To evaluate long-term clinical follow-up results of implanting subcutaneous port catheters (SPCs) on ipsilateral or contralateral with mastectomy side in patients with axillary lymph node dissection” Nas et al (2017).

Abstract:

PURPOSE: To evaluate long-term clinical follow-up results of implanting subcutaneous port catheters (SPCs) on ipsilateral or contralateral with mastectomy side in patients with axillary lymph node dissection.

METHODS: A total of 73 patients composed of ipsilateral (34 catheters) and contralateral (39 catheters) groups, with SPCs were included. All patients had lumpectomy or modified radical mastectomy for breast cancer. Ipsilateral and contralateral groups had similar patient characteristics.

RESULTS: Five late complications were seen in the ipsilateral group and 2 late complications in the contralateral group. No statistical significant difference was seen between two groups in regard to late complications. Four complications of the ipsilateral group were classified as major group C and 1 as major group D, while 1 complication of the contralateral group was classified as minor group B and 1 as major group C according to Society of Interventional Radiology (SIR) classification. No statistical significant difference was seen between complication rates of two groups in regard to SIR classification.

CONCLUSIONS: SPC related complications do not differ in regard to ipsilateral or contralateral side selection on mastectomized patients with breast cancer and lymph node dissection. SPCs can be implanted on ipsilateral or contralateral sides of the operation in these patients.

Reference:


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