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BREAST CANCER IN YOUNG WOMEN

PART II – Loco-regional treatment

Summary

Recent evidence suggests that the incidence of local breast tumor recurrences and failures may be substantially lower than previously thought due to the widespread use of systemic adjuvant therapy and loco-regional treatments. Surgery is a fundamental aspect of the management of breast cancer, and the mainstay of loco-regional treatment. In younger women, the choice of surgical approach (radical mastectomy vs lumpectomy) is influenced by tumor size, multicentricity, breast volume, genetic predisposition to the disease, and the patient's wishes, because breast resections can have a major impact on the patient's quality of life. Currently, adjuvant radiotherapy is recommended for all women following breast surgery. It significantly reduces the rate of relapse and overall mortality. Contralateral risk-reducing mastectomy is recommended, proposed in women with a current or previous diagnosis of breast cancer, particularly those with known *BRCA1/BRCA2* mutations, women in whom surveillance of the contralateral breast is complicated, and/or to improve symmetry in patients undergoing mastectomy followed by breast reconstruction.