

Outcomes of Oncoplastic and Reconstructive Breast Surgery and Their Impact on Timely Initiation of Adjuvant Therapy

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Preliminary institutional experience | August 2024-July 2026

BACKGROUND

Oncoplastic and reconstructive techniques extend breast conservation and restore contour after cancer surgery. Complications may postpone adjuvant treatment.

OBJECTIVE

To describe procedures and major complications, and assess whether complications or further surgery delayed chemotherapy or radiotherapy.

METHODS

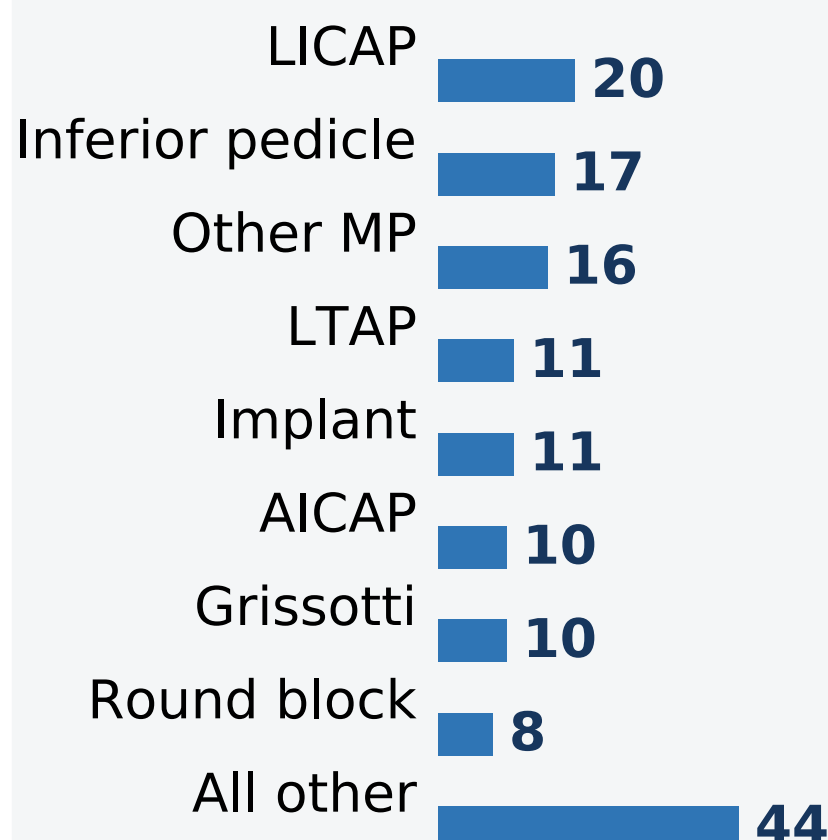
All 680 breast operations at SKMCH&RC Peshawar from August 2024 to July 2026 were reviewed.

- The register provided the denominator; the reconstruction field identified procedures.
- Major events: flap failure or infected implant removal.
- Oncology records will provide treatment dates.

147 / 680
oncoplastic or
reconstructive procedures

21.6%
of all breast operations

PROCEDURE MIX



ADJUVANT TIMING

Treatment start dates were not consistently available in the surgical workbook. Oncology-record linkage is required before estimating delay.

3

flap failures

2

infected implants
removed

3.4%

major reconstructive
failure (5/147)

INTERPRETATION

Major reconstructive failure was uncommon, occurring after 5 of 147 procedures. Failure does not prove treatment delay; surgery, wound recovery, reoperation and treatment dates must be linked.

CONCLUSION

Oncoplastic and reconstructive techniques were used in 21.6% of breast operations, with a 3.4% major failure rate. Final record linkage will determine effects on adjuvant-treatment timing.

Selected references

1. Gilmour A, et al. Eur J Surg Oncol. 2021;47:2272-2285.
2. O'Connell RL, et al. Br J Cancer. 2019;120:883-895.