Vascularized Gastroepiploic Lymph Node Transfer Significantly Improves Breast Cancer–Related Lymphedema

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Background: Vascularized lymph node transfer (VLNT) is a surgical treatment for lymphedema. Multiple researches have been described and each has significant disadvantages.

Study design: We performed vascularized lymph node transfer (VLNT) and study analyzing on greater curvature of the stomach nodes (GCSLNs) and describe outcomes from the first patient suffering from post mastectomy lymphedema who received greater curvature of the stomach nodes (GCSLNs) for treatment of lymphedema. Harvest from the periphery of the left gastroepiploic vessel is optimal.

Result: We retrospectively reviewed data of 24 female patients suffering from lymphedema following breast cancer treatment who underwent lymph node transplantation from 2012 to 2017. Mean age was 48.7 years (range, 35–70 years) with a mean follow-up of 1-4 years. Upper limb lymphedema was right sided in 14 patients and left sided in 10 patients. All the patients were previously seen by their oncologist and considered in breast cancer remission. Breast carcinoma treatment performed was mastectomy (n = 3), mastectomy and radiation therapy (n = 11), and mastectomy, radiation therapy, and chemotherapy (n = 10). Axillary lymphadenectomy had been performed in all cases. In 18 patients, upper limb lymphedema was present for at least 1 year or greater (mean, 5.6 years; range, 1–15 years). In 6 patients, it was present for only a few months (mean, 5 months; range, 3–8 months). Patients complaining of pain and/or presenting with palsy and/or with elephantiasis were excluded from the study. All patients were undergoing physiotherapy and were considered resistant to it.

Conclusion: The greater curvature of the stomach nodes (GCSLNs) is an excellent option for lymphedema treatment because there is no risk of complication and the scar is easily concealed. Improvement from lymphedema can be expected in a majority of patients.

Key words: lymphedema, Postmastectomy, Greater curvature of the stomach nodes