

# **Lumpectomy/Mastectomy Comparison**

## **Male Patient**

If your breast and tumor are within certain size limits, your surgeon may offer you the option of a lumpectomy instead of a mastectomy. Ask your surgeon if there are any additional variables in your surgical decision that may be added to the list below.

Ninety percent of male breast cancer occurs in the ducts under the nipple/areola complex. The male breast ducts lie very close to the chest wall, breast skin and nipple, which increases the potential for local spread and involvement of the surrounding tissues. This limits lumpectomy as an option for many male patients.

If you do have the option of choosing either a lumpectomy or a mastectomy, the decision can be very difficult. It needs to be a decision you make in consultation with your physicians. Remember, the option to choose is not available for some types of cancer but is available to a patient who has a tumor within certain size limits in comparison to the size of the breast. Your surgeon will share with you the criteria for this decision. It is imperative that you feel comfortable with the decision. Studies document that a lumpectomy, even if there is local recurrence, does not negatively affect survival rate in patients from cancer. The inconvenience is from the possible necessity for a second surgery.

### **Lumpectomy**

#### **Factors That May Disqualify You For a Lumpectomy:**

- Cancer involves the nipple, skin or chest wall ☒ Prior radiation therapy to the chest wall
- Positive BRCA1 or BRCA2 mutation
- Inflammatory breast cancer
- Restrictions on travel or transportation to clinic for radiation therapy

#### **Advantages of Lumpectomy:**

- Saves a large portion of the breast, usually the nipple and areola
- Rarely requires reconstruction to restore symmetry
- Shortens surgery recovery time; usually several weeks
- Shortens hospitalization time; may be performed as outpatient
- Psychologically, surgery may be easier to accept unless the fear of monitoring the remaining breast tissue is too overwhelming

#### **Disadvantages of Lumpectomy:**

- Possible risk of cancer recurrence in remaining breast tissue
- Several weeks, usually up to six weeks of radiation therapy to the remaining breast tissue
- Changes in texture, color and sensation of feeling to the breast from radiation
- Decrease in size of remaining breast tissues after swelling decreases following radiation treatments
- Examining remaining breast tissue to monitor for recurrence becomes more difficult because of increased nodularity (lumpiness) from radiation therapy

- Possibility of future second lumpectomy or mastectomy if recurrence in breast

## **Mastectomy**

### **Advantages of Mastectomy:**

- Removes approximately 95 percent of all the breast gland, includes the nipple and areola, thus reducing local recurrence to the lowest degree
- Reconstruction of the breast is available at the time of surgery or years later

### **Disadvantages of Mastectomy:**

- Body image changed because of removal of breast
- Chest not symmetrical without reconstruction
- Recovery time slightly longer than lumpectomy patients

If you are having problems making your decision, you may wish to speak with a patient who has had the procedure. Ask your healthcare provider if there is someone who will be willing to talk with you. Your local American Cancer Society's Reach to Recovery program coordinator can provide you with the name of a volunteer who will be willing to share her experience of having either a lumpectomy or a mastectomy.

### **Helpful Consultations:**

- **If you are considering a lumpectomy**, it is helpful to have a consultation with a radiation oncologist to discuss radiation treatments. Often, this consultation will give you additional insight to make an informed decision.
- **If you are considering mastectomy**, a consultation with a plastic surgeon to discuss reconstructive options will give you additional insight.