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ASO AUTHOR REFLECTIONS

ASO Author Reflections: Surgical Treatment for Male Breast Cancer in the Modern Era

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PAST

Male breast cancer has often been an afterthought in the world of breast cancer research, which is not surprising as it constitutes < 1% of all new breast cancers.[1] Almost all of the original work looking at de-escalating local therapy, including the National Surgical Adjuvant Breast and Bowel Project (NSABP) B-06 study, excluded male participants, and, currently, the gold-standard surgical treatment recommendation for men is mastectomy.[2,3] In the current era, many men are considering breast-conserving therapy (BCT) for treatment; however, no one has directly compared this with mastectomy.

PRESENT

Due to the limited number of male breast cancer cases, this question has been unable to be prospectively examined to date. Therefore, we used the National Cancer Database (NCDB) to look retrospectively at a similar population to the female population used in the NSABP B-06 study (stage I or II breast cancer patients who underwent partial mastectomy, BCT, or mastectomy), as well as mastectomy with radiation, which was not included in their study. Our data showed that while most men underwent mastectomy, the gold standard, a substantial population underwent some form of breast conservation (12.4% BCT, 8.2% partial mastectomy alone). Using our model, after controlling for group differences, we found that BCT translated into an improved overall survival over partial mastectomy alone or mastectomy, for all groups.[4] We suggest BCT is a viable option and is possibly preferred to mastectomy in male breast cancer patients.

FUTURE

In this study, retrospective data from a large national cohort were examined to determine the viability of BCT for male breast cancer patients. Unlike prior studies in women, the study showed an improved survival for BCT. This difference from prior female data may be due to selection bias or, more likely, that male breast cancer is a unique entity. A prospective study is needed to validate the improved survival seen in this cohort of male breast cancer patients. Additionally, other studies have shown deceased male compliance with radiation therapy. Thus, further examination of the utilization of radiation therapy needs to be explored as this is a vital piece of BCT for men, and partial mastectomies alone do not improve survival.[5]

DISCLOSURE Candice A.M. Sauder has no conflicts of interest to disclose.

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