

암재활

게시일시 및 장소 : 10 월 18 일(금) 08:30-12:20 Room G(3F)

질의응답 일시 및 장소 : 10 월 18 일(금) 10:00-10:45 Room G(3F)

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Prognosis of BCRL after ALND and RT with good lymphoscintigraphic finding.

Ah Ran Kim^{1†}, Ji Young Lim¹, Yoon Kim¹, Ji Hye Hwang¹

Samsung Medical Center, Department of Physical & Rehabilitation Medicine¹

OBJECTIVE

The aim of this retrospective observational study is to investigate the prognosis of breast cancer-related lymphedema (BCRL) after axillary lymph nodes dissection (ALND) and radiation therapy (RT) with good lymphoscintigraphic finding.

SUBJECTS AND METHOD

The affected limbs of patients with BCRL after breast cancer treatment were measured initially and every 6 months with infrared optoelectronic volumetry. Among patients with BCRL, 37 patients with good lymphoscintigraphic finding with follow-up period of 1.5 years were recruited. The patients were divided into 4 groups based on the degree of initial lymphatic edema, and the serial volume changes were observed.

RESULTS

Patients with good lymphoscintigraphic finding were reviewed for their past therapeutic history. All patients underwent resection of more than 6 axillary lymph nodes by surgery. 43.2% had RT only in breast area, compared to 56.8% with extended RT field of breast, sternoclavikulomastoid, and neck area. The patients were divided in 4 groups according to the initial degree of lymphatic edema (volumetry,%). The result was as follows: <5%: 29.7%, 5-10%: 51.4%, 10% -20%:18.9%. These patients received proper lymphedema therapy and were followed up for at least 1.5 years. In their serial volume change, 64.9% maintained or improved the degree of lymphedema, while 35.1% showed worsened results.

CONCLUSION

In conclusion, patients with BCRL and good lymphoscintigraphic finding are less likely to have severe lymphatic edema in spite of increased dissection of lymph nodes and large RT field. Mild initial lymphedema patients tend to present maintenance or improvement after 1.5 years of follow-up.

Table 1. The characteristics of patients after ALND and RT with good lymphoscintigraphic finding.

Average age (yr)	50.92 (38-67)
Type of mastectomy + ALND	
BCS	18 (48.6%)
MRM	10 (27.0%)
TM	9 (24.3%)
Average number of ALND	20.03 (6-34)
Type of CTx. + RT	
Neo adjuvant CTx.	7 (18.9%)
Adjuvant CTx.	27 (73.0%)
Neo adjuvant CTx. + Adjuvant CTx.	3 (8.1%)
RTx. field	
No RTx	7 (18.9)
Breast	9 (24.3%)
Breast +SC or Breast +SC+Neck area	21 (56.8%)

Table 2. The characteristics of lymphedema

Onset (month) : period after surgery to occurring the secondary lymphedema	21.38 (Max:160, Min:4)
Side of lymphedema	
Right	17 (45.9%)
Left	20 (54.1%)
Initial volume	
<5%	11 (29.7%)
5%< <10%	19 (51.4%)
10%< <20%	7 (18.9%)
>20%	0
Serial volume changes	
Maintenance or improvement	24 (64.9%)
Aggravation	13 (35.1%)
Lymphedema therapy	
1st line Tx. (exercise, MLD, education, compression stocking)	19 (51.4%)
2nd line Tx. (1st line Tx. + CDT)	18 (48.6%)

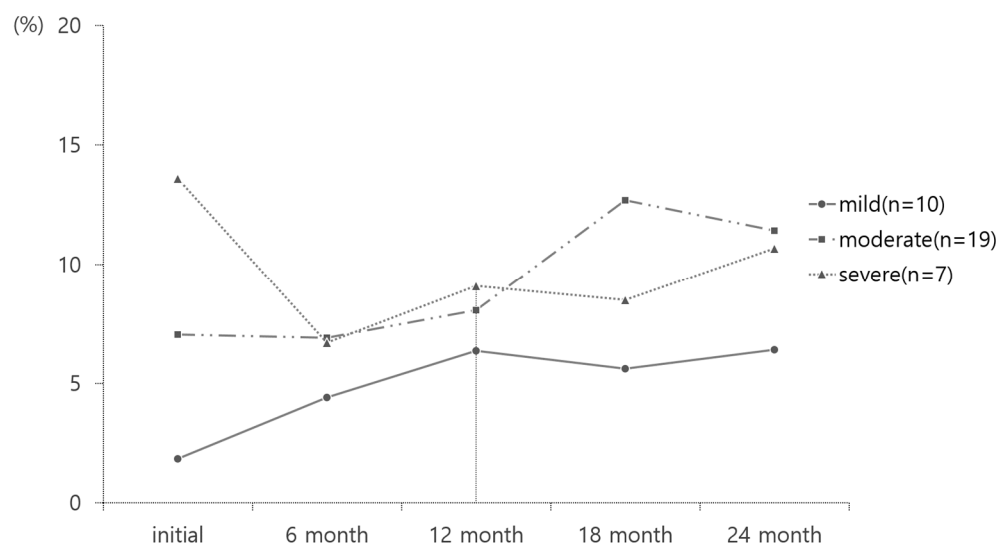


Fig 1. The serial volume changes