

# **BREAST SURGERY AND EVOLVING CONCEPTS: BREAST CONSERVATION, ONCOPLASTIC SURGERY, SENTINEL NODE BIOPSY AND INTRAOPERATIVE RADIOTHERAPY**

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**T**he saga of breast conservation, started by Umberto Veronesi in 1968 (QUART) and then ratified by NSABP-06, has changed over the decades not only the paradigm of managing early breast cancer but also recruited conservative treatments of the axilla and a quick and minimalistic approach to radiotherapy. Various new indications for conservation including multifocality and centrality as well as the development of oncoplastic surgery are changing many concepts. The experience in Netherlands with multifocal and multicentric disease may well cause another shift in paradigm of disease management. The European Academy for Breast Surgery has now come forth with six established oncoplastic techniques which are simple and allow adequate margins on resection as well as ensuring good cosmetic outcome. Sentinel node biopsy, a currently established approach in a clinically negative axilla in early breast cancer is exploring new boundaries in the setting of neoadjuvant chemotherapy as well albeit so far with mixed results. However, a recent study by Milan has thrown up interesting observations in the way results are and should be interpreted for false negativity in these patients. The latest data from the intraoperative trials (TARGIT & ELIOT) are extremely encouraging and have increased the scope of conservation as well as reducing costs and morbidity associated with other forms of radiation.

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