EVALUATION OF A NEW AXILLAR MANAGEMENT PROTOCOL FOR EARLY STAGE BREAST CANCER IN MASTOLOGY UNIT OF THE HOSPITAL DE CLÍNICAS DE PORTO ALEGRE

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Purpose

The primary end point was to determine the profile of the patients meeting the inclusion criteria.
A secondary end point was to evaluate possible factors associated with the presence of macrometastases in sentinel lymph node (SLN) in this sample.

Methods

This was a cohort, retrospective trial, enrolling patients from March 2015 to December 2016.
Inclusion criteria: women with histologically confirmed invasive breast carcinoma clinically ≤ 3cm, no palpable adenopathy, treated with lumpectomy, without lymph node metastases or with presence of metastases in ≤ two SLNs. Patients were ineligible if they had received neoadjuvant therapy and those with multicentric disease.
The data were analyzed by the SPSS software 18.0, using The T-test and the Chi-squared test.

Summary of Results

A number of 102 patients were enrolled. The characteristics of the group were: mean age 57.2 ±10.6 years; mean of tumor size 15.9 ± 6.6mm; 79% was stage T1; 89% had positive estrogen receptor; 17% were HER 2 positive; 19% had presence of lymphovascular invasion (LVI); 70% had infiltrating ductal tumors. Adjuvant systemic therapy was delivered to 98 patients and only two women have not done radiotherapy. Macrometastases in SLNs were detected in 10 patients (10%). Comparing the groups with and without macrometastases in SLNs there was statistically significant difference between the groups referring to tumor size (p 0.001) and presence of LVI (p <0.001).

Conclusions

The management of the axilla in patients with early stage breast cancer submitted to conservative breast treatment in the Department of Mastology of HCPA is in accordance to the current evidence.
The factors associated to the presence of macrometastases in SLNs were tumor size and LVI.
In this sample the ALND and its morbidity have been avoided in 10% of the cases.

Table 1. Baseline Patient and Tumor Characteristics by Study Group

Characteristic	SLN With Macrometastases (n=10)	LS Without Macrometastases (n=92)	*P Value*
Age, mean ± DP, y	55.5 ±9.1	57.4 ±10.9	0.600
Tumor size, mean ± DP, mm	22.2±5.2	15.3 ±6.5	0.001
Patologic T stage			
T1	5(50)	76(83)	0.015
T2	5(50)	16(17)	
ER			
Positive	8(80)	83(90)	0.320
Negative	2(20)	9(10)	
PR			
Positive	10(100)	80(87)	0.224
Negative	0	12(13)	
HER 2			
Positive	2(20)	15(16)	0.766
Negative	8(80)	77(84)	
Ki67			
>14%	6(60)	58(63)	0.850
≤14%	4(40)	34(37)	
LVI			
Yes	8(80)	11(12)	<0.001
No	2(20)	80(88)	
Missing		1	
Nottingham Grading System			
Grade 1	2(20)	31(34)	0.426
Grade2	5(50)	47(51)	
Grade 3	3(30)	14(15)	
Tumor type			
Infiltrating ductal	8(80)	63(68)	0.585
Infiltrating lobular	0	8(9)	
Other	2(20)	21(23)	

Figure 1. TNM Classification

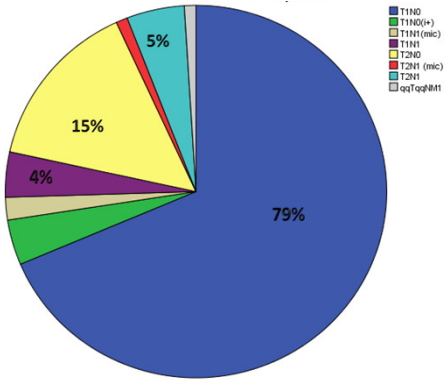
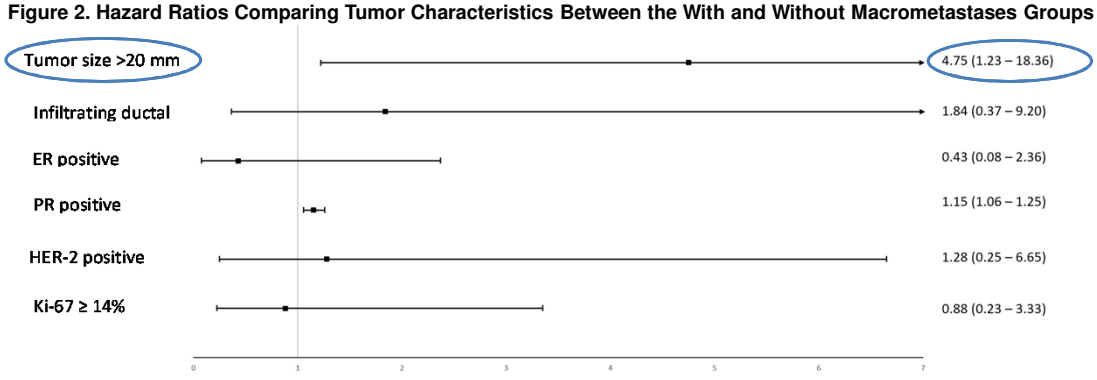


Figure 2. Hazard Ratios Comparing Tumor Characteristics Between the With and Without Macrometastases Groups



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Key words: sentinel lymph node; breast cancer; axillary dissection

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