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Breast reconstruction pathway – Experience from an Asian tertiary hospital

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Objective: Free flap breast reconstruction in Asian women presents a very different set of challenges and considerations compared to Caucasians, due to the great disparity between the size and shape of the breast and available donor site. For example, a slim abdomen precludes abdominal flaps, whilst smaller breasts are ideally reconstructed with smaller flaps. The surgeon has to pay attention to these factors while considering the patient's preference to achieve the ideal breast reconstruction. A one size fits all approach will not be able to deliver these ideals but a tailored approach is necessary. We present our algorithm for breast reconstruction based on retrospective data collected from 120 patients operated by three attending surgeons from 2013 to 2016.

Method: We analyse the retrospective data of three attending breast reconstruction plastic surgeons in Singapore general hospital. This data was collected between 2013 to 2016.

Results: 120 patients were analysed for this algorithm. The authors used a variety of free flaps for breast reconstruction namely the deep inferior epigastric perforator flap, muscle sparing TRAM flap, Superficial inferior epigastric artery flap, transverse upper gracilis flap, profunda artery perforator flap, superficial circumflex iliac artery flap.

Conclusion: The algorithm presented in this paper helps guide the surgeon in choosing the appropriate free flap for breast reconstruction.

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