ASSESSMENT OF L INCISION TECHNIQUE FOR AVOIDANCE OF LATERAL DOG EAR DEFORMITY IN MRM

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Introduction

Lateral dog ear deformity is a common post-mastectomy complication in patients with large, ptotic breasts and high body mass index (BMI). The L incision technique has been proposed to minimize lateral skin redundancy and improve cosmetic outcomes.

Aim of the Work

To evaluate the effectiveness of the L incision technique in preventing lateral dog ear deformity in modified radical mastectomy (MRM) among women with large-sized breasts.

Patients and Methods

This prospective observative study included 20 female patients with breast cup sizes C or D and pathologically confirmed breast cancer. All underwent MRM using the L incision technique at Alexandria Main University Hospital and Borge Alarab University Hospital from jenuary 2023 to march 2025.

Exclusion criteria:

Patients who are candidates for breast conservation, Patients with small sized breasts, Patients with uncontrolled DM, massive skin locally advanced tumor which need local coverage and Patients with negative axillary lymph node preoperatively.

Assessment Methods: Subjective criteria:

Patients completed a questionnaire rating satisfaction (scale 1–5) on: Appearance in mirror (dressed/undressed) and how they feel in clothing.

Objective criteria: Evaluation had been done by third party medical staff including scar shape and length, dog ear appearance, and postoperative surgical complications including shoulder movement limitation and arm pit numbness



Results

The mean age was 52.02 ± 8.62 years. Most patients (85%) were obese, and 80% had cup size D. Invasive ductal carcinoma was diagnosed in 85% of cases. The median operative time was 1.5 hours. Postoperative complications: 15% had wound dehiscence, 10% experienced scar discomfort, and 5% developed flap necrosis. no dog ear deformities were observed in all patients. Cosmetic outcomes and patient satisfaction were rated as acceptable in 90% of cases.

Table 1: Distribution of the studied cases according to age and breast cup size (n = 20)

Cup size	No.	%
Cup C	4	20.0
Cup D	16	80.0

Table 2: Descriptive of the studied cases according to operative time, wound length and blood loss (n = 20)

	Min. – Max.	Mean \pm SD.	Median (IQR)
Operative time	1.0 - 1.50	1.46 ± 0.14	1.50 (1.50 – 1.50)
Wound length	17.0 - 22.0	19.72 ± 1.18	20.0 (19.0 – 20.0)
Blood loss	160.0 – 250.0	202.8 ± 20.8	200.0 (180 - 220)

Table 3: Distribution of the studied cases according to cosmetic result and patient satisfaction (n = 20)

Cosmetic result	No.	%
Not accepted	2	10.0
Accepted	18	90.0
Patient unsatisfied	2	10.0
Patient Satisfied	18	90.0

Conclusion

A majority of patients received chemotherapy (75%), with advanced-stage diagnoses (stages II–III) showing good response and all patients were with positive axillary status. Operative outcomes showed minimal complications, with high rates of wound healing and scar acceptence, reflecting effective surgical management.



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