

RESULTS OF USING OF OCTREATIDE ON CONTROL OF LYMPHORRHEA AFTER MODIFIED RADICAL MASTECTOMY (MADDEN) IN BREAST CANCER PATIENTS

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Breast cancer remains the most common cancer diagnosed in women. Axillary lymph node dissection is necessary part of modified radical mastectomy (MRM). Lymphorrhea (LR) and seroma formation are disabling and serious complications of axillary lymphadenectomy.

Aim: The role of octreatide in control of post radical mastectomy (Madden) lymphorrhea will be assessed in this study.

Methods: 30 female patients with breast cancer of different stages after MRM, which were operated in SROD in 2013 year, were divided into two groups: the first (12) – was given octreatide 0.1 mg s/c for seven days, the other (18) – was the control. Both groups were evaluated for amount and duration of LR.

Results: A significant difference in the amount and duration of LR between two groups was observed ($P < 0.05$). In control group the mean duration of LR was 27.0 ± 1.4 days, the mean amount of LR in the first 7 days was 143 ± 2.1 ml per day. In the treatment group the mean amount of LR p.d. during first 7 days decreased to 103 ± 2.5 ml, and the mean duration of LR decreased to 13.2 ± 1.8 days.

Conclusion: Octreatide inhibit lymphatic production and could be used successfully for control of post MRM lymphorrhea.

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