

## BÖLÜM 9

# MEME CERRAHİSİ SONRASI KOMPLİKASYON YÖNETİMİ

Hüseyin KILAVUZ<sup>1</sup>

### GİRİŞ

Meme kanseri, dünya çapında kadınlar arasında en sık görülen malignitedir ve kadınlarda kansere bağlı ölümlerin yaklaşık %15'inden sorumludur (1). Meme kanserinde erken tanı ve etkin tedavi yöntemleri ile sağkalım süreleri artmaktadır. Bu durum meme kanseri cerrahilerine bağlı komplikasyonların azaltılması ve yaşam kalitesinin artırılmasını gündeme getirmiştir (2).

Meme kanserinin erken tanı ve tedavisi, genetik alt yapısı, tedavi sonrası komplikasyonları, bu komplikasyonları azaltmaya ve tedavi etmeye yönelik çok sayıda araştırma yapılmaktadır. Bu bölümde, meme kanserine yönelik uygulanan cerrahi prosedürlere ait postoperatif süreçte yaşanabilecek komplikasyonlar ve bu komplikasyonların yönetimine ait güncel yaklaşımlar ele alınmaktadır.

### Meme Biyopsilerine Ait Komplikasyonlar

Memede ultrasonografi eşliğinde tru-cut biyopsi yaygın kullanılan hızlı ve konforlu bir yöntemdir. Meme biyopsilerinde 14–18 gauge iğneler kullanılmakla birlikte özellikle 14-gauge iğneler tercih edilmektedir. Önerilen örnekleme sayısı ortalama beştir (3). Tru-cut biyopside karşılaşılan komplikasyonlar arasında; lokal anestezi komplikasyonları, alerjik reaksiyonlar (Toksosite, lokal alerjik reaksiyonlar, anafilaktik şok), enfeksiyon, abse, hematoma, anevrizma ve anksiyete gibi sos-

<sup>1</sup> Uzm. Dr., Başakşehir Çam ve Sakura Şehir Hastanesi, Genel Cerrahi Kliniği,  
drhuseyinkilavuz@gmail.com

## Mondor Hastalığı

Mondor hastalığı (MH), cilt altında palpe edilebilen subkutan kordon benzeri endurasyonlarla oluşur. Genellikle MH, dört ile sekiz hafta içinde kendiliğinden düzelen, iyi huylu, kendi kendini sınırlayan bir hastalıktır (80). Meme kliniği raporlarında göğüs duvarındaki Mondor hastalığı tanısı için %0.07-0.96'lık bir insidans oranı gösterildi (81).

## SONUÇ

Meme kanserinin yüksek insidansı ve çeşitli meme kanser cerrahi tekniklerinin uygulanması nedeniyle meme cerrahisinin komplikasyonları iyi bilinmelidir. Meme cerrahisine ait komplikasyonların önlenmesi için alınacak tedbirler veya komplikasyonların erken saptanarak tedavi edilmesi olası morbiditelerinin önüne geçerek postoperatif tedavi sürecinin başarısına katkı sağlayacaktır.

## KAYNAKLAR

1. Bray F, Ferlay J, Soerjomataram I, Siegel RL, Torre LA, Jemal A. Global cancer statistics 2018: GLOBOCAN estimates of incidence and mortality worldwide for 36 cancers in 185 countries. *CA Cancer J Clin*. 2018;68(6):394–424. doi: 10.3322/caac.21492.
2. Albert US, Koller M, Kopp I, Lorenz W, Schulz KD, Wagner U. Early self reported impairments in arm functioning of primary breast cancer patients predict late side effects of axillary lymph node dissection: results from a population based cohort study. *Breast cancer Res Treat* 2006;100:285-292. (PMID: 16710790)
3. Erdoğan E., Ultrason Eşliğinde Meme Tru-cut Biyopsi Komplikasyonları ve Diğer Biyopsi Yöntemleri ile Karşılaştırılması. *Medical Journal of Mugla Sitki Kocman University* 2018;5(1):13-16
4. Yeniçeri Ö, Özcan Ö, Çullu N, Deveer M. The Benefit of TruCut Biopsy in Breast Masses. *J Harran Uni Med Faculty*. 2015;12:73-77.
5. Catani JH, Matsumoto R, Horigome F, Tucunduva T, Costenaro M, Barros N. A pictorial review of breast biopsy complications. *ECR*. 2017. C-2054 ;1-12.
6. Leng Leng Young Lin, Yiming Gao, Alana A. Lewin, Hildegard K. Toth, Samantha L. Heller, and Linda Moy. Overstated Harms of Breast Cancer Screening? A Large Outcomes Analysis of Complications Associated With 9-Gauge Stereotactic Vacuum-Assisted Breast Biopsy. *American Journal of Roentgenology* 2019 212:4, 925-932
7. Doğan L., Karaman N., Özasan C., Atalay C., Altınok M. Surgical Breast Biopsies and Complications: Is There an Effect on Future Treatments?. *Acta Oncologica Turcica* 2009;42:45-49
8. ReyJE, Gardner SM, Cushing RD. Determinants of surgical site infection after breast biopsy. *Am J Infect Control* 2005; 3:126-9.
9. Penel N, Yazdanpanah Y, Chauvet MP, et al. Prevention of surgical site infection after breast cancer surgery by targeted prophylaxis antibiotic in patients at high risk of surgical site infection. *J Surg Oncol* 2007;96:124-9.
10. Angelique F. Vitug, Lisa A. Newman, Complications in Breast Surgery. *Surg Clin N Am* 87 (2007) 431–451
11. Friis E, Horby J, Sorensen LT, et al. Thromboembolic prophylaxis as a risk factor for postoperative complications after breast cancer surgery. *World J Surg* 2004; 28(6):540–3

12. Hergovich N, Aigner M, Eichler HG, Entlicher J, Drucker C, Jilma B: Paroxetine decreases platelet serotonin storage and platelet function in human beings. *Clin Pharmacol Ther.* 2000, 68: 435-442. 10.1067/mcp.2000.110456.
13. Iheoma Y, Nwaogu, Kerry Bommarito, Margaret A. Olsen, Julie A. Margenthaler, Economic impact of bleeding complications after mastectomy, *Journal of Surgical Research*, Volume 199, Issue 1, 2015, Pages 77-83, ISSN 0022-4804, <https://doi.org/10.1016/j.jss.2015.03.084>.
14. Robertson S, Jeevaratnam J, Agrawal A, et al. Mastectomy skin flap necrosis: challenges and solutions. *Breast Cancer Targets Ther* 2017;9:141-52
15. Prudencio RMA, Campos FSM, Loyola ABAT, Archangelo Junior I, Novo NF, Ferreira LM, Veiga DF. Antibiotic prophylaxis in breast cancer surgery. A randomized controlled trial. *Acta Cir Bras.* 2020 Sep 30;35(9):e202000907. doi: 10.1590/s0102-86502020009000007. PMID: 33027362; PMCID: PMC7531055.
16. Edwards BL, Stukenborg GJ, Brenin DR, Schroen AT. Use of prophylactic postoperative antibiotics during surgical drain presence following mastectomy. *Ann Surg Oncol.* 2014 Oct;21(10):3249-55. doi: 10.1245/s10434-014-3960-7. Epub 2014 Aug 20. PMID: 25138078; PMCID: PMC4386735.
17. [November 14, 2013];National Healthcare Safety Network (NHSN) Procedure-Associated (PA) module: surgical site infection (SSI) event. Centers for Disease Control and Prevention. 2013 <http://www.cdc.gov/nhsn/PDFs/pscManual/9pscSSCurrent.pdf>.
18. Olsen MA, Chu-Ongsakul S, Brandt KE, Dietz JR, Mayfield J, Fraser VJ. Hospital-Associated Costs Due to Surgical Site Infection After Breast Surgery. *Arch Surg.* 2008;143(1):53-60. doi:10.1001/archsurg.2007.11
19. Cohen JB, Carroll C, Tenenbaum MM, et al. Breast implant-associated infections: the role of the national surgical quality improvement program and the local microbiome. *Plast Reconstr Surg.* 2015; 136 :921-929.
20. Olsen MA, Nickel KB, Margenthaler JA, Fox IK, Ball KE, Mines D, Wallace AE, Colditz GA, Fraser VJ. Development of a Risk Prediction Model to Individualize Risk Factors for Surgical Site Infection After Mastectomy. *Ann Surg Oncol.* 2016 Aug;23(8):2471-9. doi: 10.1245/s10434-015-5083-1. Epub 2016 Jan 28. PMID: 26822880; PMCID: PMC4929027.
21. Bunn F, Jones DJ, Bell-Syer S: Prophylactic antibiotics to prevent surgical site infection after breast cancer surgery. *Cochrane Database Syst Rev.* 2012, 1: CD005360
22. M Gil Conesa, NM Climent Martínez, JA Del Moral Luque, M Durán Poveda, D Rodríguez Villar, G Rodríguez Caravaca. Evaluation of compliance with the antibiotic prophylaxis protocol in breast surgery and its effect on the incidence of surgical infection. *Anales Sis San Navarra vol.42 no.2 Pamplona may./ago.* 2019 Epub 02-Mar-2020 <https://dx.doi.org/10.23938/assn.0637>
23. Throckmorton AD, Baddour LM, Hoskin TL, Boughey JC, Degnim AC: Microbiology of surgical site infections complicating breast surgery.. *Surg Infect (Larchmt).* 2010, 11: 355-359.
24. Rosengren H, Dixon A. Antibacterial prophylaxis in dermatologic surgery: an evidence-based review. *Am J Clin Dermatol.* 2010;11:35-44. <http://dx.doi.org/10.2165/11311090-000000000-00000>
25. Bağhaki S, Soybir GR, Soran A. Guideline for Antimicrobial Prophylaxis in Breast Surgery. *J Breast Health.* 2014 Apr 1;10(2):79-82. doi: 10.5152/tjbh.2014.1959. PMID: 28331648; PMCID: PMC5351473.
26. Noronha IR,, Dantas SC, Penna LHG, Jomar RT. Incidence and factors associated with complications in surgical wounds of women after mastectomy. *Rev enferm UERJ, Rio de Janeiro,* 2021; 29:e56924. DOI: <http://dx.doi.org/10.12957/reuerj.2021.56924>
27. Spira JAO, Borges EL, Silva PAB, Abreu MNS, Guedes ACM, Junior JFP. Factors associated with complex surgical wounds in breast and abdomen: a case-control observational study. *Rev. Latinoam. Enferm. [Internet],* 2018 [cited 2020 Feb 15]; 26(1):e3052. DOI: <https://doi.org/10.1590/1518-8345.2274.3052>.

28. Boostrom SY, Throckmorton AD, Boughey JC, Holfield AC, Zakaria S, Hoskin TL, Degnim AC. Incidence of clinically significant seroma after breast and axillary surgery. *J Am Coll Surg.* 2009;208(1):148–150. doi: 10.1016/j.jamcollsurg.2008.08.029.
29. Kuroi K, Shimozuma K, Taguchi T, Imai H, Yamashiro H, Ohsumi S, Saito S. Pathophysiology of seroma in breast cancer. *Breast Cancer.* 2005;12:288–293. doi: 10.2325/jbcs.12.288.
30. Hashemi E, Kaviani A, Najafi M, Ebrahimi M, Hooshmand H, Montazeri A. Seroma formation after surgery for breast cancer. *World J Surg Oncol.* 2004 Dec 9;2:44. doi: 10.1186/1477-7819-2-44. PMID: 15588301; PMCID: PMC543447.
31. Wu X, Luo Y, Zeng Y, Peng W, Zhong Z. Prospective comparison of indwelling cannulas drain and needle aspiration for symptomatic seroma after mastectomy in breast cancer patients. *Arch Gynecol Obstet.* 2020 Jan;301(1):283–287. doi: 10.1007/s00404-019-05396-2. Epub 2019 Nov 28. PMID: 31781890; PMCID: PMC7028817.
32. Srivastava V, et al. Seroma formation after breast cancer surgery: what we have learned in the last two decades. *J Breast Cancer.* 2012;15(4):373–380. doi: 10.4048/jbc.2012.15.4.373.
33. Gambardella C, Clarizia G, Patrone R, Offi C, Mauriello C, Romano R, Filardo M, Conzo A, Sanguinetti A, Polistena A, Avenia N, Conzo G. Advanced hemostasis in axillary lymph node dissection for locally advanced breast cancer: new technology devices compared in the prevention of seroma formation. *BMC Surg.* 2019 Apr 24;18(Suppl 1):125. doi: 10.1186/s12893-018-0454-8. PMID: 31074399; PMCID: PMC7402581.
34. Velotti N, Limite G, Vitiello A, Berardi G, Musella M. Flap fixation in preventing seroma formation after mastectomy: an updated meta-analysis. *Updates Surg.* 2021 Aug;73(4):1307–1314. doi: 10.1007/s13304-021-01049-9. Epub 2021 Apr 22. PMID: 33886107; PMCID: PMC8397649.
35. Nespoli L, Antolini L, Stucchi C, Nespoli A, Valsecchi MG, Gianotti L. Axillary lymphadenectomy for breast cancer. A randomized controlled trial comparing a bipolar vessel sealing system to the conventional technique. *Breast.* 2012;21(6):739–745. doi: 10.1016/j.breast.2012.08.003.
36. Wang P, Gu L, Qin Z, Wang Q, Ma J. Efficacy and safety of topical nitroglycerin in the prevention of mastectomy flap necrosis: a systematic review and meta-analysis. *Sci Rep.* 2020 Apr 21;10(1):6753. doi: 10.1038/s41598-020-63721-1. PMID: 32317705; PMCID: PMC7174291.
37. Pruijboom T, Schols RM, Van Kuijk SM, Van der Hulst RR, Qiu SS. Indocyanine green angiography for preventing postoperative mastectomy skin flap necrosis in immediate breast reconstruction. *Cochrane Database Syst Rev.* 2020 Apr 22;4(4):CD013280. doi: 10.1002/14651858.CD013280.pub2. PMID: 32320056; PMCID: PMC7175780.
38. Spruijt NE, Hoekstra LT, Wilmink J, Hoogbergen MM. Hyperbaric oxygen treatment for mastectomy flap ischaemia: A case series of 50 breasts. *Diving Hyperb Med.* 2021 Mar 31;51(1):2–9. doi: 10.28920/dhm51.1.2-9. PMID: 33761535; PMCID: PMC8084708.
39. Moyer HR, Losken A. Predicting mastectomy skin flap necrosis with indocyanine green angiography: the gray area defined. *Plastic and Reconstructive Surgery* 2012;129(5):1043–8
40. Gorai K, Inoue K, Saegusa N, Shimamoto R, Takeishi M, Okazaki M, Nakagawa M. Prediction of Skin Necrosis after Mastectomy for Breast Cancer Using Indocyanine Green Angiography Imaging. *Plast Reconstr Surg Glob Open.* 2017 Apr 21;5(4):e1321. doi: 10.1097/GOX.0000000000001321. PMID: 28507876; PMCID: PMC5426895.
41. Carlson GW, Chu CK, Moyer HR, Duggal C, Losken A. Predictors of nipple ischaemia after nipple sparing mastectomy. *Breast J.* 2014;20:69–73. doi: 10.1111/tbj.12208.
42. Aral M, Tuncer S, Sencan A, Elmas C, Ayhan S. The Effect of Thrombolytic, Anticoagulant, and Vasodilator Agents on the Survival of Random Pattern Skin Flap. *J. Reconstr. Microsurg.* 2015;31:487. doi: 10.1055/s-0035-1554938.
43. Garwood ER, Moore D, Ewing C, et al. Total skin-sparing mastectomy: complications and local recurrence rates in 2 cohorts of patients. *Ann Surg* 2009;249:26–32
44. Becker C (2013) Treatment of breast cancer-related lymphedema using combined autologous breast reconstruction and autologous lymph node transplantation. In: Spiegel A (ed) *Breast reconstruction—current perspectives and state of the art techniques*

45. Beek M A, te Slaa A, van der Laan L et al. Reliability of the inverse water volumetry method to measure the volume of the upper limb. *Lymphat Res Biol.* 2015;13(02):126–130.
46. Zhang X, Oliveri JM, Paskett ED. Features, Predictors, and Treatment of Breast Cancer-related Lymphedema. *Curr Breast Cancer Rep.* 2020 Dec;12(4):244–254. doi: 10.1007/s12609-020-00381-0. Epub 2020 Sep 9. PMID: 34012502; PMCID: PMC8130904.
47. Manirakiza A, Irakoze L, Shui L, Manirakiza S, Ngendahayo L. Lymphoedema After Breast Cancer Treatment is Associated With Higher Body Mass Index: A Systematic Review and Meta-Analysis. *East Afr Health Res J.* 2019;3(2):178–192. doi: 10.24248/EAHRJ-D-19-00009. Epub 2019 Nov 29. PMID: 34308212; PMCID: PMC8279288.
48. International Society of Lymphology. The diagnosis and treatment of peripheral lymphoedema. *Lymphology* 2009;45:51–60.
49. Koca TT, Aktaş G, Kurtgil ME. Prevalence of upper extremity lymphedema and risk factors in patients with mastectomy: Single-center, observational, cross-sectional study. *Turk J Obstet Gynecol.* 2020 Sep;17(3):215–224. doi: 10.4274/tjod.galenos.2020.33734. Epub 2020 Oct 2. PMID: 33072427; PMCID: PMC7538822.
50. Sayegh HE, Asdourian MS, Swaroop MN, Brunelle CL, Skolny MN, Salama L, Taghian AG. Diagnostic Methods, Risk Factors, Prevention, and Management of Breast Cancer-Related Lymphedema: Past, Present, and Future Directions. *Curr Breast Cancer Rep.* 2017 Jun;9(2):111–121. doi: 10.1007/s12609-017-0237-8. Epub 2017 May 3. PMID: 28894513; PMCID: PMC5590641.
51. Pappalardo M, Starnoni M, Franceschini G, Baccarani A, De Santis G. Breast Cancer-Related Lymphedema: Recent Updates on Diagnosis, Severity and Available Treatments. *J Pers Med.* 2021 May 12;11(5):402. doi: 10.3390/jpm11050402. PMID: 34065795; PMCID: PMC8151072.
52. Winters H, Tielemans HJP, Hameeteman M, Paulus VAA, Beurskens CH, Slater NJ, Ulrich DJO. The efficacy of lymphaticovenular anastomosis in breast cancer-related lymphedema. *Breast Cancer Res Treat.* 2017 Sep;165(2):321–327. doi: 10.1007/s10549-017-4335-0. Epub 2017 Jun 12. PMID: 28608029; PMCID: PMC5543202.
53. Schaverien M V, Badash I, Patel K M, Selber J C, Cheng M H. Vascularized lymph node transfer for lymphedema. *Semin Plast Surg.* 2018;32(01):28–35.
54. Li ZJ, Yang E, Li YZ, Liang ZY, Huang JZ, Yu NZ, Long X. Application and prospect of adipose stem cell transplantation in treating lymphedema. *World J Stem Cells.* 2020 Jul 26;12(7):676–687. doi: 10.4252/wjsc.v12.i7.676. PMID: 32843921; PMCID: PMC7415250.
55. Wang D, Lyons D, Skoracki R. Lymphedema: Conventional to Cutting Edge Treatment. *Semin Intervent Radiol.* 2020 Aug;37(3):295–308. doi: 10.1055/s-0040-1713447. Epub 2020 Jul 31. PMID: 32773955; PMCID: PMC7394577.
56. Lee T.S., Kilbreath S.L., Refshauge K.M., Herbert R.D., Beith J.M. Prognosis of the upper limb following surgery and radiation for breast cancer. *Breast Cancer Res. Treat.* 2007;110:19–37. doi: 10.1007/s10549-007-9710-9.
57. Hidding JT, Beurskens CH, van der Wees PJ, van Laarhoven HW, Nijhuis-van der Sanden MW. Treatment related impairments in arm and shoulder in patients with breast cancer: a systematic review. *PLoS One.* 2014 May;9(5):e96748.
58. Kim JH, Kim SH, Kim HR, Lee SH, Yoon SY, Yang JH, Yoo YB, Park KS, Nam SE, Hong S, Min HK. Ultrasonographic evaluation of chronic shoulder pain after breast cancer surgery: single center, cross-sectional study. *Sci Rep.* 2020 Oct 8;10(1):16792. doi: 10.1038/s41598-020-73769-8. PMID: 33033299; PMCID: PMC7546622.
59. Min J, Kim JY, Yeon S, Ryu J, Min JJ, Park S, Kim SI, Jeon JY. Change in Shoulder Function in the Early Recovery Phase after Breast Cancer Surgery: A Prospective Observational Study. *J Clin Med.* 2021 Jul 31;10(15):3416. doi: 10.3390/jcm10153416. PMID: 34362199; PMCID: PMC8347494.
60. Shao YW, Shu Q, Xu D, Teng H, Wu GS, Hou JX, Tian J. Effect of different rehabilitation training timelines to prevent shoulder dysfunction among postoperative breast cancer patients: study protocol for a randomized controlled trial. *Trials.* 2021 Jan 6;22(1):16. doi: 10.1186/

- s13063-020-04954-3. PMID: 33407753; PMCID: PMC7789409.
61. Harris SR, Schmitz KH, Campbell KL, McNeely ML. Clinical practice guidelines for breast cancer rehabilitation: syntheses of guideline recommendations and qualitative appraisals. *Cancer*. 2012;118(8 Suppl):2312–2324. doi: 10.1002/cncr.27461.
  62. Spivey, T.L., Gutowski, E.D., Zinboonyahoon, N. et al. Chronic Pain After Breast Surgery: A Prospective, Observational Study. *Ann Surg Oncol* 25, 2917–2924 (2018). <https://doi.org/10.1245/s10434-018-6644-x>
  63. Karamarie Fecho, PhD, Natalie R. Miller, BS, Sarah A. Merritt, MD, Nancy Klauber-DeMore, MD, C. Scott Hultman, MD, William S. Blau, MD, PhD, Acute and Persistent Postoperative Pain after Breast Surgery, *Pain Medicine*, Volume 10, Issue 4, May 2009, Pages 708–715, <https://doi.org/10.1111/j.1526-4637.2009.00611.x>
  64. Vas L, Pai R. Ultrasound-Guided Dry Needling As a Treatment For Postmastectomy Pain Syndrome - A Case Series of Twenty Patients. *Indian J Palliat Care*. 2019 Jan-Mar;25(1):93-102. doi: 10.4103/IJPC.IJPC\_24\_18. PMID: 30820110; PMCID: PMC6388608.
  65. Zhu L, Mohan AT, Abdelsattar JM, Wang Z, Vijayasekaran A, Hwang SM, Tran NV, Saint-Cyr M: Comparison of subcutaneous versus submuscular expander placement in the first stage of immediate breast reconstruction. *J Plast Reconstr Aesthet Surg* 69:e77–e86, 2016)
  66. Beederman M, Bank J. Post-Breast Surgery Pain Syndrome: Shifting a Surgical Paradigm. *Plast Reconstr Surg Glob Open*. 2021 Jul 22;9(7):e3720. doi: 10.1097/GOX.0000000000003720. PMID: 34316427; PMCID: PMC8301281.
  67. Woodworth GE, Ivie RMJ, Nelson SM, Walker CM, Maniker RB: Perioperatif meme analjezisi: Anatomi ve bölgesel tekniklerin kalitatif bir incelemesi . *Reg Anesth Pain Med* 42 :609–631, 2017
  68. Parikh RP, Sharma K, Guffey R, Myckatyn TM.. Preoperative paravertebral block improves postoperative pain control and reduces hospital length of stay in patients undergoing autologous breast reconstruction after mastectomy for breast cancer. *Ann Surg Oncol* 2016;23(13):4262–9.
  69. Yang A, Nadav D, Legler A, Chen GH, Hingula L, Puttanniah V, Gulati A. An Interventional Pain Algorithm for the Treatment of Postmastectomy Pain Syndrome: A Single-Center Retrospective Review. *Pain Med*. 2021 Mar 18;22(3):677-686. doi: 10.1093/pm/pnaa343. PMID: 33155049; PMCID: PMC7971473.
  70. Hsu C., Sliwa J.A. Phantom Breast Pain as a Source of Functional Loss. *Am. J. Phys. Med. Rehabil*. 2004;83:659–662. doi: 10.1097/01.PHM.0000133430.27325.C4.
  71. Borg-Stein J, Iaccarino M.A. Myofascial Pain Syndrome Treatments. *Phys. Med. Rehabil. Clin. N. Am*. 2014;25:357–374. doi: 10.1016/j.pmr.2014.01.012.
  72. Koehler LA, Blaes AH, Haddad TC, Hunter DW, Hirsch AT, Ludewig PM. Research report movement, function, pain, and postoperative edema in axillary web syndrome. *Phys Ther*. 2015;95(10):1345–1353.
  73. Bergmann A, Mendes VV, de Almeida Dias R, do Amaral E Silva B, da Costa Leite Ferreira MG, Fabro EA. Incidence and risk factors for axillary web syndrome after breast cancer surgery. *Breast Cancer Res Treat*. 2012;131(3):987–992.
  74. Donkervoort SC, Roos D, Borgstein PJ. A case of chylous fistula after axillary dissection in breastconserving treatment for breast cancer. *Clin Breast Cancer*. 2006; 7(2): 171-2.
  75. Ay AA., Mutlu BA., Cetin A., Chilous Leak after Lymph Node Dissection; A Rare but Definitive Complication. *KÜ Tip Fak Derg* 2013; 16(1): 37-39
  76. Campisi CC, Boccardo F, Piazza C, Campisi C. Evolution of chylous fistula management after neck dissection. *Curr Opin Otolaryngol Head Neck Surg*. 2013; 21(2): 150-6.
  77. Mahoney B, Walklet E, Bradley E, Thrush S, Skillman J, Whisker L, Barnes N, Holcombe C, Potter S. Experiences of implant loss after immediate implant-based breast reconstruction: qualitative study. *BJS Open*. 2020 Jun;4(3):380-390. doi: 10.1002/bjs5.50275. Epub 2020 Mar 17. PMID: 32181587; PMCID: PMC7260419.
  78. Lim GH, Tan HF. Surgical techniques to avoid lateral dog ear of the mastectomy scar: a syste-

matic review. *Int J Surg*. 2016;26:73–78.

79. Meybodi F, Pham M, Sedaghat N, Elder E, French J. The Modified M-plasty Approach to Mastectomy: Avoiding the Lateral Dog-ear. *Plast Reconstr Surg Glob Open*. 2022 Feb 18;10(2):e4116. doi: 10.1097/GOX.0000000000004116. PMID: 35198347; PMCID: PMC8856119.
80. Amano M, Shimizu T. Mondor's Disease: A Review of the Literature. *Intern Med*. 2018 Sep 15;57(18):2607-2612. doi: 10.2169/internalmedicine.0495-17. Epub 2018 May 18. PMID: 29780120; PMCID: PMC6191595.
81. Salemis NS, Vasilara G, Lagoudianakis E. Mondor's disease of the breast as a complication of ultrasound-guided core needle biopsy: management and review of the literature. *Breast Dis* 35: 73-76, 2015.