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Role of post mastectomy radiotherapy in T1,T2 lesions with 1-3 positive axillary lymph nodes- A retrospective study of 101 cases

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Introduction: Post mastectomy radiotherapy (PMRT) reduces loco-regional recurrence (LRR) and improves overall survival, there is international consensus to recommend PMRT for patients with tumour size more than 5 cm (T3), tumour invasion of the skin, pectoral muscle or chest wall (T4) and patients with >4 positive lymph nodes (LN). However, the role of PMRT for patients with T1, T2 disease with 1–3 positive LN is still controversial. e side e ects of radiotherapy and its associated morbidity have to be considered in the risk bene t ratio, thus di cult to arrive at consensus in early breast cancer. In a developing country like India, factors such as patient education, level of awareness, nancial aspect, long term follow up, limitation of resources have to be balanced and tailored according to the indication and need of the patient.

**Objectives:** e objective of this study is to empirically explore whether it is advisable to carry out radiation when there are 1-3 nodes and whether perinodal extention in this subgroup is an important parameter to consider for radiotherapy.

Material and Methods: We have collected data a er approval from our institutional board review committee and analysed case les of patients who presented and were treated at our governmental tertiary referral centre from a period between 2012-2015. Of the 691 patients who underwent mastectomy, we short listed 101 cases for our study who full led our basic inclusion criteria of T1,2