic and Reconstructive Surgery, Emergency University Hospital, Bucharest, Romania

Abstract

Introduction: We are presenting the experience of our centre with the surgical treatment of breast cancer, by comparing the use of axillary node dissection with sentinel lymph node biopsy (SNLB).

Methods: We have made a retrospective analysis of breast cancer cases in the Surgical Oncology Clinic no. 1, “Alexandru Trestioreanu” Oncology Institute, Bucharest, in the period between December 2019 and December 2020. We are presenting the situations in which axillary node dissection can be replaced with SNLB and the limitations of this method.

Results: Although the use of SNLB has advantages compared to axillary node dissection, it is limited by the early detection of breast cancer and by the necessity of adding axillary dissection to surgical treatment in the case of positive SNLB.

Conclusions: The replacement of axillary node dissection with SNLB is a desideratum for the following decades in view of an optimal treatment of early-stage breast cancer, with fewer postoperative complications and a better life quality.

Key words: breast cancer, sentinel node, axillary lymph dissection