



## Letter to the Editor

## Is oncoplastic breast surgery truly associated with a lower rate of surgical site complications compared to standard breast conserving surgery?



To the Editor,

I read with interest the recently published article by Dr Crown and colleagues in this journal.<sup>1</sup> Having performed a comparative study over two different treatment epochs, the authors concluded that there was a lower incidence of surgical site complications in their institution when oncoplastic breast conserving procedures were performed by surgeons specialising in breast surgery. There were fewer complications for women who underwent oncoplastic surgery (8.0%) compared with those who had standard breast conserving surgery (17.9%), hence, the authors recommended the use of oncoplastic surgery to patients undergoing breast conservation treatment regardless of medical co-morbidities. The range of complications after oncoplastic breast surgery (OBS) have been reported in other studies to lie between 7.4% and 37.5%.<sup>2–4</sup> It is therefore laudable that Dr Crown's and colleagues' complications for OBS fall in the lower end of this scale. On the other hand, women undergoing standard breast conserving surgery (sBCS) from January 2009 to December 2010 in this series were found to have a complication rate of 17.9%. This is higher than complication rates following lumpectomy, or partial mastectomy with sentinel lymph node biopsy, drawn from the National Surgical Quality Improvement Program database for the years 2009–2012, which stood at 1.74% for that period.<sup>5</sup> This begs the question as to whether the title and conclusion of the article by Crown et al. appropriately reflects the true comparative status of surgical site complications between sBCS and OBS. Have any biases been identified for such disparity between institutional and national complication rates? Are there technical elements at play for sBCS, which additional training with OBS might have overcome? Would this have confounded the analysis if it was not taken into account?

Complication rates following OBS are not consistent across all

reported series.<sup>3,4</sup> One study, with a complication rate of 37.5%, reported a delay of adjuvant radiotherapy for a small proportion of patients as a result.<sup>4</sup> A group of surgeons from Italy, trained in breast and plastic procedures, recently opined that perhaps the time is ripe for de-escalating OBS, and increasing sBCS use, citing reduced operating time, reduced antibiotic use and quicker recovery as justification for this proposal.<sup>6</sup> Further research is warranted to elucidate the reason for these divergent views among breast surgical oncologists who perform OBS.

### References

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