**Postoperative Outcomes After Staged vs. Coordinated Mastectomy and Bilateral Salpingo-oophorectomy**

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**Methods**

- **Data Extraction**
  - Billing data from the MarketScan® database were used to identify adult female patients who underwent both BSO and mastectomy from 2010-2015 (N=2736).
  - Patients were placed in the coordinated group if a breast operation and BSO were performed simultaneously and were placed in the staged group if both operations were performed sequentially (N=2336).

- **Statistical Analysis**
  - Univariate analyses by chi-squared and Wilcoxon Rank-Sum tests were performed along with multivariable logistic and negative binomial regressions to adjust for risk.

**Results**

- **#1 Data Extraction Breakdown**
  - Patients in the Marketscan database who underwent both BSO and mastectomy from 2010-2015 (N=2736)

- **#2 Demographics**
  - Coordinated group: breast operation and BSO performed simultaneously (N=400)
  - Staged group: breast operation and BSO performed sequentially (N=2336)

- **#3 Postoperative Complication Rates**

- **#4 Total Healthcare Cost Comparison**

**Discussion**

We found lower rates of breast seromas, similar rates of all other complications, and lower aggregate healthcare charges in patients who underwent coordinated surgery.

- Previous literature is discordant
- Factors thought to influence higher cost in staged include multiple admissions, repeat anesthesia, longer operative times, and multiple recovery periods and medications

**Limitations**

- Retrospective study possibly influenced by selection bias
- Limitations to data retrieval from Marketscan
- Cost analysis time frame

**Implications**

- Coordinating breast surgery with BSO may be both safe and cost-effective when compared to performing these operations separately

**Next Steps**

- Identify impact of coordinating surgeries on other factors such as length of stay, operative time, and time to adjuvant therapy
- Determine which patients may be appropriate candidates for coordinated mastectomy and BSO

**Citations**


**Introduction**

- Individuals with high-risk gene mutations for breast and ovarian cancer or a breast cancer diagnosis are often given the option to undergo prophylactic bilateral salpingo-oophorectomy (BSO) in addition to mastectomy.
- These surgeries can be performed in a coordinated or staged fashion.
- Benefits to coordinating may include single operative date, single anesthetic administration, less time off work, and consolidated recovery.
- Perceived risks include higher chance of infection and longer operating times.

**Objective**

- Compare postoperative complication rates as well as total healthcare costs between patients who underwent coordinated versus staged breast surgery and BSO.

**Citations**


