Reconstruction after Mastectomy Does Not Delay or Interfere with Breast Cancer Treatment

Largest study to date demonstrates no risk to survival

SALT LAKE CITY— For years, it was thought that reconstructive surgery following a mastectomy could delay or interfere with breast cancer treatment but a new study from researchers at Huntsman Cancer Institute (HCI) at the University of Utah shows this is not the case.

“Our goal was to evaluate the overall survival in patients who chose reconstruction after mastectomy for breast cancer,” says Jay Agarwal, M.D., a surgeon and investigator at HCI. “What we found was that the survival rate for patients who chose reconstruction was no worse than the rate for patients who did not.”

The study is published in the current issue of The Breast Journal. Researchers obtained statistics from more than five-thousand patients using the National Cancer Institute’s Surveillance, Epidemiology, and End Results.
(SEER) cancer database, focusing on data for all female patients with breast cancer treated with mastectomy from 1998 to 2002. “We found overall survival in patients who chose breast reconstruction was actually significantly higher than in the patients who did not,” says Agarwal. “We are not saying that reconstruction offers a survival advantage, but what is important is that reconstruction does not negatively impact survival. Our analysis should provide reassurance to patients and physicians that breast reconstruction should be offered to breast cancer patients as part of the normal course of care.”

Even though the cost of the surgery is covered by insurance, four out of five women do not receive reconstruction after mastectomy. Agarwal believes a lack of information about reconstruction or fears about reconstruction interfering with breast cancer treatment may explain this statistic. Agarwal’s study also discovered that racial disparities exist. For example, 17.9% of Caucasian women underwent reconstruction after having a mastectomy. This number dropped to 15.6% for African American women, 14.0% for Hispanic women and 9.7% for Asian women. These differences were statistically significant.

The research supports other smaller studies showing a connection between reconstruction and higher survival rates. “The similarity in our results and other studies provides compelling evidence in support of an association between survival and reconstruction status. Future research should attempt to determine the nature of this association,” says Agarwal.

The mission of Huntsman Cancer Institute (HCI) at The University of Utah is to understand cancer from its beginnings, to use that knowledge in the creation and improvement of cancer treatments, to relieve the suffering of cancer patients, and to provide education about cancer risk, prevention, and care. HCI is a National Cancer Institute-designated cancer center, which means that it meets the highest national standards for cancer therapy and research.
care and research and receives support for its scientific endeavors. HCI is also a member of the National Comprehensive Cancer Network (NCCN), a not-for-profit alliance of the world’s leading cancer centers that is dedicated to improving the quality and effectiveness of care provided to patients with cancer. For more information about HCI, please visit www.huntsmancancer.org.

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