

Prognostic Factors of Treatment Failure for Early Breast Cancer after Breast Conserving Surgery

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Abstract

Introduction: Breast cancer is the most common cancer in women in developed Western countries and is becoming even more significant in many developing countries. Breast conserving surgery (BCS) has become the gold standard for patients with early breast cancer (EBC) (Stage I, II) with an appropriate patient selection. Important risk factors for treatment failure, include margin status, age, tumour multicentricity and use of radiotherapy and adjuvant hormone therapy.

Aim: To establish the prognostic variables for ipsilateral breast tumour recurrence (IBTR) in EBC after BCS and the survival rate.

Materials and Methods: We analyzed 100 patients with EBC who underwent BCS. Data were analyzed for treatment failure, an analysis was performed by Chi-square (c2) test, Cox multivariate regression and Kaplan Maier for survival analysis.

Results: 100 female patients underwent BCS for EBC. There were 75% of patients above 40 years old. T2 tumours were observed in 87% of patients and 53% patients had nodal involvement. There was a pattern of recurrence of 14%; Using the multivariate analysis tumour grade and margin were correlated to local disease free survival. The 3 years local disease free survival and overall survival was of 86 % and 97% respectively.

Conclusion: Breast conservative surgery is a highly accepted surgery for early breast cancer with good result. Tumour grade and margin were correlated to local disease free survival.

Key words: early breast cancer, breast conserving surgery, ipsilateral breast tumour recurrence