Breast cancer is the leading female cancer in South Carolina (SC). Previous studies conducted in PCa and in SC have revealed a significant increase in the contralateral prophylactic mastectomy (CPM) trends. CPM is defined as the removal of the contralateral breast in females with breast cancer surgery for the period 2005-2013. While bilateral had a higher rate, but Black females had the highest change over time. The trend was increasing among young women. Future research should assess the risk factors of CPM among South Carolina females with breast cancer.

OBJECTIVES
- Evaluate the trends of different breast cancer surgery types and emphasize the importance of early detection.
- Provide an overview of the mastectomy trends and rates in breast cancer from the period 2005-2013. Our study examined data from a single state cancer registry and used SAS 9.3 for statistical analysis.

MATERIAL AND METHODS
- One study examined data from a single state cancer registry and used SAS 9.3 for the analysis.
- The analysis includes the number of breast cancer cases, 34,085 cases were included. Also, the data were restricted to females with breast cancer surgery from the period 2005-2013. Cases without surgery where breast cancer was diagnosed at autopsy were excluded.

RESULTS
- We found that 1,873 (6.66%) females surgically treated for breast cancer underwent contralateral prophylactic mastectomy. The overall rate increased from 5.35% in 2005 to 7.68% in 2013. Among White females, the risk increased from 2.77% to 5.60%; among Blacks, it increased from 1.08% to 1.72%. Among multiple Hispanic subgroups, regardless of race, the contralateral prophylactic mastectomy rate increased from 2.94% in 2005 to 3.65% in 2013; they represented 3.0% of the total number of CPM performed. Meanwhile, the unilateral mastectomy rate decreased from 20.62% in 2005 to 17.97% in 2013; this increased the difference surgery rate by 0.57%.

CONCLUSIONS
- Similarity to what was observed in many other states, the CPM rate increased in SC in the last decade treated with breast cancer surgery for the period 2005-2013. While bilateral had a higher rate, but Black females had the highest change over time. The trend was increasing among young women. Future research should assess the risk factors of CPM among South Carolina females with breast cancer.

Source: South Carolina Central Cancer Registry (SCCCR)