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ASO Author Reflections: Surgical Treatment for Male Breast Cancer in the Modern Era

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Past:

Male breast cancer has often been an afterthought in the world of breast cancer research, which is not surprising as it constitutes less than 1% of all new breast cancers¹. Almost all of the original work looking at deescalating local therapy, including the National Surgical Adjuvant Breast and Bowel Project (NSABP) B-06 study, excluded male participants; and currently the gold standard surgical treatment recommendation for men is mastectomy^{2, 3}. In the current era, many men are undergoing breast conserving therapy (BCT) treatment; however, no one has directly compared this to mastectomy.

Present:

Due to the limited number of male breast cancer cases, this question has been unable to be looked at prospectively to date. Therefore, we used the National Cancer Database (NCDB) to look retrospectively at a similar population to the female population used in the NSABP B-06 (Stage I or II breast cancer who underwent lumpectomy, breast conserving therapy, or mastectomy); as well as mastectomy with radiation, which was not included in their study. Our data showed that while most men underwent mastectomy, the gold standard, a substantial population underwent some form of breast conservation (12.4% BCT, 8.2% partial mastectomy alone). Using our model, after controlling for group differences we found that BCT translated into an improved overall survival over partial mastectomy alone or mastectomy for all groups⁴. We suggest BCT is a viable option and possibly preferred to mastectomy in male breast cancer patients.

Future:

In this study, retrospective data from a large national cohort was examined to determine the viability of BCT for male breast cancer patients. Unlike prior studies in women, it showed

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an improved survival for BCT. This difference from prior female data may be due to selection bias or more likely, that male breast cancer is a unique entity. A prospective study is needed to validate the improved survival seen in this cohort of male breast cancer patients. Additionally, other studies have shown decreased male compliance with radiation therapy. Thus, further examination of the utilization of radiation therapy needs to be explored, as this is a vital piece of BCT for men and partial mastectomies alone do not improve survival⁵.

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