

Oncoplastic/ Reconstructive Surgery

GUIDELINE	DOCUMENT	ORGANISATION / COUNTRY	YEAR PUBLISHED
ALCL	ABS Summary Statement: Breast Implant Associated-Anaplastic Lymph Cell Lymphoma	Association of Breast Surgery, UK	2016
Comments: None			
Acellular Dermal Matrix	Acellular Dermal Matrix assisted breast reconstruction procedures: Joint Guidelines from the ABS & BAPRAS	Association of Breast Surgery & British Association of Plastic, Reconstructive & Aesthetic Surgery (BAPRAS), UK	2013
Comments: ABS and BAPRAS have jointly produced this document to provide some guidance for best practice, based on best available evidence.			
Oncoplastic Breast Reconstruction	Oncoplastic Breast Reconstruction: Guidelines for Best Practice	Association of Breast Surgery & British Association of Plastic, Reconstructive & Aesthetic Surgery (BAPRAS), UK	2012
Comments: Oncoplastic breast surgery is an evolving specialty. This document gives a framework for surgeons to consider when developing their own practice			
Lipomodelling	Lipomodelling Guidelines for Breast Surgery	Association of Breast Surgery, British Association of Plastic, Reconstructive & Aesthetic Surgery (BAPRAS) & British Association of Aesthetic Plastic Surgeons (BAAPS), UK	2011
Comments: None			

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Lipomodelling	Breast reconstruction using lipomodelling after breast cancer treatment (IPG417)	National Institute for Health & Care Excellence (NICE), UK	2012
<p>Comments:</p> <p>Lipomodelling in Breast Cancer patients is supported by NICE provided adequate arrangements for clinical governance, consent and audit are in place.</p>			
Surgical Technique	Nipple and areolar sparing mastectomy for the treatment of breast cancer	Cochrane Library, UK	2016
<p>Comments:</p> <p>This Cochrane Review concludes that there is low quality evidence on which to decide upon oncological safety of nipple sparing mastectomies when compared to skin sparing mastectomies or standard mastectomies.</p> <p>The authors recommend that “In practice the decision to select nipple-sparing mastectomy over other types of mastectomy should be done through shared decision making after extensive discussion of the risks and benefits. Generally the nipple-sparing mastectomy studies reported a favourable aesthetic result and a gain in quality of life compared with the other types of mastectomy.”</p> <p>When performing therapeutic nipple sparing mastectomies the ABS consider that a shave from behind the nipple allows the pathologist to comment on that specific margin, which, if involved may lead to consideration of nipple excision.</p>			

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The guideline title in the document column includes a hyperlink to the relevant guideline. Please view the document on the ABS website to follow these links.