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1110 – Epidemiological study on breast surgery procedures in oncological patients

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Introduction: Breast cancer is a significant public health issue, with high morbidity and mortality, therefore surgical procedures are fundamental in its treatment. In this context, the epidemiological analysis of these interventions allows the identification of patterns and trends, contributing to healthcare planning and the improvement of diagnostic and treatment strategies.

Methods: An ecological time-series study using data collected from the DATASUS secondary database, specifically from the Hospital Information System. The number of procedures was obtained through approved Hospital Admission Authorizations (HAA), including simple mastectomy (SMO), radical mastectomy with axillary lymphadenectomy (RMALO), and quadrantectomy (QDTO) in oncological patients, covering the period from 2017 to 2025, both nationwide and stratified by regions, without distinction of age group or sex.

Results: Among the procedures, a total of 11,225 SMO, 55,762 RMALO, and 64,044 QDTO were recorded. The first increased in 2018 (1,283), then declined, reaching its lowest value in 2021 (1,109), and subsequently rising again, peaking in 2025 (1,346). The second peaked in 2017 (7,225) and has since shown a continuous decline, reaching its lowest values in 2022 (5,697) and 2025 (5,698). The third showed periods of decline starting in 2017, reaching its lowest point in 2021 (5,527), followed by accelerated growth, peaking in 2024 (9,143). The Brazilian region with the highest number of procedures was the Southeast (50.23%), followed by the South (18.85%), Northeast (16.45%), Midwest (7.44%), and North (7.03%).

Conclusion: The decline in RMALO indicates progress in early diagnosis and a shift toward less radical interventions, as postoperative complications are more prevalent in more invasive and radical procedures. Thus, advances in screening and treatment technologies favor the increase of less invasive approaches, with QDTO providing a better prognosis.

Ethics: Public data.

Keywords: breast cancer; breast surgery; axillary surgery; surgical procedures; epidemiological profile.