



## RISKS & COMPLICATIONS OF ONCOPLASTIC BREAST SURGERY

### General Risks of Surgery

Anaesthetic risks  
Discomfort / pain – acute/chronic  
Bruising / Haematoma (requiring return to theatre)  
Infection  
Wound Healing (impaired, delayed)  
DVT/PE

### Specific Risks for Standard Breast Procedures

- Breast Biopsy/Wide Local Excision
  - Scars
  - Deformity/Asymmetry
  - Need for further surgery
  - Impact of future radiotherapy
- Localised Wide Local Excision
  - As for WLE
  - Use of Isotope (safety and half-life explanation)
- Sentinel Lymph Node Biopsy & Ax Node Sampling
  - Impaired arm/shoulder movement
  - ICBn damage
  - Lymphoedema
  - Seroma
  - Blue Dye allergy/anaphylaxis (quote %)
  - Possible need for further surgery (clearance)
- Axillary Node Clearance
  - Impaired arm/shoulder movement
  - ICBn damage
  - Lymphoedema
  - Use of Drains
  - Seroma
- Mastectomy
  - Scars
  - Deformity
  - Dog-ears
  - Wound healing problems
  - Impact of radiotherapy
  - Use of Drains
  - Seroma



## RISKS & COMPLICATIONS OF ONCOPLASTIC BREAST SURGERY

### Specific Risks for Oncoplastic & Reconstructive Procedures

- For **all** procedures:
  - Type and extent of scars
  - “.... .unable to guarantee symmetry of shape, volume”*
  - “...unable to guarantee will not require further surgery”*
- **WLE with Breast Reshaping (volume displacement)**
  - Palpable irregularity of repaired gland
  - Type and extent of scars
  - Skin envelope necrosis
  - Fat necrosis
  - Need for further surgery
  - Unpredictable effects of XRT
- **Therapeutic Mastopexy/Mammoplasty**
  - Type and extent of scars
  - Skin envelope necrosis
  - Fat necrosis
  - Sub-optimal healing (T-junction breakdown)
  - Need for re-excision/mastectomy
  - Unpredictable effects of XRT
- **Skin Sparing Mastectomy (immediate reconstruction)**
  - Skin envelope necrosis (smokers, low BMI)
- **One Stage Expander/ Implant**
  - Implant palpability, rippling, rotation
  - Deep implant infection requiring explantation for 3 months
  - Capsular contracture
  - Inflation port – palpability, position, malfunction
- **Two-stage Expander then Implant**
  - As for one stage but need for hyper-expansion
  - Need for second op understood



## RISKS & COMPLICATIONS OF ONCOPLASTIC BREAST SURGERY

- Latissimus Dorsi (autologous)

**Donor site morbidity:**

Extent of scar  
Back contour uneven (fat harvest)  
Skin necrosis  
Reduced shoulder strength and function  
Persistent seroma

**Flap:**

Partial or full flap failure (<2%)  
Twitching of flap  
Flap atrophy (volume loss)  
Fat necrosis (lumpiness, vol loss)

- Latissimus Dorsi (with implant)

As for autologous LD but with additional implant risks:

palpability, rippling, rotation, deep implant infection requiring explantation for 3 months, capsular contracture.

- Pedicled TRAM Flap

**Donor site morbidity:**

Extent of scar  
Wound healing problems incl dehiscence  
Reduced abdominal wall strength and function  
Mesh repair – bulge, risk of incisional hernia

**Flap:**

Partial or full flap failure (~ 5%)  
Flap atrophy (volume loss)  
Fat necrosis (lumpiness, vol loss)

- Nipple Reconstruction

Partial necrosis (<5%)  
Full necrosis – nipple loss (<1%)  
Loss of projection over time



**RISKS & COMPLICATIONS  
OF ONCOPLASTIC BREAST  
SURGERY**

- **Lipomodelling/ Fat Grafting**

**Donor Site:**

Bruising/Haematoma  
Discomfort – acute/chronic  
Numbness  
Uneven contours  
Ridges  
Inadvertant Internal Injury (theoretical only)

**Recipient Breast:**

Infection  
Swelling  
Bruising  
Lumpiness / Fat necrosis/ Cyst Formation  
Uneven contours  
If previous cancer (theoretical risk of increased local recurrence – unproven in largest European Centre Series – Lyon, Milan)  
Changes to future mammography (theoretical increased need for further biopsies – not proven)

**Note:**

*This information is for general guidance only and represents the views and opinions of Mr Iain M Brown Consultant Oncoplastic Breast Surgeon. It should in no way be regarded as either definitive or representing the views of any other surgeon, doctor or institution.*