

Sentinel node biopsy supported for early-stage breast cancer

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By: Reuters Health

NEW YORK (Reuters Health), May 3 - Sentinel lymph node biopsy (SLNB) should be the treatment of choice for staging the axilla in patients with early-stage breast cancer and clinically negative nodes, new research suggests.



Compared with standard axillary dissection, SLNB does not compromise disease outcomes and is less likely to cause lymphedema and sensory loss in the arm and impair quality of life, according to the report in the *Journal of the National Cancer Institute* for May 3.

The findings are based on a multicenter trial of 1,031 patients who were randomized to undergo SLNB or standard axillary surgery. All of the subjects had clinically node-negative invasive breast cancer.

SLNB patients with positive results underwent delayed axillary clearance or received radiotherapy, lead author Dr. Robert E. Mansel, from Cardiff University in the U.K., and colleagues note.

The rate of lymphedema in the SLNB group was 5%, much lower than the 13% rate seen in the control group. Similarly, sensory loss was also less common in the SLNB group: 11% versus 31%.

Patients treated with SLNB were less likely to require a drain, had shorter hospital stays, and resumed normal activities faster than patients treated with standard surgery ($p < 0.001$ for all). In addition, SLNB was associated with a near-significant reduction in operative time.

SLNB-treated patients had higher quality of life and arm functioning scores than did control patients, with no apparent increase in anxiety from possible missed disease.

"Given all the information provided, it seems likely that (Dr. Mansel's team is) correct in concluding that patients obtain benefit from avoiding axillary dissection," Dr. Joseph Pater and Dr. Wendy Parulekar, from Queen's University in Kingston, Ontario, Canada, comment in a related editorial.

"However, results of trials with health-related quality of life outcomes cannot always be interpreted unambiguously, and more effort is needed to accomplish the goal of having patient-reported outcomes routinely and reliably incorporated into cancer trials," they emphasize.

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