

Breast Cancer Surgery under Local Anaesthesia in a select cohort of patients with comorbidities

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Introduction

- Traditionally, the majority of surgeries for breast cancer patients are conducted under general anaesthesia to accommodate procedures like frozen section biopsies and to ensure patient comfort throughout the procedure
- Recent interest in the tumoricidal effects of local anaesthesia has sparked consideration for performing these surgeries under LA
- Axillary clearance can be challenging especially in terms of manipulating the patient's arm for optimal access and visibility
- Our report aims to contribute insights and outcomes from our use of local anaesthesia in these surgical procedures

Materials and Methods

- We reviewed our prospectively maintained records, of a single surgeon, of patients undergoing surgery for breast cancer under LA, from 2018 to 2023

Perioperative management

- Adequate Pre-operative counselling
- Pre-Anaesthesia check up
- General anaesthesia standby
- Intraoperative monitoring- pulse oximetry, heart rate and blood pressure
- Minimum retraction and manipulation

Local Anaesthesia

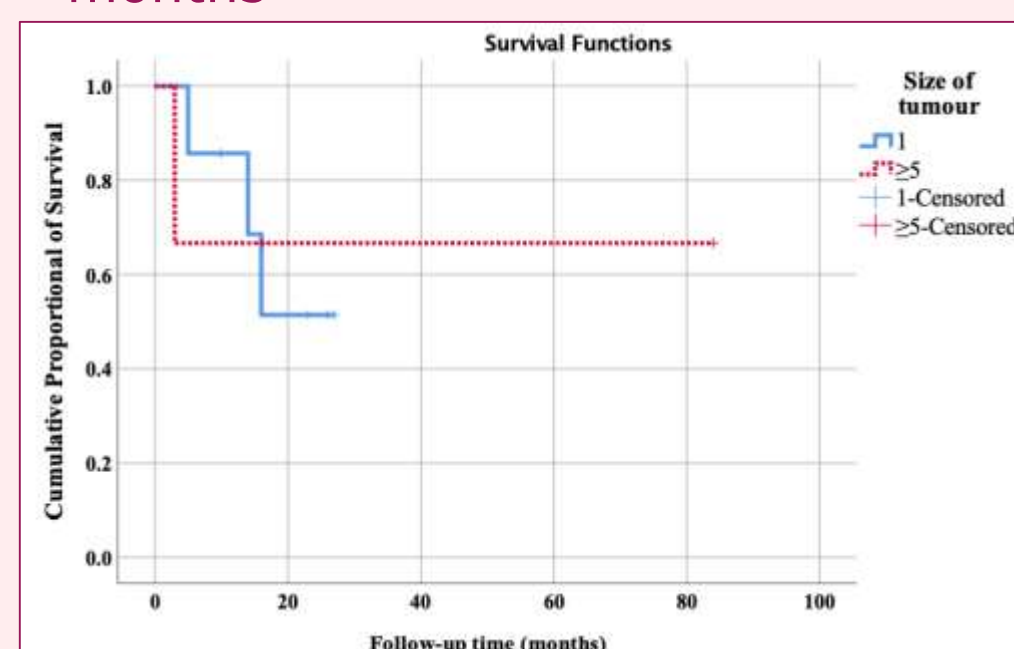


- 1% Xylocaine used as the LA of choice
- LA injected under direct vision to the line of incision and sub dermal layer of skin using 25G needle
- LA infiltrated around the lump under USG guidance

Results

Age (years)	Comorbidities	Tumour size (cm)	Survival (months)
72	Dermatomyositis+ Hypothyroidism	4.5	3
71	DM + HTN + CKD + Hypothyroidism	1.5	16
71	RHD + AF	1.5	10
69	HOCM + DM	2.0	23
76	COPD + HTN	1.8	5
84	Hypothyroidism + COPD	2.5	26
72	Parkinson Disease + HTN	3.0	27
66	HTN + COPD + Morbid Obesity	10.0	84
81	HTN + DM	1.2	14
70	CAD	8.5	16

- Total number of patients: 10
- Mean Age: 73.2 ± 5.5 years
- Mean tumour size: 3.6 ± 2.2 cm
- Mean operating time: 78 ± 23 mins
- Mean hospital stay: 3.1 ± 1.2 days
- Mean survival time: 22.4 ± 23.2 months



Discussion

- As breast cancer treatments continue to evolve, so must the nature in which they can be delivered to an aging population
- Successful completion of surgeries under LA highlights its potential as a valuable option in clinical practice
- Early post operative recovery
- Lesser pulmonary complications and venous thromboembolic disease
- Decreased hospital stay and costs

Conclusion

- Awake, local anaesthetic breast surgery can be performed safely and effectively in patients at risk for general anaesthesia
- Ongoing patient evaluation and refinement of techniques for administering local anaesthesia in breast surgery are crucial for optimizing outcomes and patient satisfaction

References

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For more information

