

Current breast implant selection preference amongst Irish breast and plastic surgeons in relation to breast implant associated anaplastic large cell lymphoma (BIA-ALCL).

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Background

Breast implant-associated anaplastic large cell lymphoma (BIA-ALCL) is a rare type of T cell lymphoma associated with specific types of breast implants¹⁻³. 733 cases have been reported worldwide to date and the risk of developing this disease has been quoted as high as 1 in 2832 when certain high risk implant types are used³. Our aim was to investigate how the emergence of this disease has impacted the implant selection preference of Irish breast and plastic surgeons given the growing reports of associations between specific implant types and BIA-ALCL in the literature.

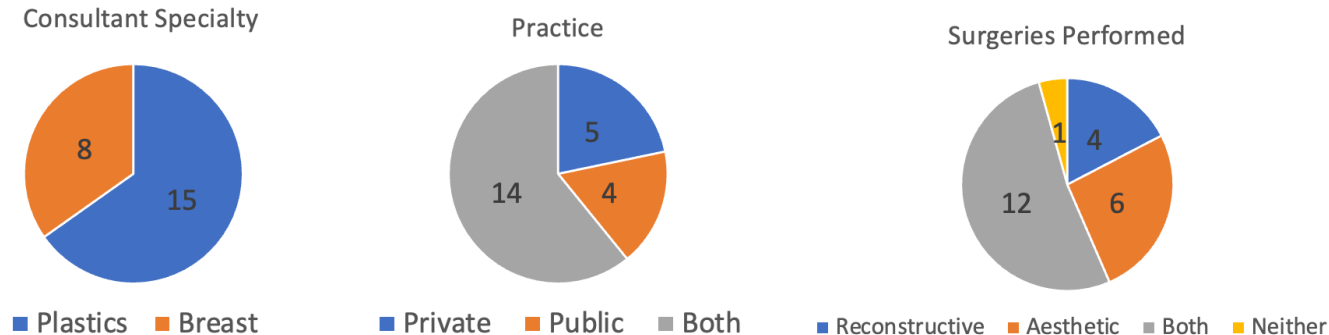
Methods

A 20-question online survey was circulated via email to a total of 48 plastic surgery consultants and 66 breast surgery consultants currently practising in Ireland.

Results

A total of 23 consultant responses to the survey were received (20%); fifteen from plastic surgery (31%) and eight from breast surgery (12%). 67% of consultants discussed the risk of developing BIA-ALCL with their patients, as well as educating them on the common symptoms associated with development of BIA-ALCL. The most commonly quoted risk of developing BIA-ALCL was 1/3000, but this ranged from 3/100 to 1/86,000.

Figure 1: Summary Questions 1-3 relating to individual consultant practice (corresponds to number of respondents).



Results

Only 21% of consultants feel that asymptomatic patients with high risk implants should be offered removal or exchange for a smooth implant. 37% of the participants have performed a capsulectomy and smooth implant exchange in the asymptomatic high risk patient cohort indicating patient choice as a significant factor. 87% of consultants have changed their practice, including a transition to using smooth or micro/nano-textured implants. 39% of consultants report that they are still using one of the high risk macro-textured implants.

Figure 2: Management of asymptomatic, high risk (Allergan textured/polyurethane) patients.

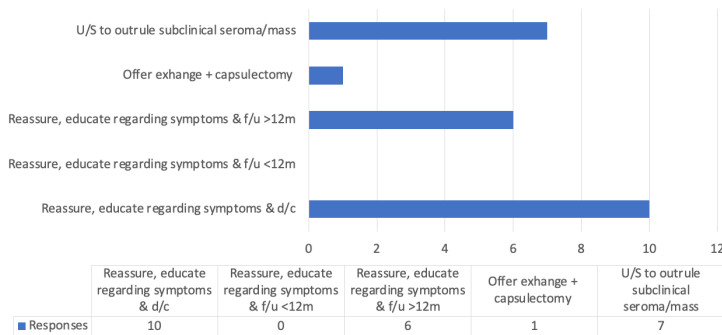
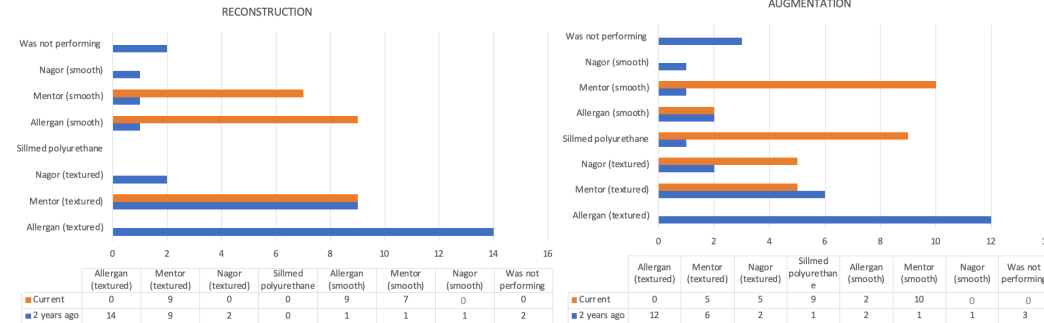


Figure 3: Implant preference 2020.



Discussion

BIA-ALCL is likely to be caused by a complex interplay of factors, allowing for the variation in clinical presentation and disease progression¹⁻³. Our survey has demonstrated an acute change in implant selection practise amongst Irish breast and plastic surgeons as a result of BIA-ALCL. This study also highlights the need for standardised guidelines relating to the prophylactic care of asymptomatic women with high risk implants.

References

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