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3<sup>rd</sup> World Congress on

## Women's Health & Breast Cancer

October 03-05, 2016 London, UK

## Mesh versus acellular dermal matrix in immediate implant-based breast reconstruction: A prospective randomized trial

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**Background:** Comparative studies on the use of meshes and acellular dermal matrices (ADM) in implant-based breast reconstruction (IBBR) have not yet been performed.

**Methods:** This prospective, randomized, controlled, multicenter pilot study was performed at four Austrian breast cancer centers. 50 patients with oncologic or prophylactic indication for mastectomy and IBBR were randomized to immediate IBBR with either an ADM (Protexa<sup>®</sup>) or a titanized mesh (TiLOOP<sup>®</sup> Bra). Complications, failed reconstruction, cosmetic outcome, patients' quality of life and the thickness of the overlying tissue were recorded immediately postoperatively and three and six months after surgery.

**Results:** 48 patients participated in the study (Protexa<sup> $\circ$ </sup> group: 23; TiLOOP<sup> $\circ$ </sup> Bra group: 25 patients). The overall complication rate was 31.25% with similar rates in both groups (Protexa<sup> $\circ$ </sup> group nine vs. TiLOOP<sup> $\circ$ </sup> Bra group six; p=0.188). There was a higher incidence of severe complications leading to failed reconstructions with implant loss in the Protexa<sup> $\circ$ </sup> group than in the TiLOOP<sup> $\circ$ </sup> Bra group (seven vs. two; p<0.0001). An inverted T-incision technique led to significantly more complications and reconstructive failure with Protexa<sup> $\circ$ </sup> (p=0.037, p=0.012, respectively). There were no significant differences in patients' satisfaction with cosmetic results (p=0.632), but surgeons and external specialists graded significantly better outcomes with TiLOOP<sup> $\circ$ </sup> Bra (p=0.034, p=0.032).

**Conclusion:** This pilot study showed use of TiLOOP<sup>\*</sup> Bra or Protexa<sup>\*</sup> in IBBR and was feasible leading to good cosmetic outcomes and high patient satisfaction. To validate the higher failure rates in the Protexa<sup>\*</sup> group, data from a larger trial were required.

## **Biography**

Daphne Gschwantler-Kaulich has completed her specialization in Obstetrics and Gynaecology at the Medical University of Vienna, Austria, in 2009 with further specialization in Senology, Hereditary Breast Cancer and Breast Reconstruction. She has published more than 30 papers in reputed journals.

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