

# Immediate versus delayed symmetrisation of the contralateral breast after oncoplastic procedures: a systematic review and meta-analysis

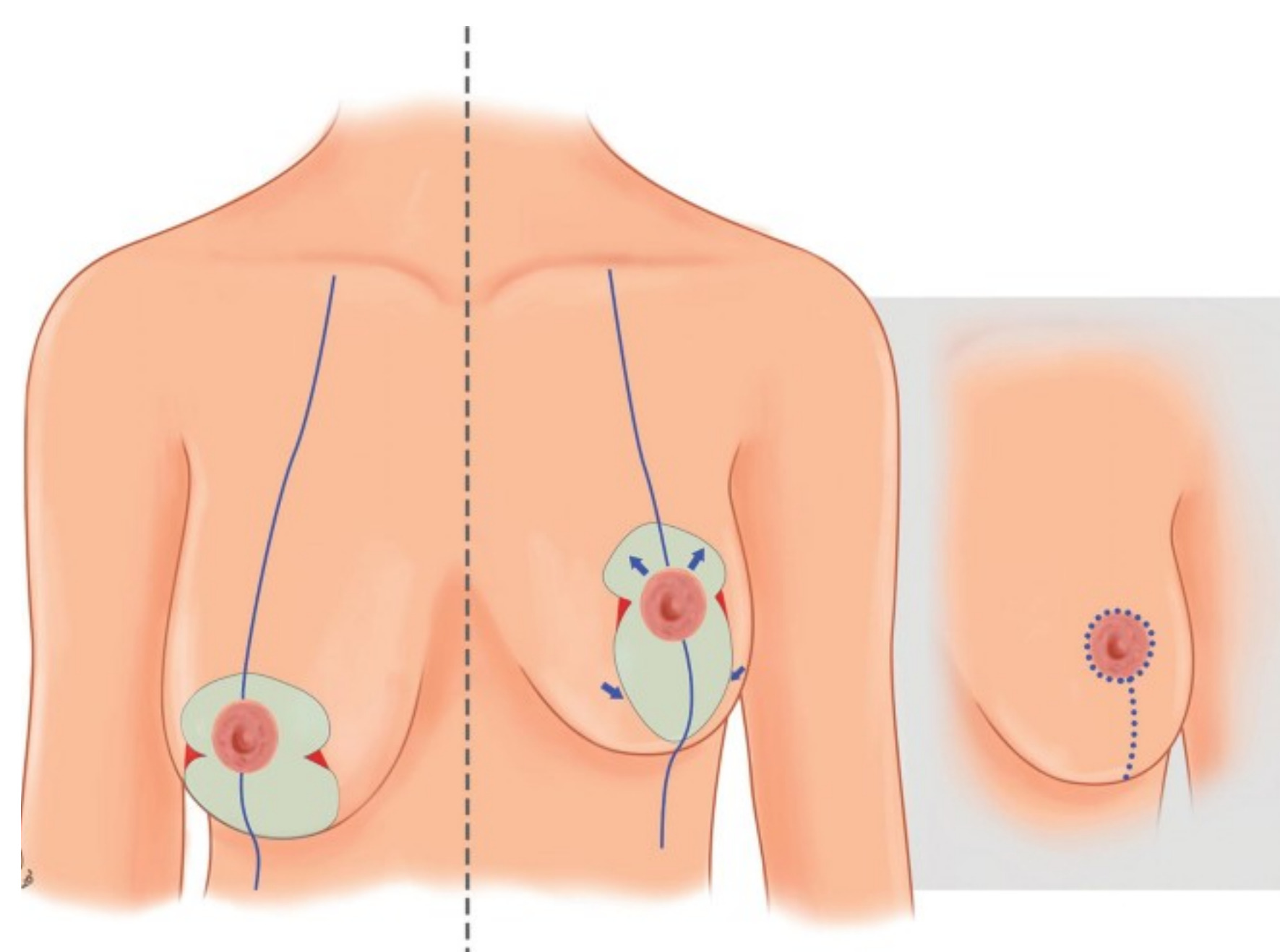
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## Background

Achieving symmetry is important after oncoplastic breast surgery, but the timing of contralateral symmetrisation is debatable.



## Aim

To compare surgical, oncological and patient-reported outcomes between immediate and delayed symmetrising procedures.

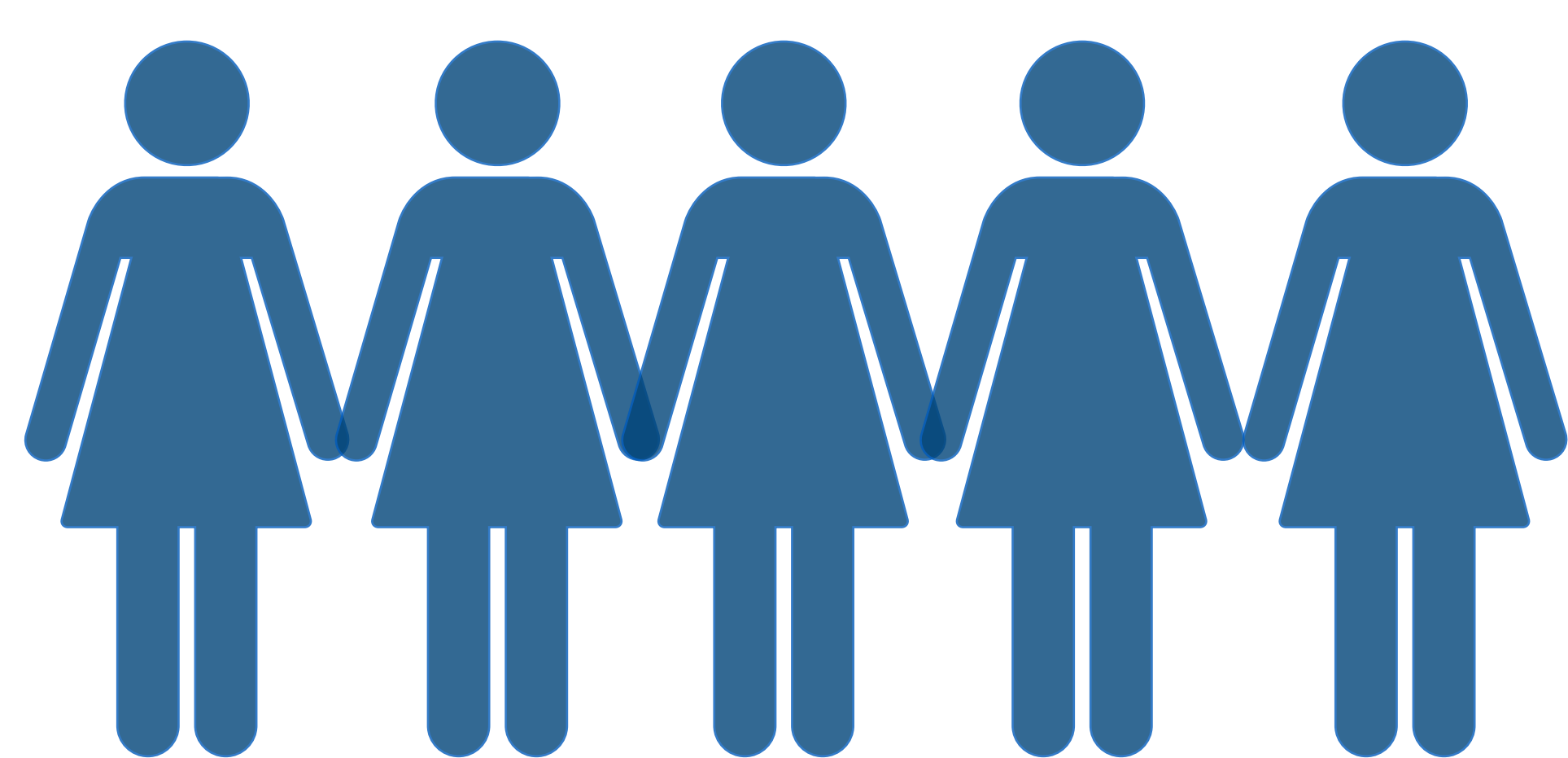
## Methods

Scopus<sup>®</sup> PubMed Embase<sup>®</sup>

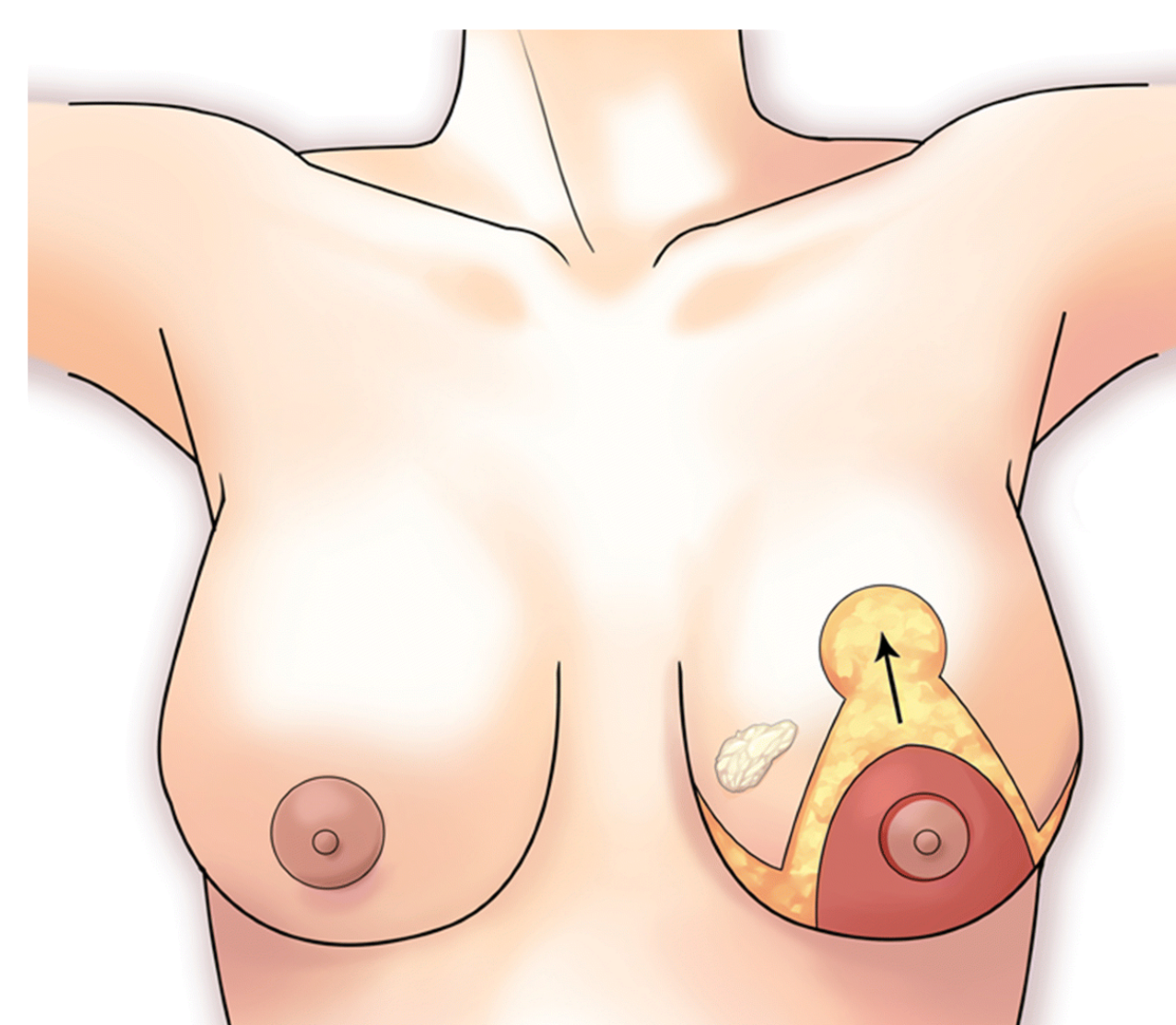
## Results



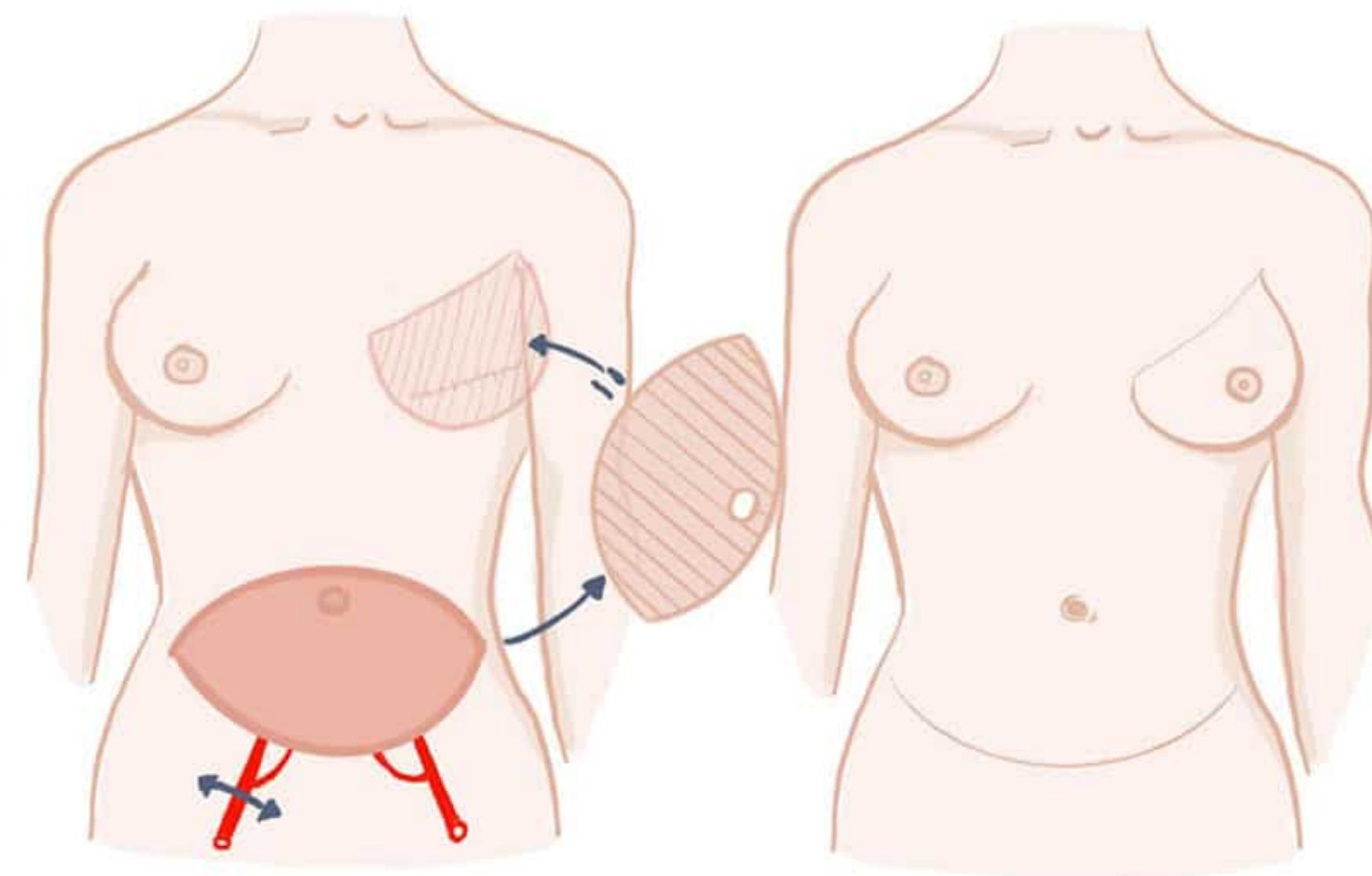
12 studies



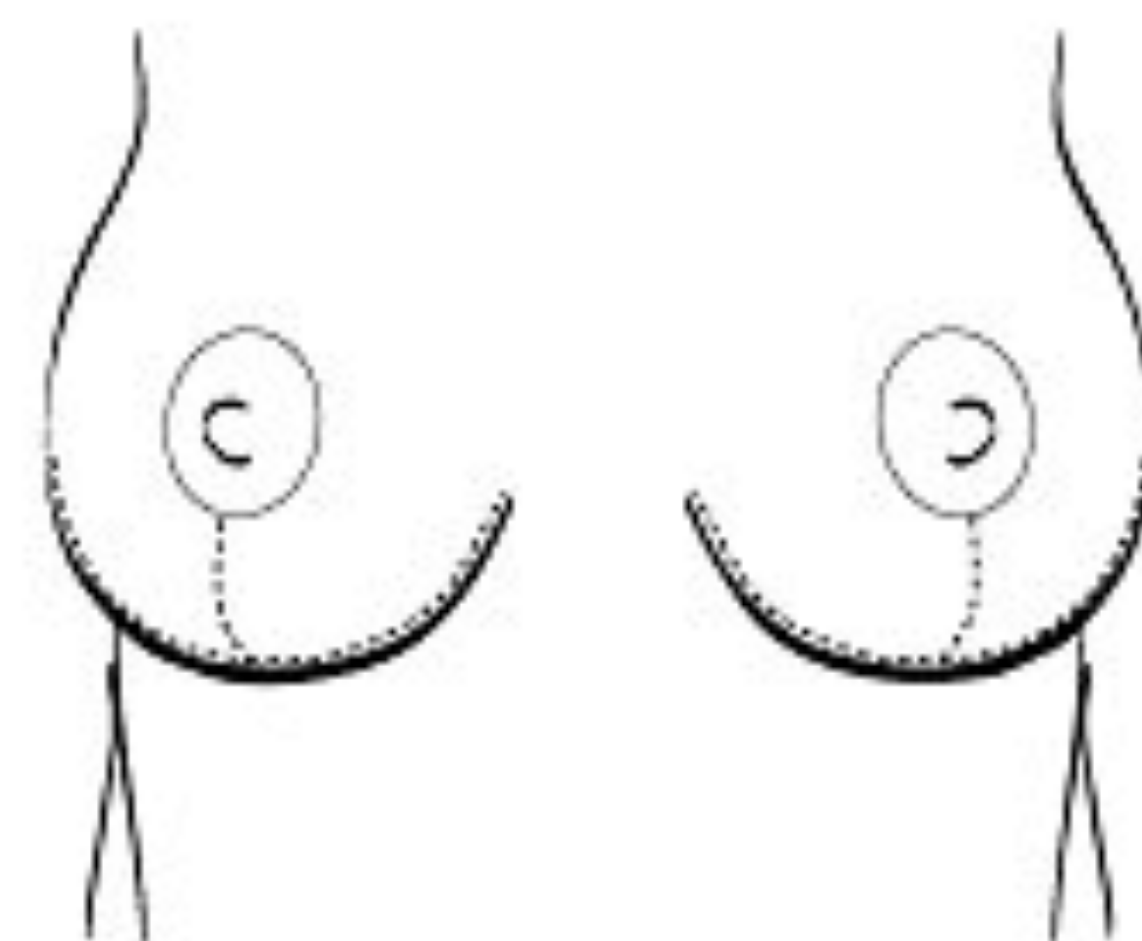
2339 patients



Therapeutic mammoplasty  
n = 983



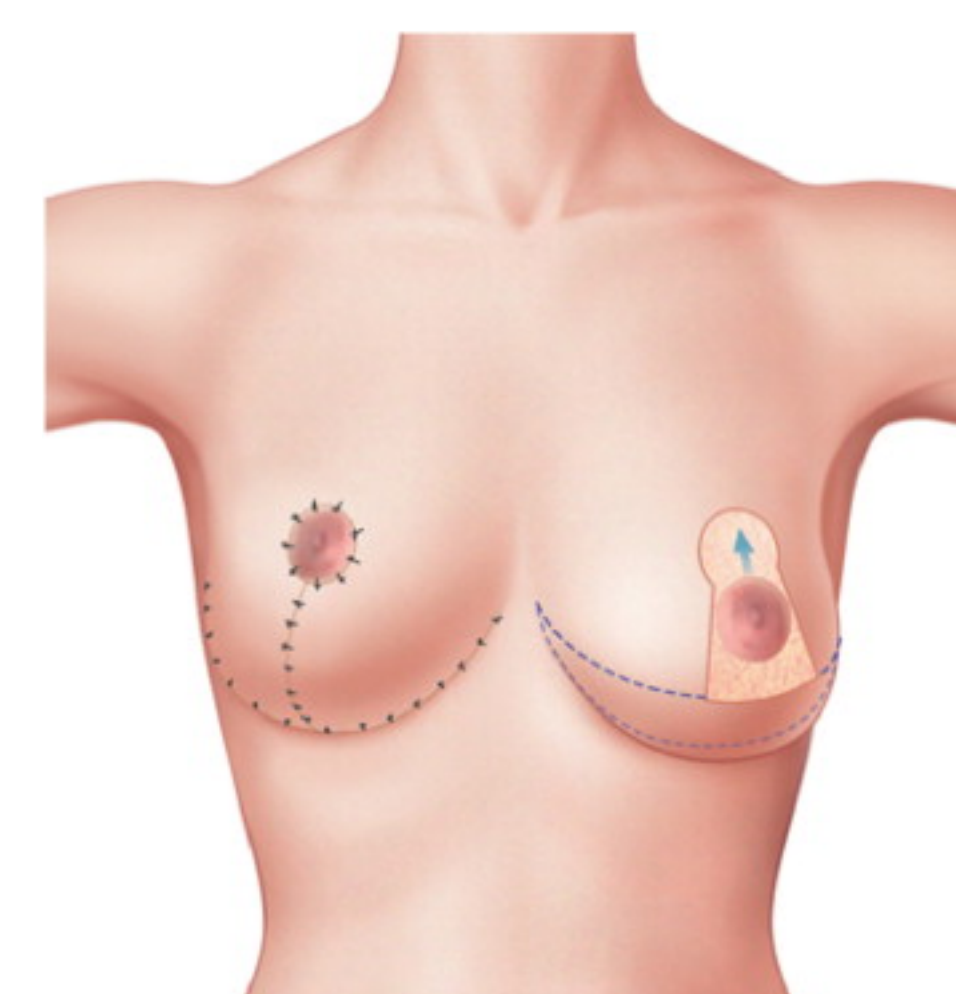
Mastectomy with reconstruction  
n = 1356



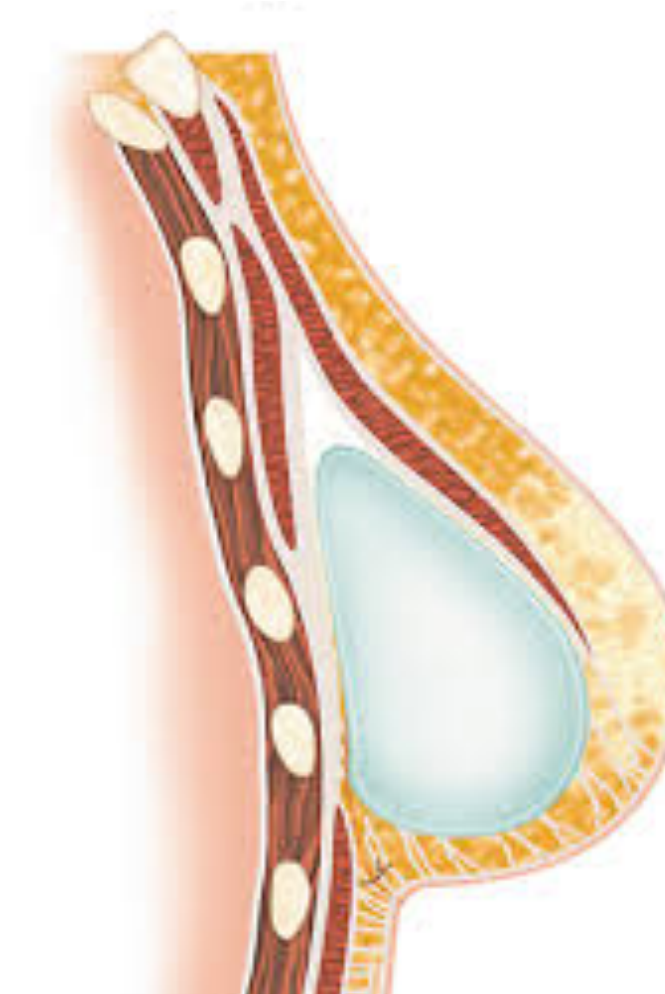
Immediate symmetrisation  
n = 1227



Delayed symmetrisation  
n = 1112



Breast reduction or mastopexy  
n = 2185



Augmentation  
n = 154

## Overall

No significant differences in complications, reoperations, aesthetic revisions, recurrence rates, time to adjuvant therapy or patient-reported outcomes.

## Breast conserving surgery

Immediate symmetrisation resulted in lower overall reoperations (RR 0.72 95% CI 0.53-0.97, p=0.03), lower reoperations for complications (RR 0.46 95% CI 0.25-0.85, p=0.01) and fewer aesthetic revisions (RR 0.40 95% CI 0.24-0.65, p=0.0003).

## Mastectomy

Delayed symmetrisation led to less aesthetic revisions (RR 1.50 95% CI 1.16-1.96, p=0.002).

## Conclusion

Immediate symmetrisation is oncologically safe and reduces secondary procedures in breast conserving surgery. Timing should be guided by an oncoplastic MDT and patient counselling.