



CONFERENCE ABSTRACT

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Do we need to stage the axilla prior to neo adjuvant chemo? Analysis of clinically and radiologically negative (n0) breast cancer patients from a single centre

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Abstract: Background: HStaging the axilla *via* Sentinel Node biopsy (SLNBx) is a standard technique for clinically and radiologically negative patients. The timing to do the SLNBx before or after Neo Adj Chemo (NAC) is controversial. The aim of the study is to see the outcomes of SLNBx in our patients who underwent NAC in clinically and radiological negative axilla. **Methods:** Retrospective analysis of all patients from 2009–2013 were included with clinically and radiologically node negative axilla, requiring NAC to downstage their breast disease. Patient's data was retrieved *via* hospital information System. Patient's record was followed up for three years to see for axillary recurrence Data was analyzed on SPSS V 19. **Results:** A total of 560 patients were selected for the study and 34 were excluded so a total of 523 patients data was analyzed. All patients underwent SLNBx and 64.4% (334) were found to be negative on staging whereas only 35.5% (187) were found to be negative. All patients were then given NAC; patients who were SLNBx +ve were subjected to ALND in addition to the definitive surgery to the breast. Out of 187 patients who underwent NAC 72.2% (135) turned out to be node negative (pN0), 19.3% (36) were found to have pN1, 8.1% (15) were pN2 and 0.5% (1) was found to be pN3. Patients who were SLNBx negative underwent definitive surgery to the breast and followed up for three years, only 0.6% (2) developed axillary nodal recurrence. **Conclusions:** It might be safe to do the SLNBx after NAC to avoid the delay in chemo and avoiding unnecessary ALNDs and morbidity associated with it. SLNBx after NAC is effective way of dealing with axillary staging and treatment. We recommend SLNBx after NAC at the time of definitive surgery in order to prevent another general anesthesia and utilization of resources. By following this protocol, we can send the patients early for chemotherapy without any delay. Randomized controlled trials are required to validate the results and to establish guidelines in this regard.

Keywords: Staging sentinel; breast carcinoma

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