

TUMORS WHERE SLN BIOPSY IS USED:

- SLNB is most commonly used to help stage breast cancer and melanoma.
- However, it is being studied with other cancer types, including colorectal cancer, gastric cancer, esophageal cancer, head and neck cancer, thyroid cancer, and non-small cell lung cancer.





SLN in
cancer
breast

PATIENT

SELECTION:

- **Indication**
- **Contraindication**
- **Special circumstances**



INDICATION:

1. **Early breast cancer with clinically negative node** — [1]
2. **DCIS with planned mastectomy or suspicious features** — two groups of women undergoing breast surgery for DCIS may benefit from SLNB.
 - a. **DCIS with planned mastectomy** — After a total mastectomy, the lymphatic drainage pattern will be permanently altered, making it impossible to accurately perform SLNB at a later date if invasive cancer is found unexpectedly in the mastectomy specimen [2].

- **b. DCIS with suspicious features** —including DCIS larger than 5 cm and DCIS with a palpable mass.



CONTRAINDICATIONS:

- **Clinically positive nodes**
- **Locally advanced and inflammatory breast cancer:**
- The false negative rate is high in such patients, presumably obstructed and/or functionally abnormal subdermal lymphatics.



SPECIAL

CIRCUMSTANCES:

○ **Neoadjuvant chemotherapy :**

- It is controversial whether SLNB or ALND should be performed and whether it should be performed prior to or following the completion of neoadjuvant chemotherapy in such patients.



Multicentric disease :

- Multicentric disease is not a contraindication to SLNB
- subareolar and intradermal (rather than peritumoral) injection of radiolabeled colloid or blue dye make SLNB feasible for patients with multicentric disease [6,7,8].

