

CANCER CENTRE

Understanding Intraoperative Radiation Therapy (IORT) for Breast Cancer



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Introduction

The main treatments for breast cancer are:

- Surgery
- Chemotherapy
- Hormone therapy
- Biological therapy (targeted therapy)
- Radiotherapy

One of the treatment options after breast conserving surgery is radiotherapy that requires a period of 3-5 weeks to complete and patients need to travel to the medical centre on daily basis.

There is a new treatment option called Single Dose Intraoperative Radiotherapy (SD-IORT) for suitable patients. SD-IORT involves giving a single dose of radiation (20Gy) directly to the tumour bed following the removal of the tumour in the operating room and takes about 20-30 minutes.

Unlike regular radiotherapy, this method protects healthy tissues from unnecessary radiation exposure. For some patients, it might even eliminate the need for additional post-operative radiotherapy.



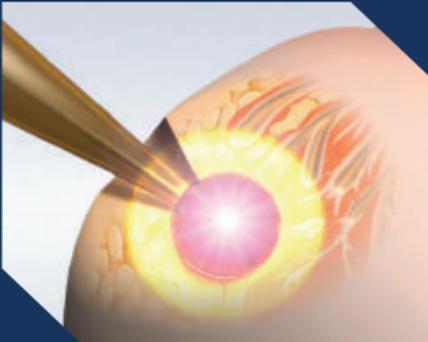
Procedures

During the procedure, the patient will be placed under anesthesia and the surgeon will remove the tumour and surrounding tissues. Then, along with a radiation oncologist, they will determine how much radiation needs to be administered.



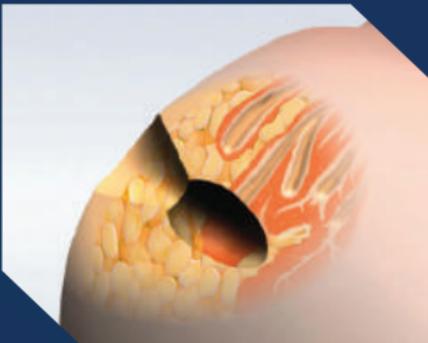
STEP 1

After the surgeon removes the cancer, the applicator is positioned within the lumpectomy cavity.



STEP 2

Radiation is then delivered precisely by the radiation oncologist.



STEP 3

Following a 20 to 30 minutes treatment, the applicator is removed by the surgeon and the wound is closed. The patient is then sent to recovery.



Frequently Ask Questions

Is IORT right for me?

IORT is suitable for women over 45 years of age with a grade 1 or 2 ductal breast cancer, that is less than 3cm, is estrogen receptor positive and has no lymph node involvement.

What if I need whole breast radiation?

IORT may be given as a boost dose during cancer surgery followed by external beam radiation later. This initial boost reduces the need of external boost, hence reducing the duration of treatment.

How do you know you have removed all the cancer?

Your surgeon will ensure the tumour is removed with clear margins. This is confirmed by pathology.

What happens if some of the cancer is left behind?

Rarely tumour margins may be involved. You will require a repeat surgery to clear the margin. Your surgeon and radiation oncologist will advise you then if external radiation is necessary.

What are the benefits of IORT?

- The radiation is given once during surgery.
- The radiation is absorbed quickly over a depth of 1 - 2cm.
- The low radiation dose means healthy tissues and organs such as the ribs, lungs, heart and opposite breast are more protected.
- The single treatment means you can save on time and travel.
- If you need chemotherapy you can start straight away.

What are the side effects of IORT?

- Mild swelling and redness of the skin overlying skin at surgical site
- Mild tenderness within the breast.
- Prolonged seroma (fluid) collection.

Can my cancer grow back ?

Yes, there is always a risk of cancer recurrence even if a mastectomy is performed. The results have shown that there is a chance of 2% cancer recurrence after 5 years of IORT which is similar to external beam radiation therapy.

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