https://doi.org/10.29289/259453942024V34S1020

Forequarter amputation in patients with breast cancer: a systematic literature review

Flávia Cardoso Franca¹, René Aloisio da Costa Vieira^{1,2,3}, Idam de Oliveira-Junior²

¹Botucatu Faculty of Medicine.

Objective: The objective of this stusy was to carry out a systematic review of the literature, evaluating the impact of forequarter amputation in locoregional control and survival of patients with breast cancer. **Methodology:** Based on resolution 466/12, the Research Ethics Committee evaluation was not necessary. Systematic literature review using eight databases. The PICOS and PRISMA methodologies were used. Two evaluators selected the articles, and the data were summarized in a standardized form. **Results:** Of 1326 articles initially selected on December 31, 2022, 55 articles served as the basis for the review, and 104 cases were observed. The indication 78 (75.0%) were primary tumors and 7 (6.7%) were local recurrences. The main histological type of the primary tumor was invasive ductal carcinoma. The main indication was due to Stewart-Treves syndrome (43.3%), followed by local recurrence of breast cancer (23.1%), radio-induced tumor (14.4%), and locally advanced primary (5.8%). Surgery was considered potentially curative in 50.0%, palliative in 31.7%, and not performed in 2.9%. In patients where the complication rate was reported, it was around 27.3%, the main ones being necrosis, pleural effusion, dehiscence, and infection, with no mortality observed. When evaluating well-being (n=22), all reported improvement in this aspect. In 71 patients, local recurrence was evaluated, being in the order of 32.4%. In 89 patients, it was possible to assess survival. The overall actuarial survival at 24, 36, and 60 months was 37.1%, 31.6%, and 28.0%, respectively. The type of surgery had an impact on survival (p=0.002), 47.2% of patients undergoing curative surgery were alive at 60 months, and 15.3% of patients undergoing palliative surgery were alive at 24 months. **Conclusion:** In breast cancer, forequarter amputation is associated with high morbidity and absence of mortality, allowing a high rate of local control and pain control. When performed on a curative basis, it allows a high survival rate.

Keywords: breast neoplasms, disarticulation, stewart treves syndrome, surgical amputation, forequarter amputation.

²Barretos Cancer Hospital.

³Muriaé Cancer Hospital.