# The Impact of Radiation and Chemotherapy on Outcomes in Patients who Complete Implant-Based Breast Reconstruction.

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# Introduction

- Treatments for breast cancer include neoadjuvant chemotherapy (NACT), adjuvant chemotherapy (ACT), radiation (RAD), and combinations of these therapies.
- Effects of these therapies on the outcomes of implant-based breast reconstructions have not been studied fully.

### Methods

- Retrospective review of 272 patients who completed implant-based breast reconstruction after mastectomy.
- Patients were split into 8 groups based on cancer therapy received:
  - Group 1: no treatment, n=139
  - <u>Group 2</u>: NACT, n=32
  - Group 3: ACT, n=44
  - Group 4: NACT+ACT, n=14
  - Group 5: NACT+RAD, n=17
  - <u>Group 6</u>: ACT+RAD, n=13
  - Group 7: RAD, n=12
  - Group 8: ACT+NACT+RAD, n=1
  - Group 8 was excluded because it had only one patient, leaving n=271.
- ANOVA and Tukey HSD were run to compare percentages of patients with various complications and percentages of patients undergoing complication & revision surgeries.

#### Results

- There were no significant differences in percentages of patients with infection requiring IV antibiotics (p=.32), necrosis requiring operation (p=.09), or seroma (p=.40).
- For patients who required replacement of TE with another TE due to complication, only Group 1 (1.4%) vs Group 6 (15.4%) had a significant difference, p=.04.
- There were no significant differences in the percentages of patients receiving at least one complication-related surgery before implant placement (p=.16), at least one complication-related surgery after implant placement (p=.85), or at least one revision surgery (p=.94).

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## Conclusions

- Although Group 6 (ACT+RAD) patients showed a significantly higher rate of tissue-expander exchange due to complication, the rates of other complications and surgeries across groups were equivalent.
- These results should allow both plastic surgeons and mastectomy patients to be cautiously optimistic when pursuing implant-based breast reconstruction concurrently with cancer treatments.

Figure 1. Percentages of patients with specific complications and undergoing different types of surgeries.

| Group         | Infection requiring IV antibiotics | Necrosis requiring operation | TE exchange for new TE | At least one complication-<br>related surgery before<br>implant placement | At least one complication-<br>related surgery after<br>implant placement | At least one revision surgery |
|---------------|------------------------------------|------------------------------|------------------------|---|--|-------------------------------|
| 1             | 5.7                                | 4.3                          | 1.4*                   | 20.9  | 5.0  | 46.8                          |
| 2             | 6.3                                | 12.5                         | 3.1                    | 15.6  | 3.1  | 53.1                          |
| 3             | 13.3                               | 0                            | 2.3                    | 20.5  | 2.3  | 40.9                          |
| 4             | 0                                  | 0                            | 7.1                    | 7.1   | 0  | 42.9                          |
| 5             | 0                                  | 5.9                          | 0                      | 41.2  | 5.9  | 52.9                          |
| 6             | 15.4                               | 15.4                         | 15.4*                  | 38.5  | 0  | 53.9                          |
| 7             | 8.3                                | 9                            | 0                      | 33.3  | 0  | 41.7                          |
| F; p (ANOVA)  | 1.2; .32                           | 1.9; .09                     | 1.9; .08               | 1.6; .16  | .4; .85  | .3; .94                       |
| p (Tukey HSD) | N/A                                | N/A                          | *p=.04                 | N/A   | N/A  | N/A                           |