



EXAMEN INTRAOPERATORIO DEL GANGLIO CENTINELA MEDIANTE IMPRONTAS CITOLOGICAS

**Hospital Universitari Germans Trias i Pujol
Badalona Barcelona**



Unidad de Patología Mamaria

H. U. Germans Trias i Pujol

Badalona

1997-2004

800 pacientes año

Dx de carcinoma en 23 %



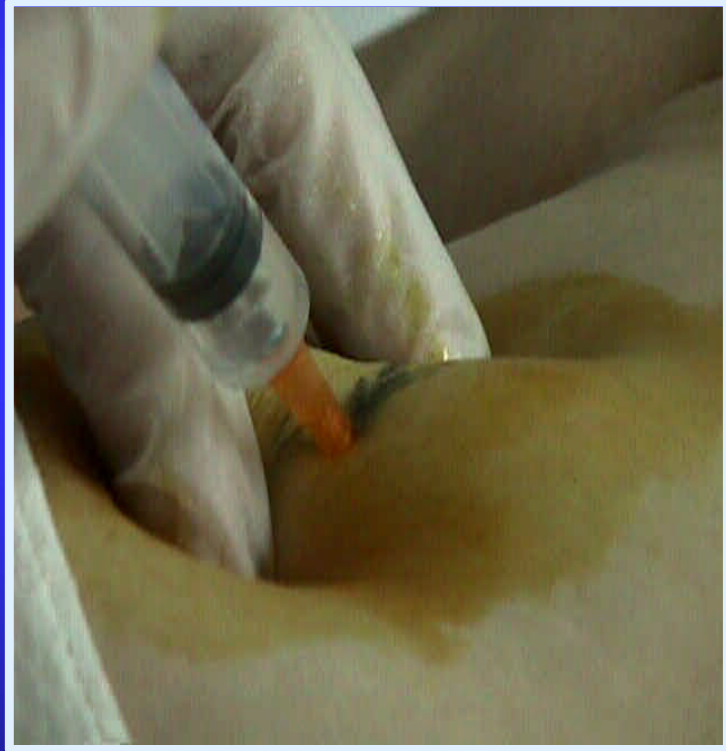
BSGC. CRITERIOS DE INCLUSION

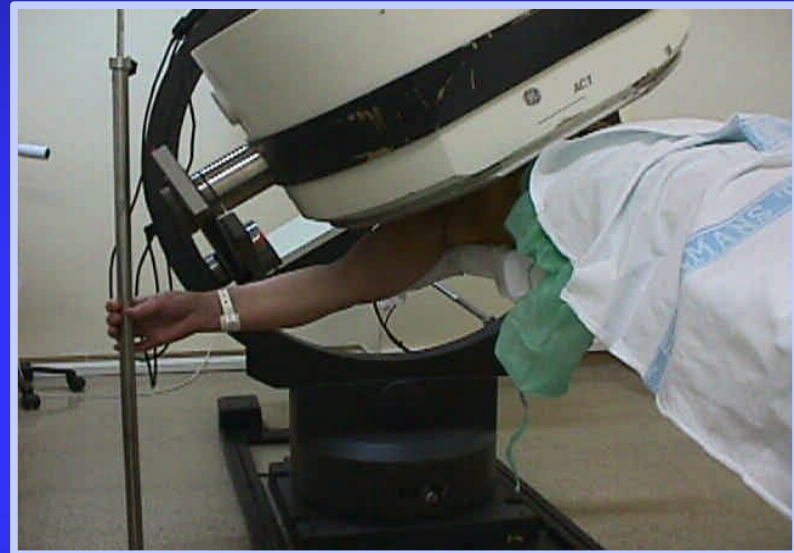
- **Pacientes con carcinoma**
- **Tamaño inferior a 3 cm**
- **Ganglios axilares clínicamente negativos**

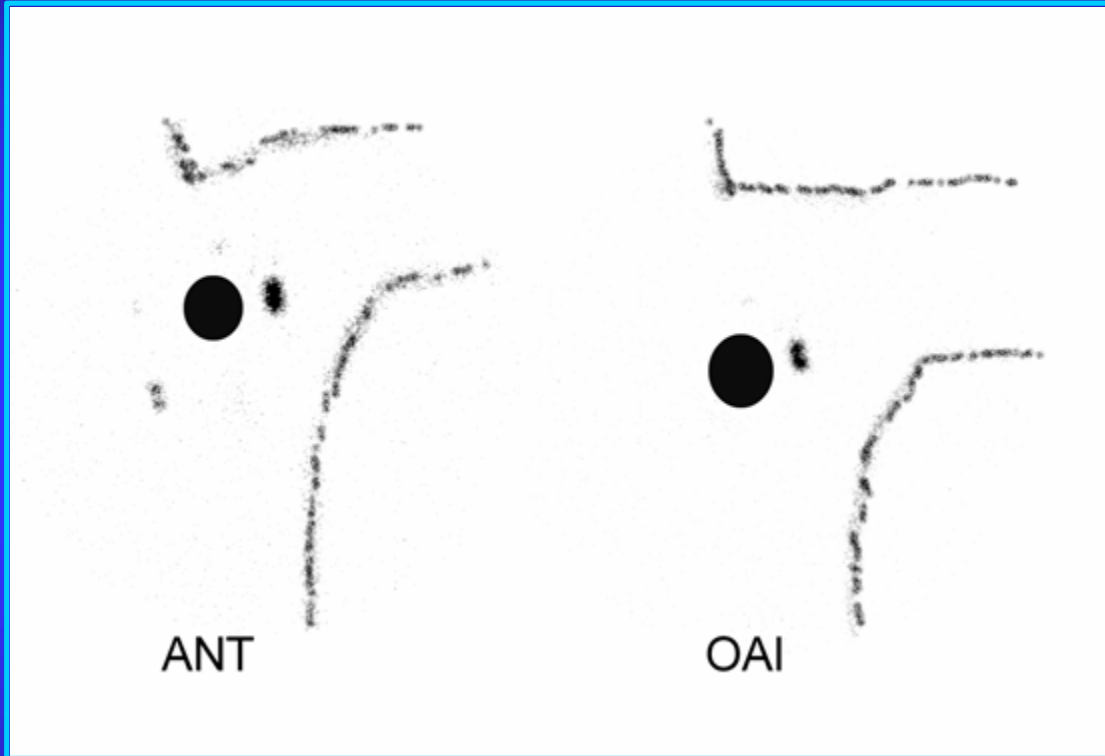


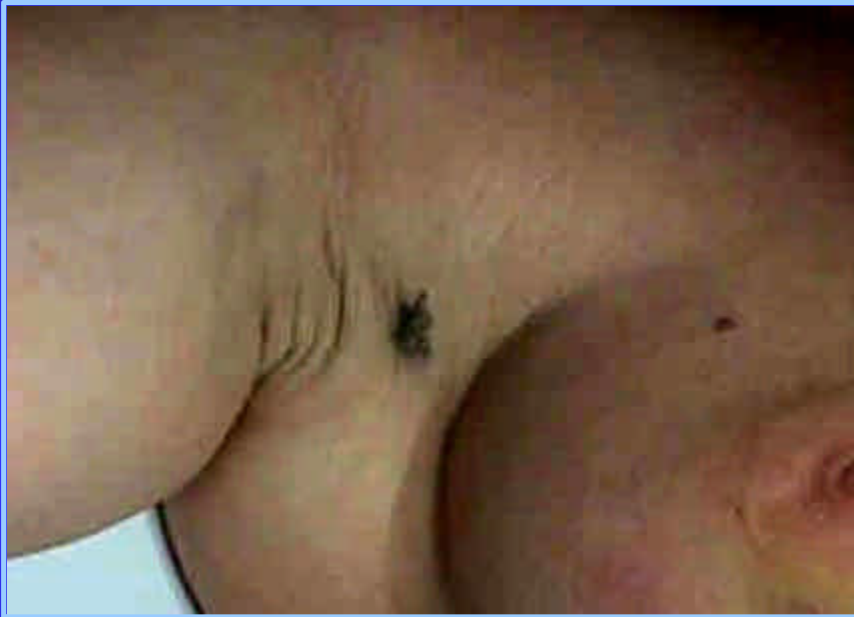
BSGC. CRITERIOS DE EXCLUSION

- Carcinoma localmente avanzado
- Adenopatias axilares (PAAF+)
- Biopsia excisional previa
- Radioterapia o quimioterapia previas











Sonda Isotópica Portàtil





10/1997



01/ 2004

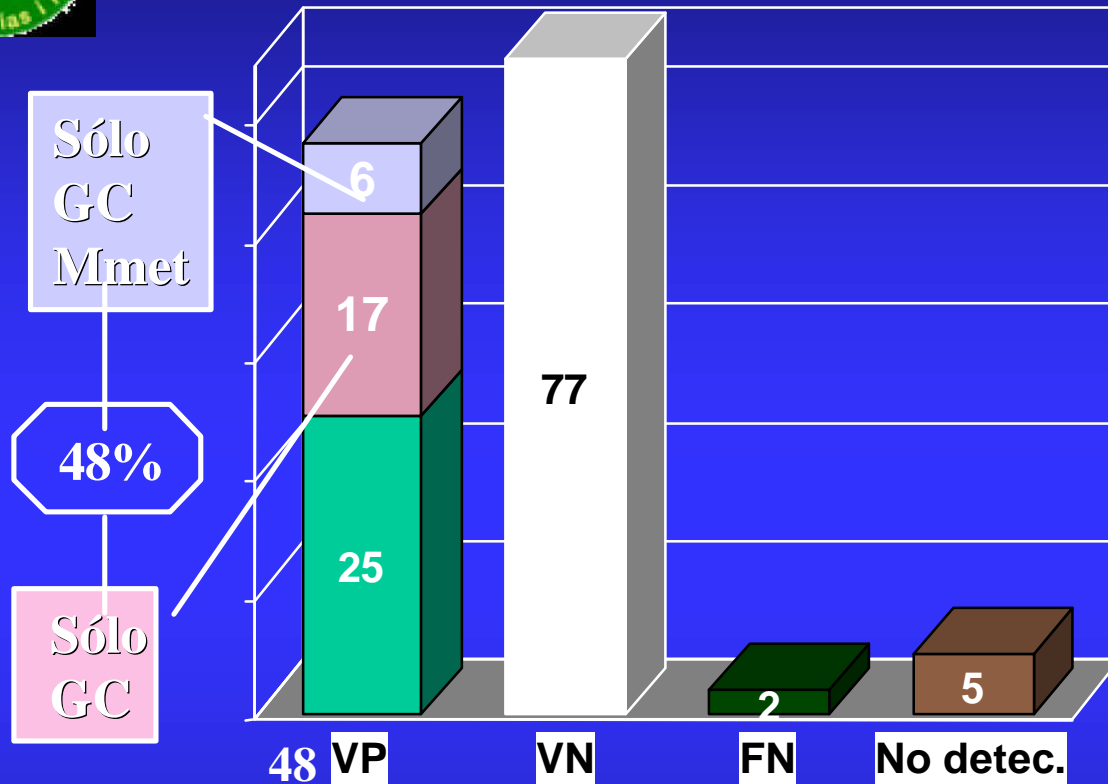
BGC

744 Casos

Octubre 1997 - Noviembre 1999



**Validación
132 casos**



Sentinel node biopsy as a practical alternative to axillary lymph node dissection in breast cancer patients: An approach to its validity

M Fraile et al



2000; 11:701

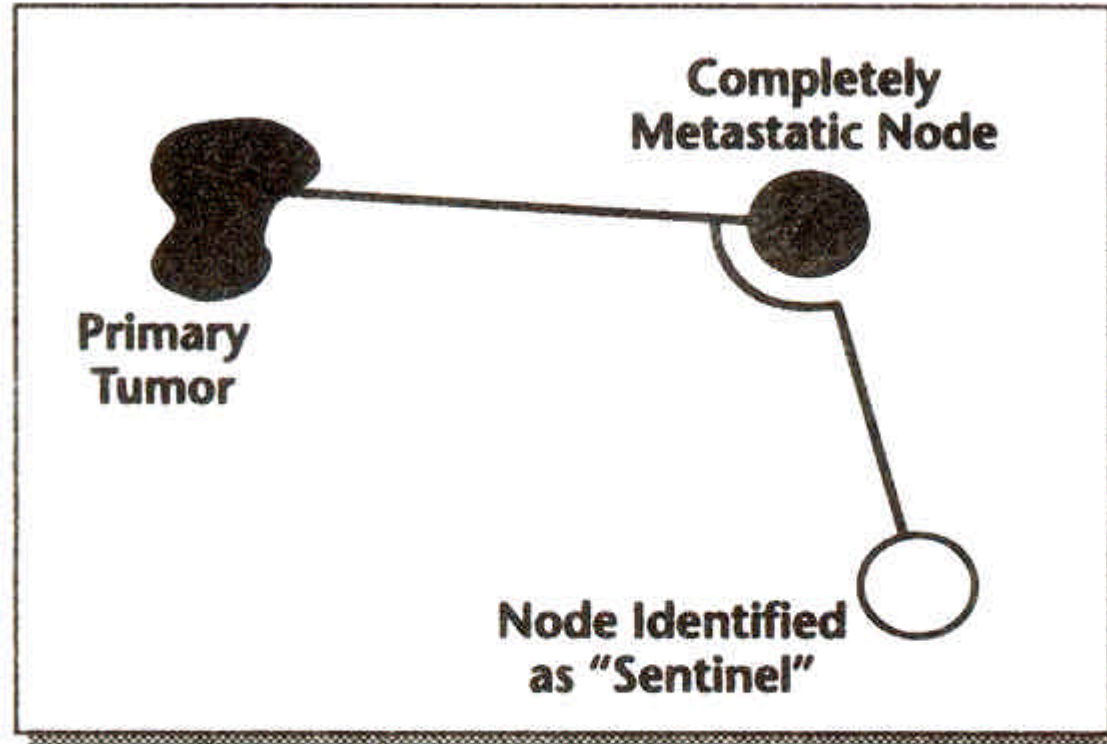


FALSOS NEGATIVOS

- **Invasión metastásica masiva del GC**
- **GC muy próxima al tumor primario**
- **Biopsia excisional previa**

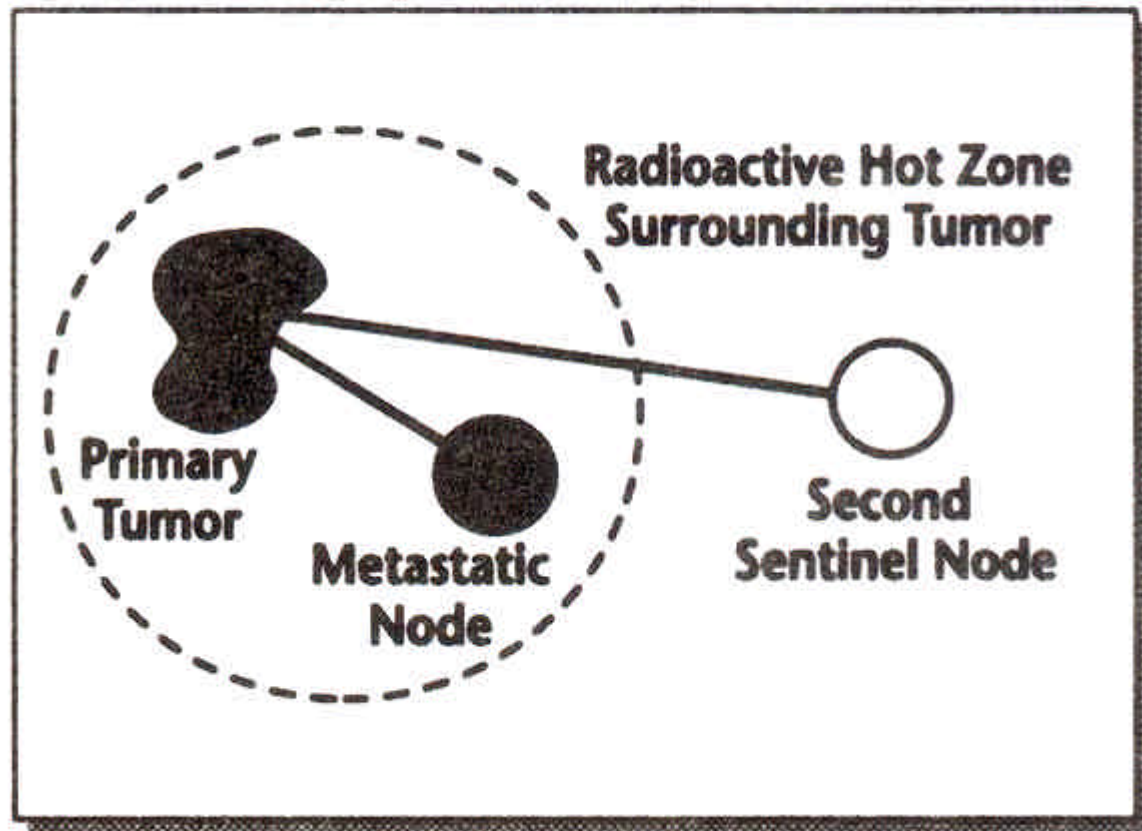


#1: Complete Metastatic Invasion



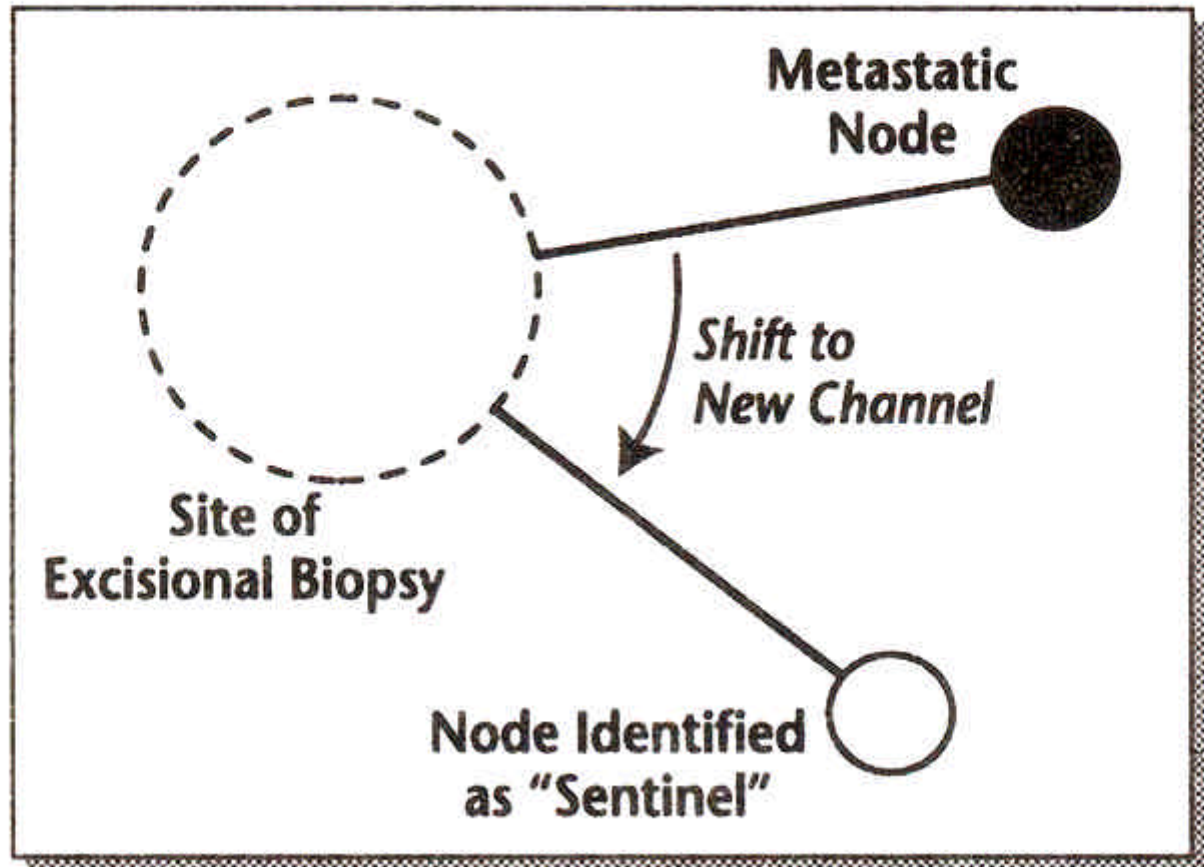


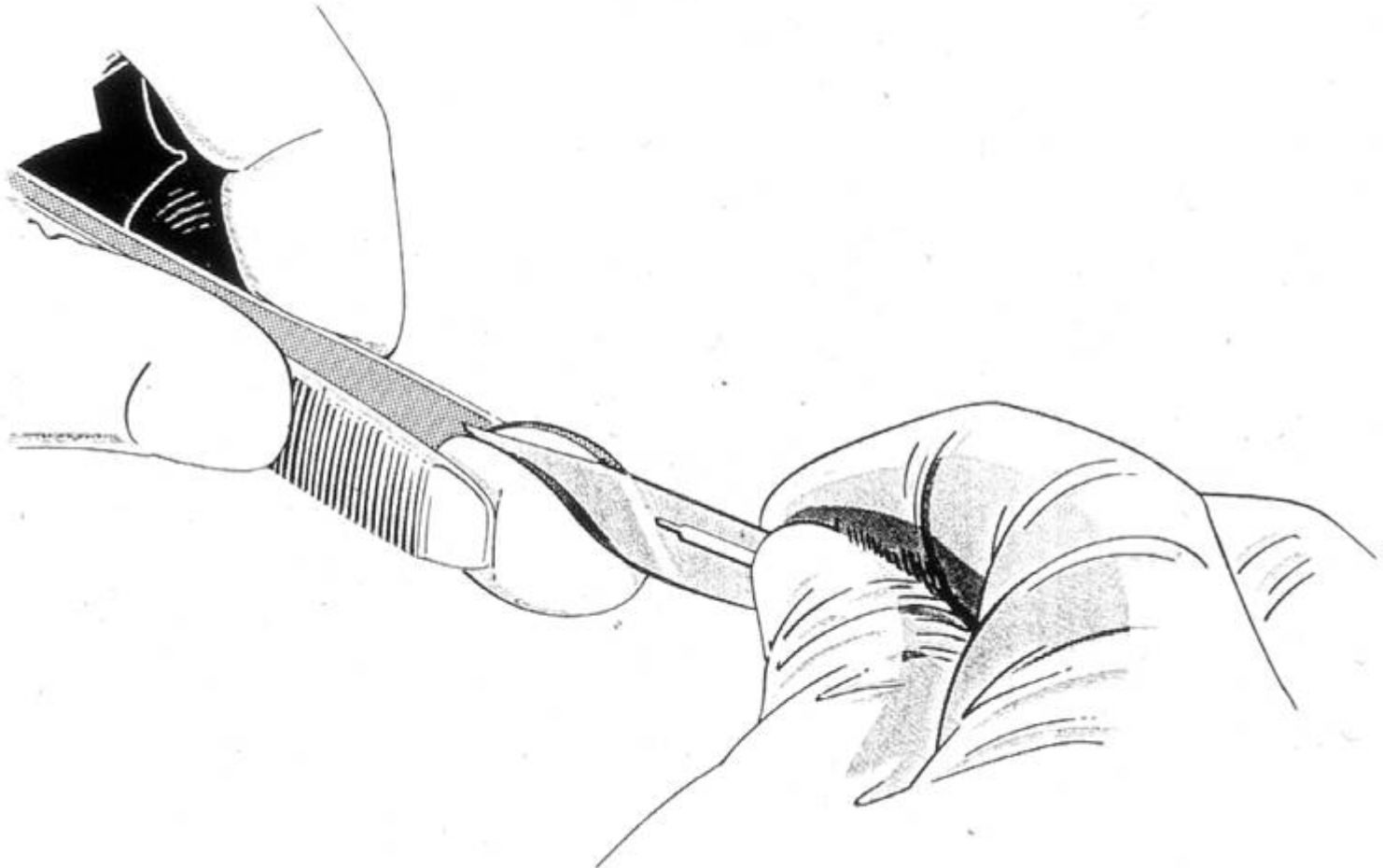
#2: Radioactive Shine-Through

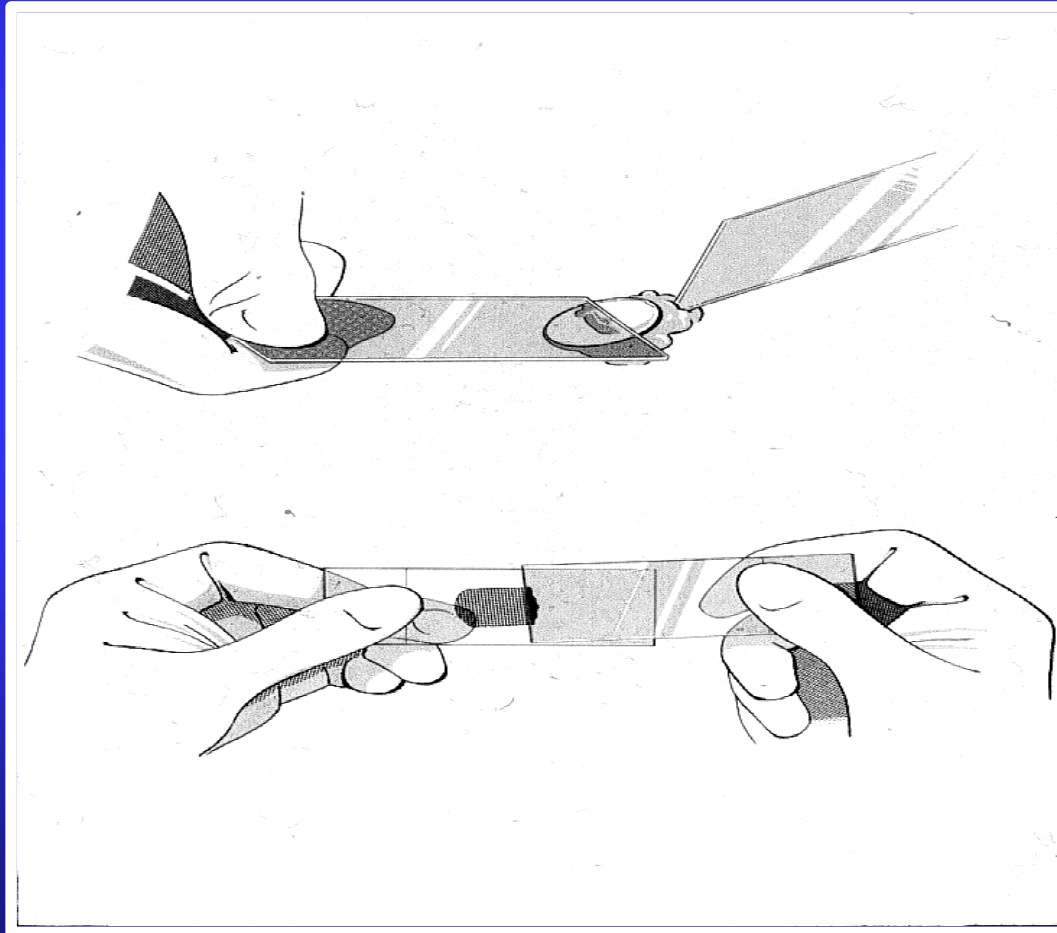


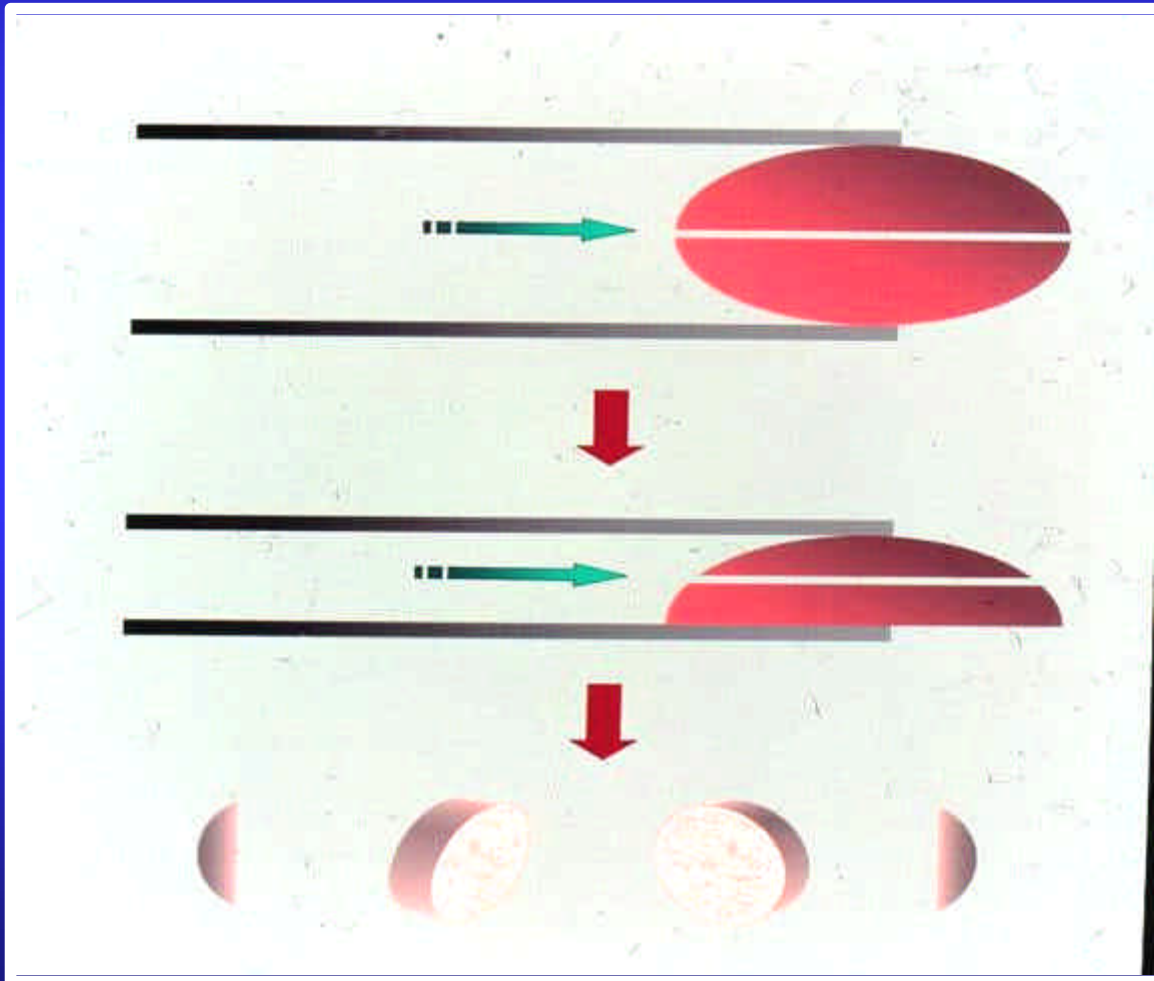


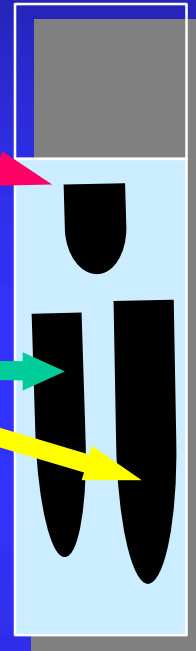
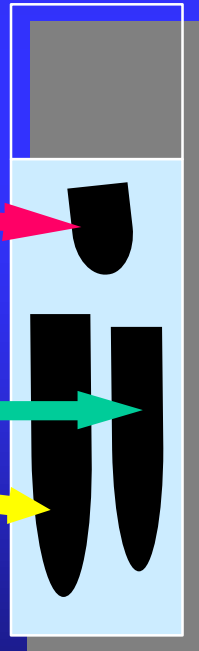
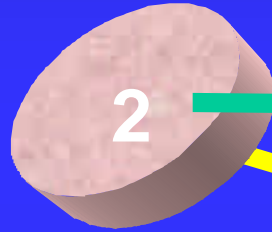
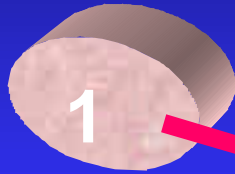
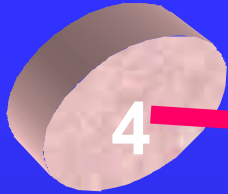
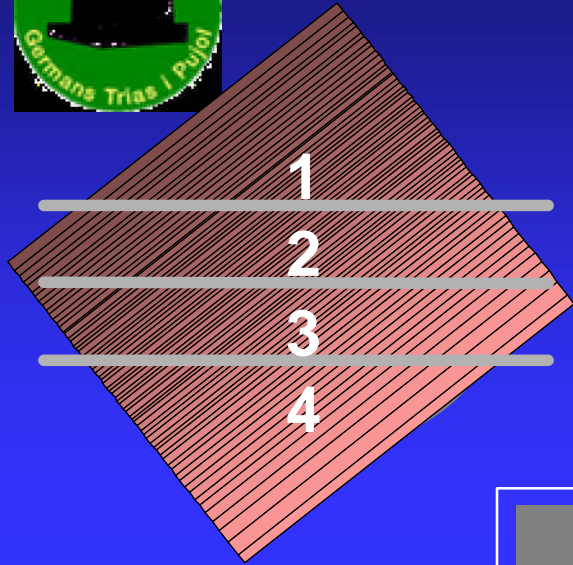
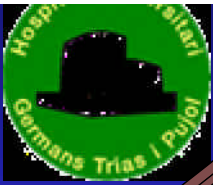
#3: Previous Excisional Biopsy

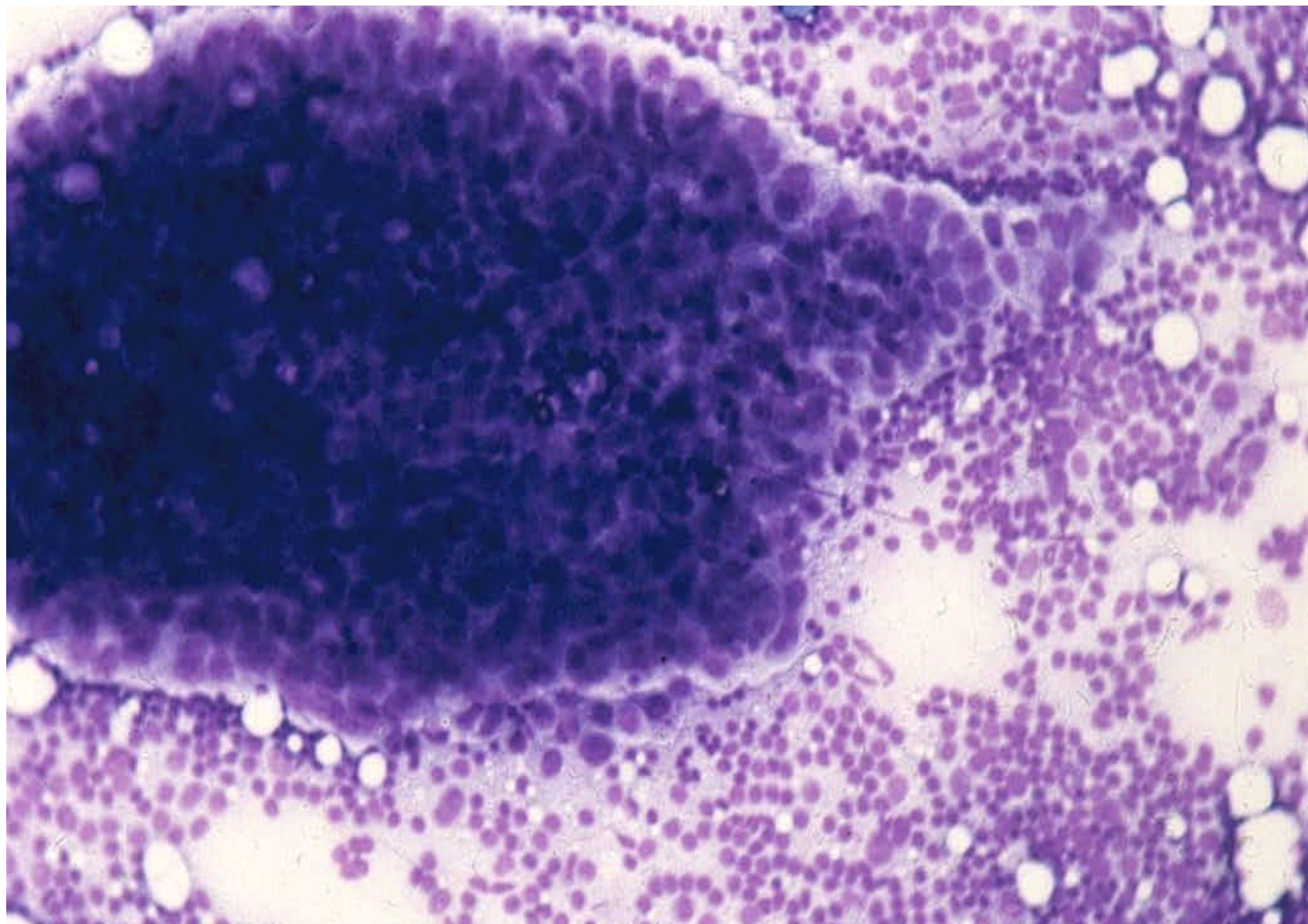


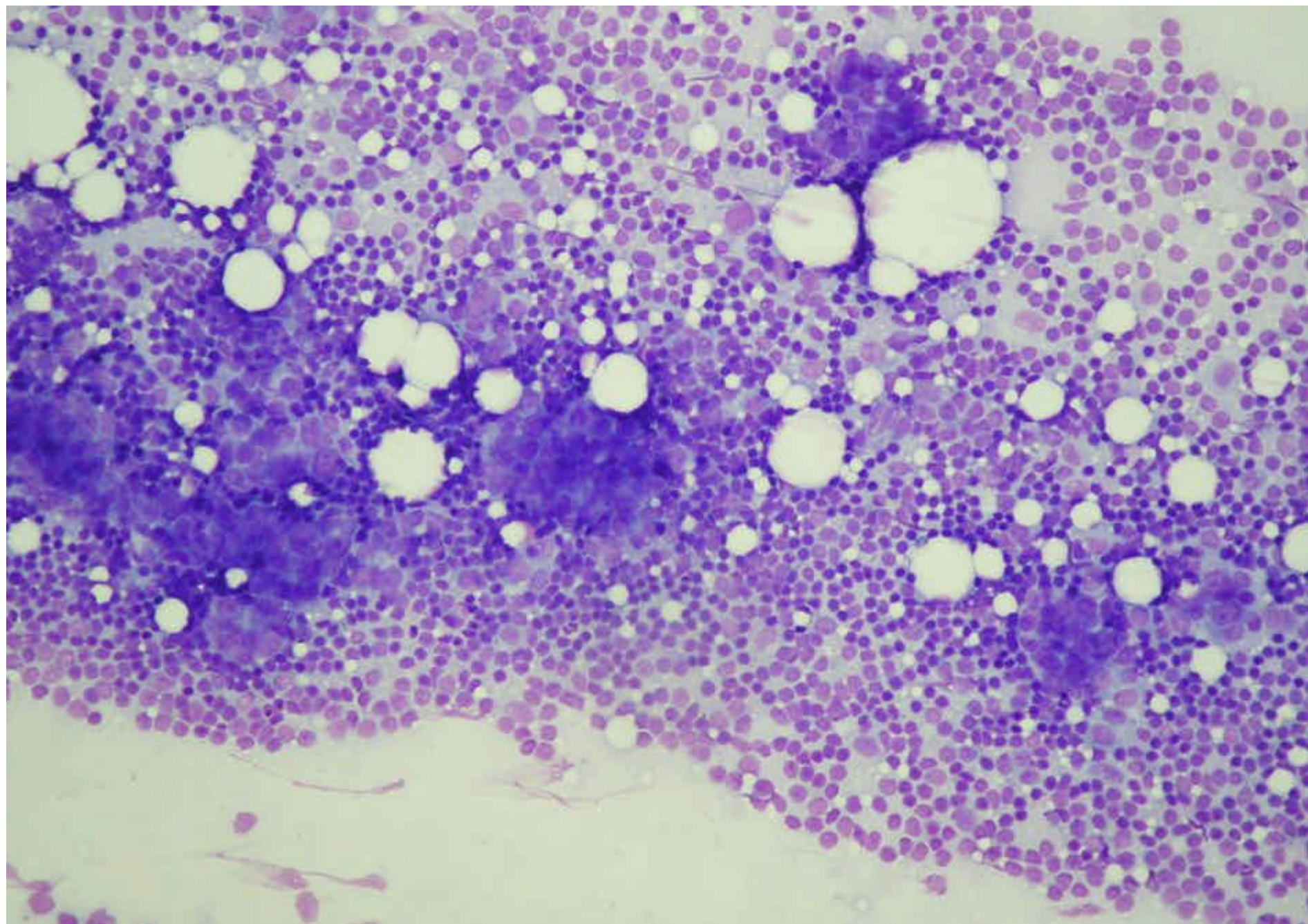


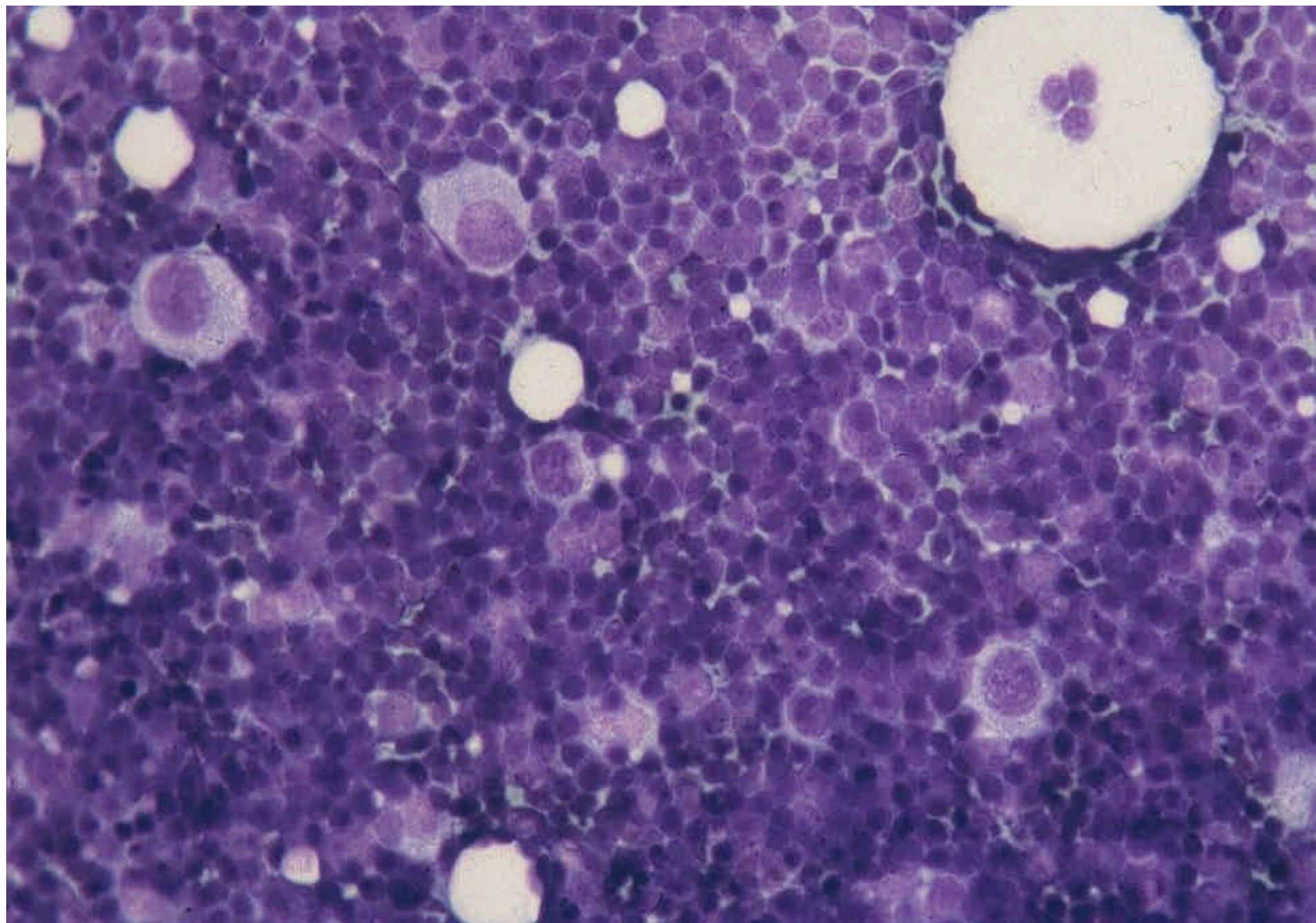


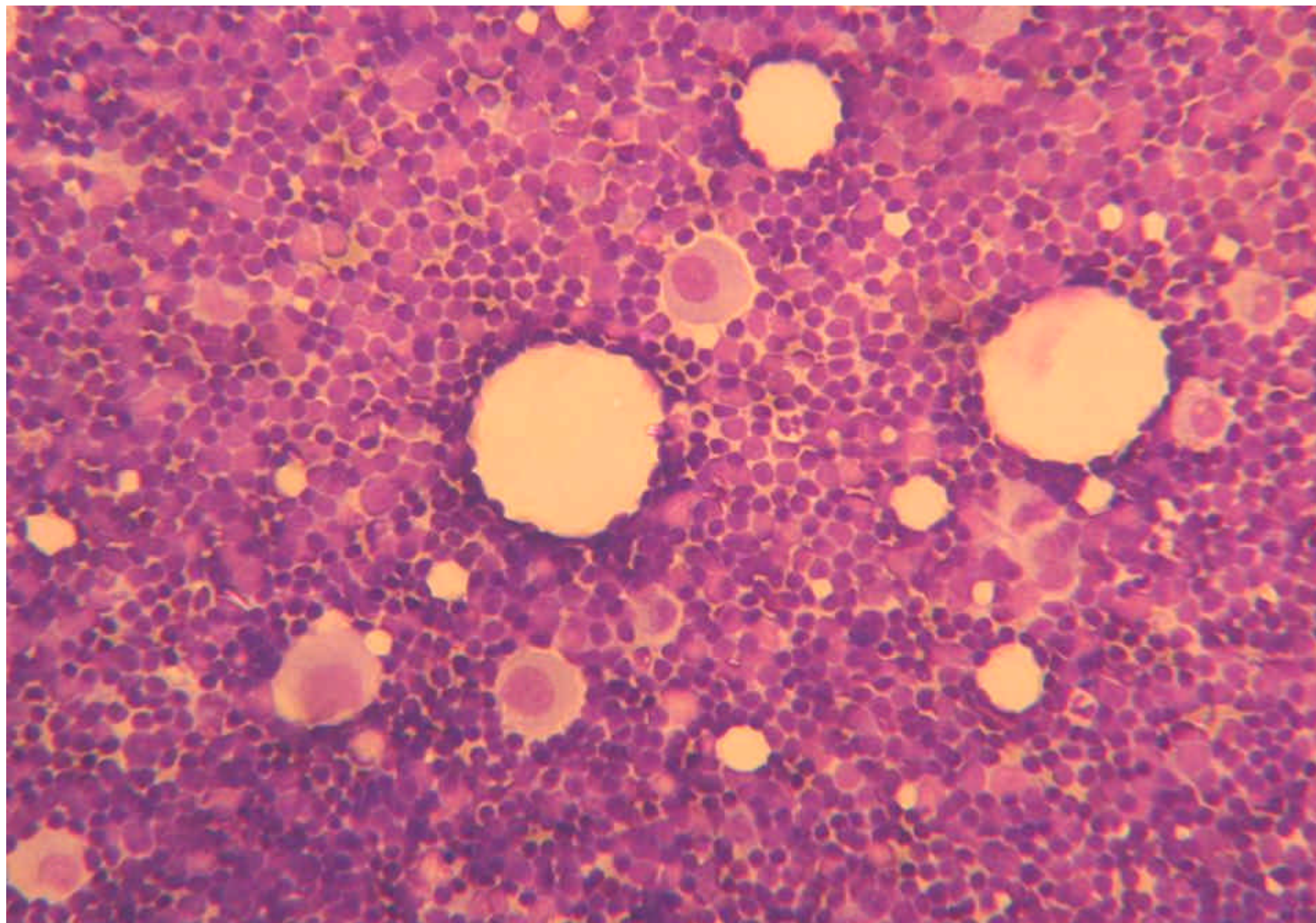


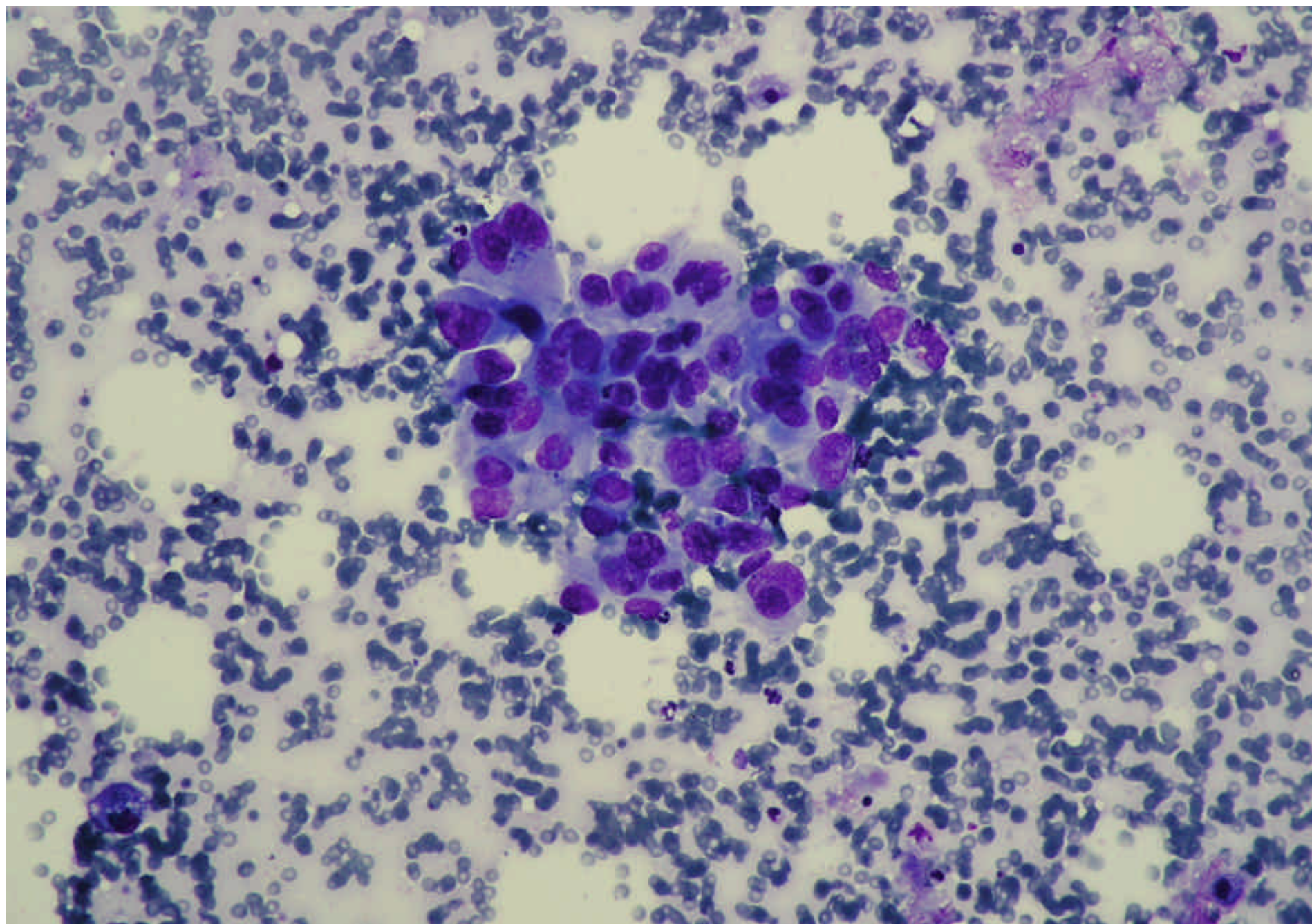


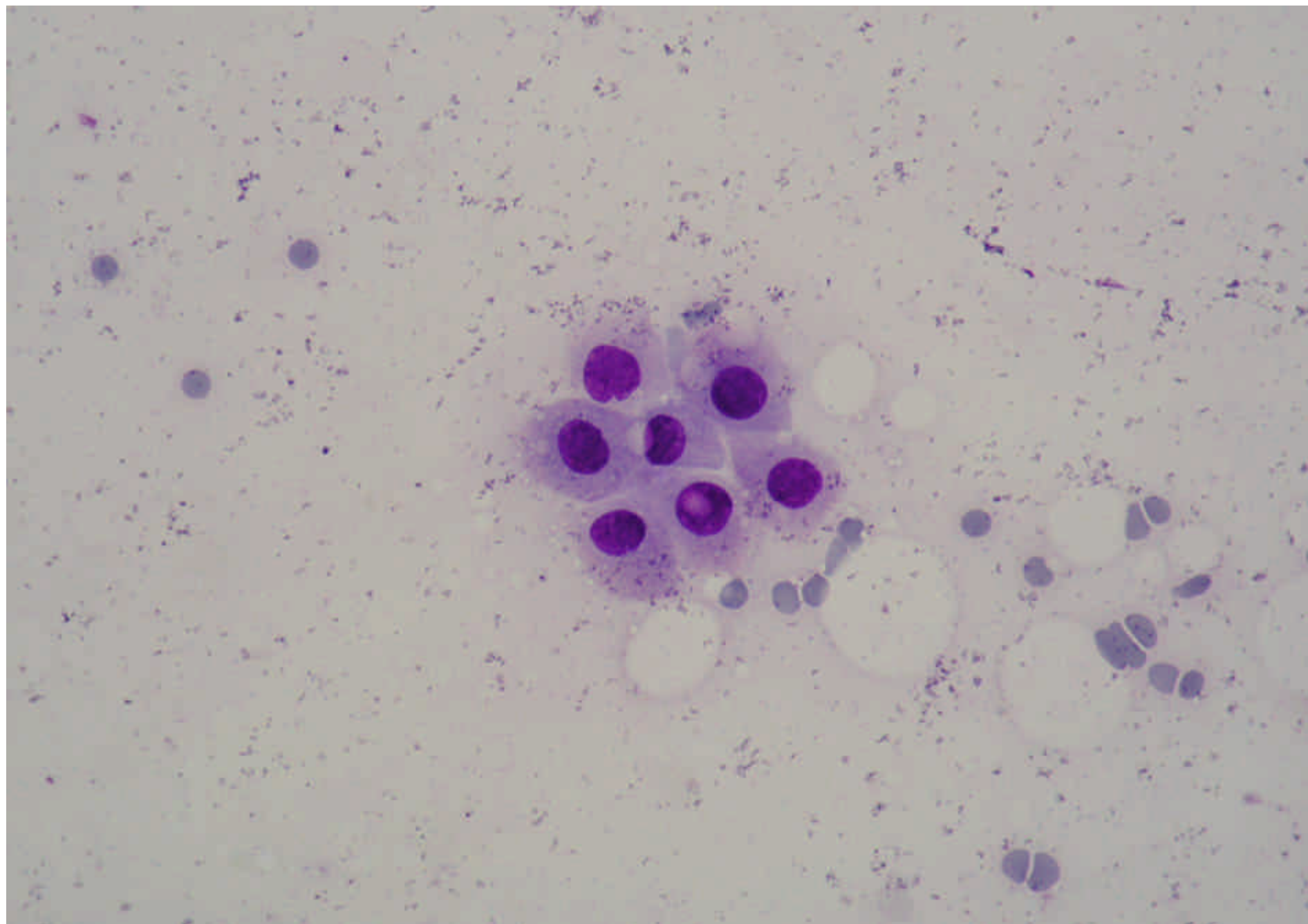














EXAMEN HISTOLOGICO DEFINITIVO

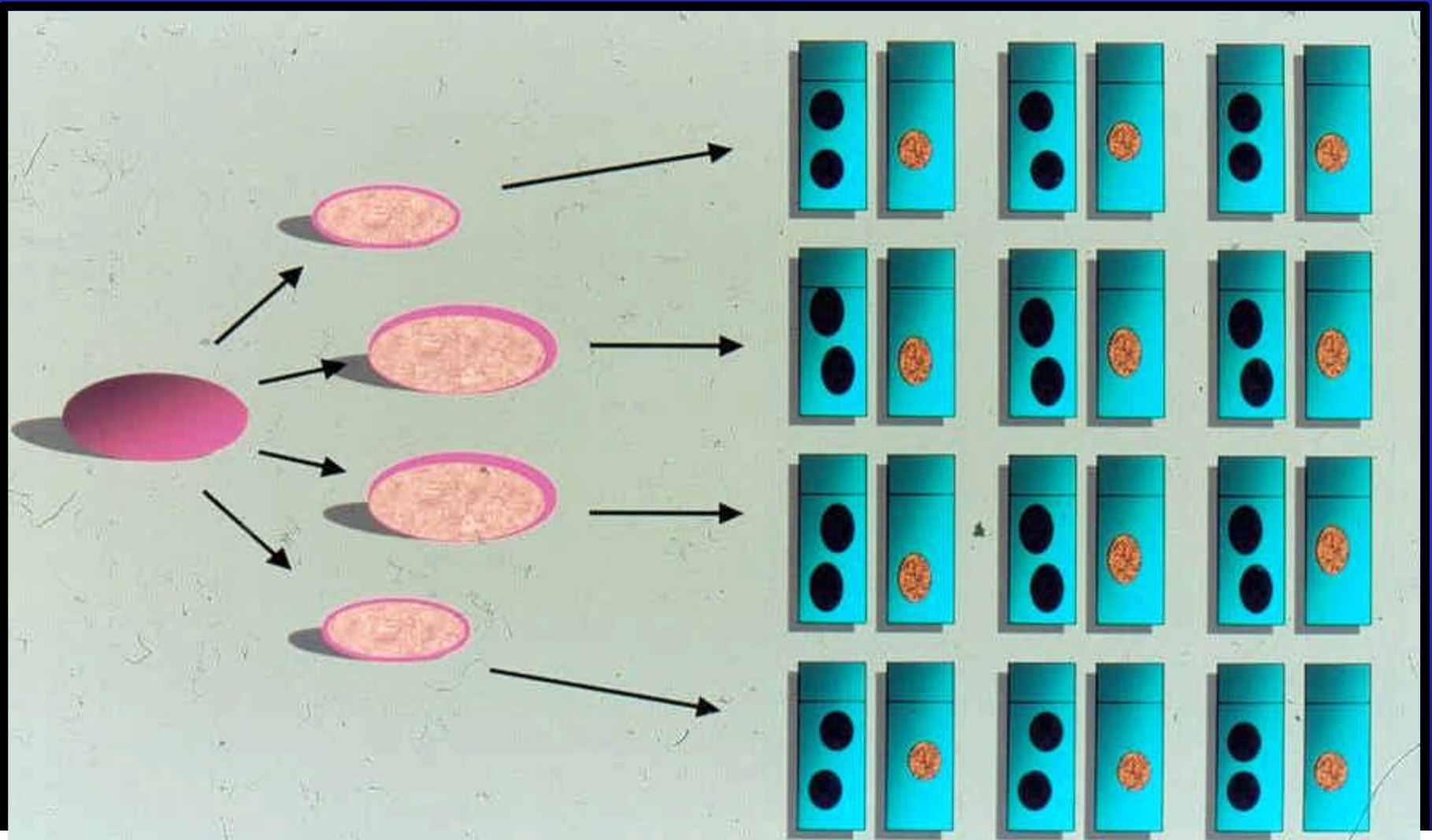
Fijación en formol 24 horas

Inclusión en parafina

secciones de 2mm

múltiples cortes seriados por bloque

tinción con H-E y CAM5.2





UICC International Union Against Cancer

TNM

Classification of Malignant Tumours

Edited by
L.H. Sobin and Ch. Wittekind

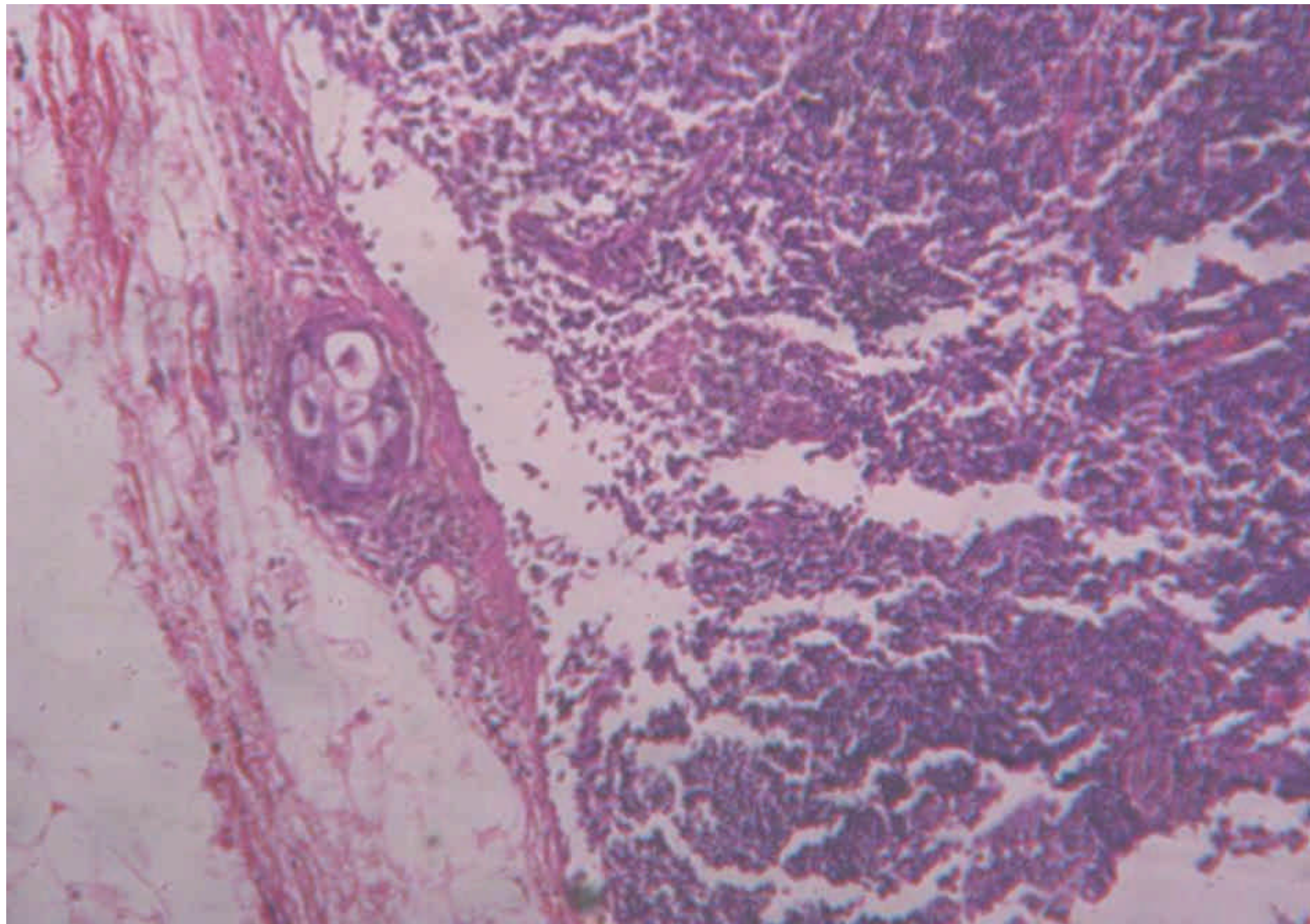
Sixth Edition
2002

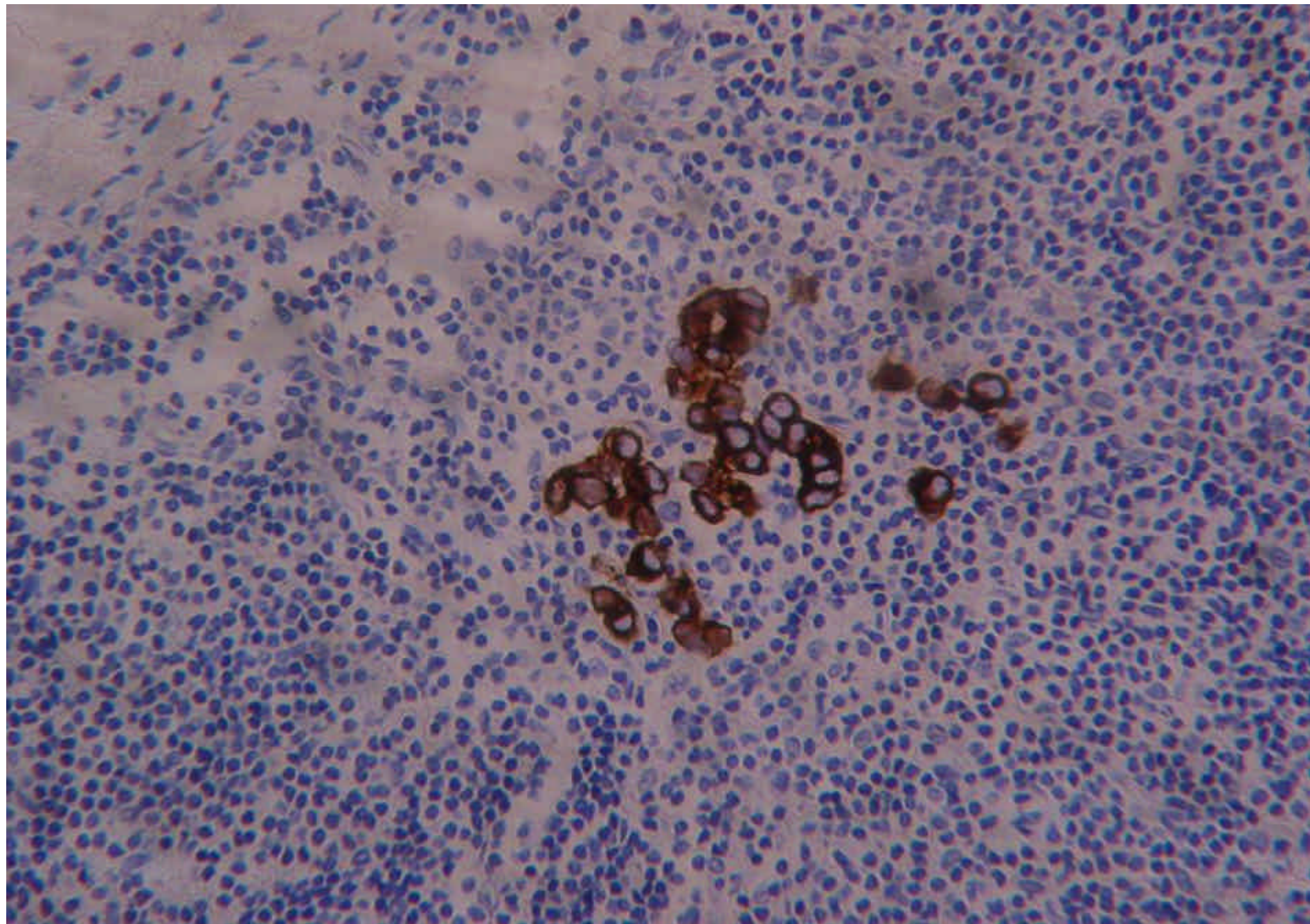
Se acepta GC: pNx(sn)

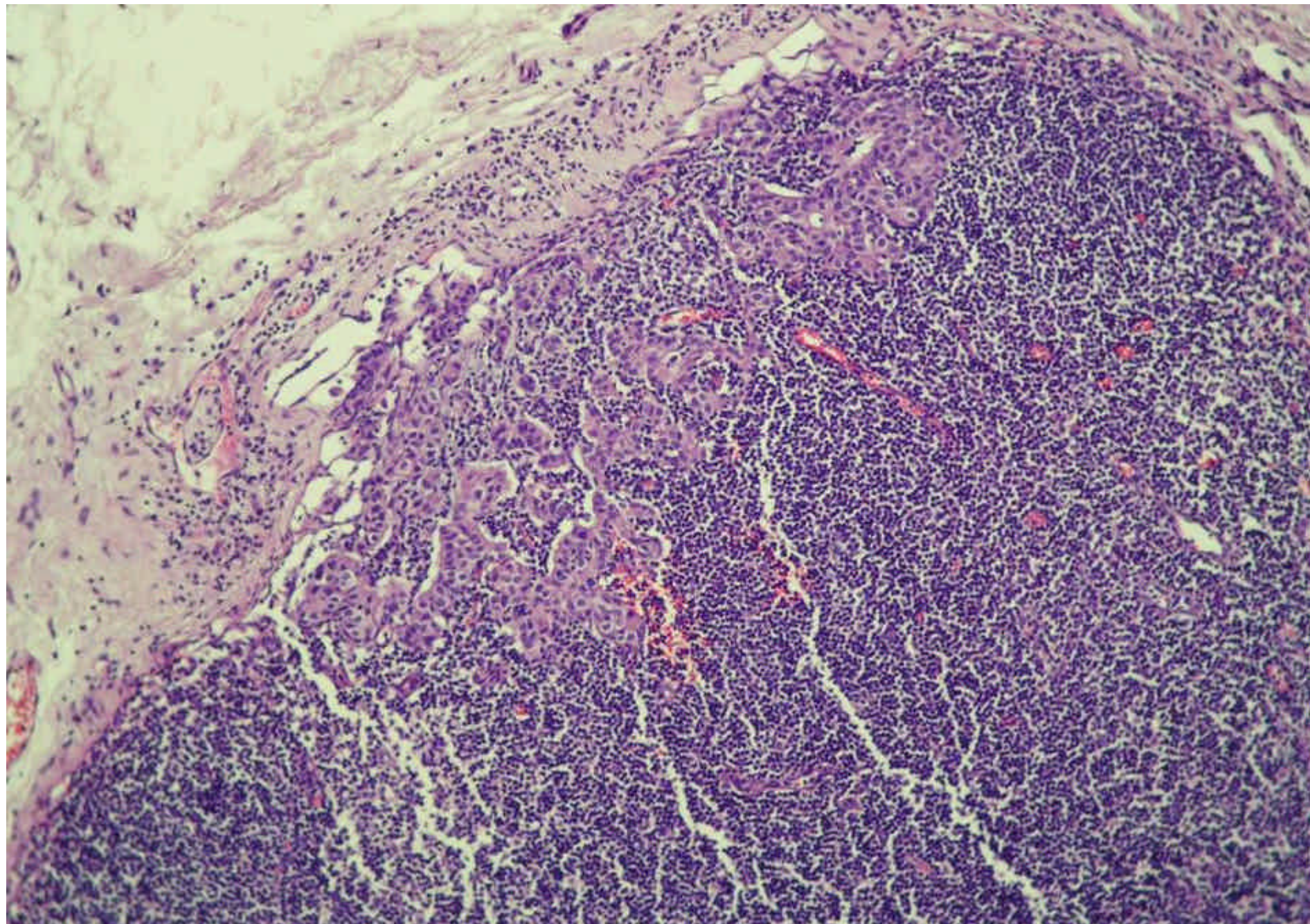
Micromet (pN1mi)

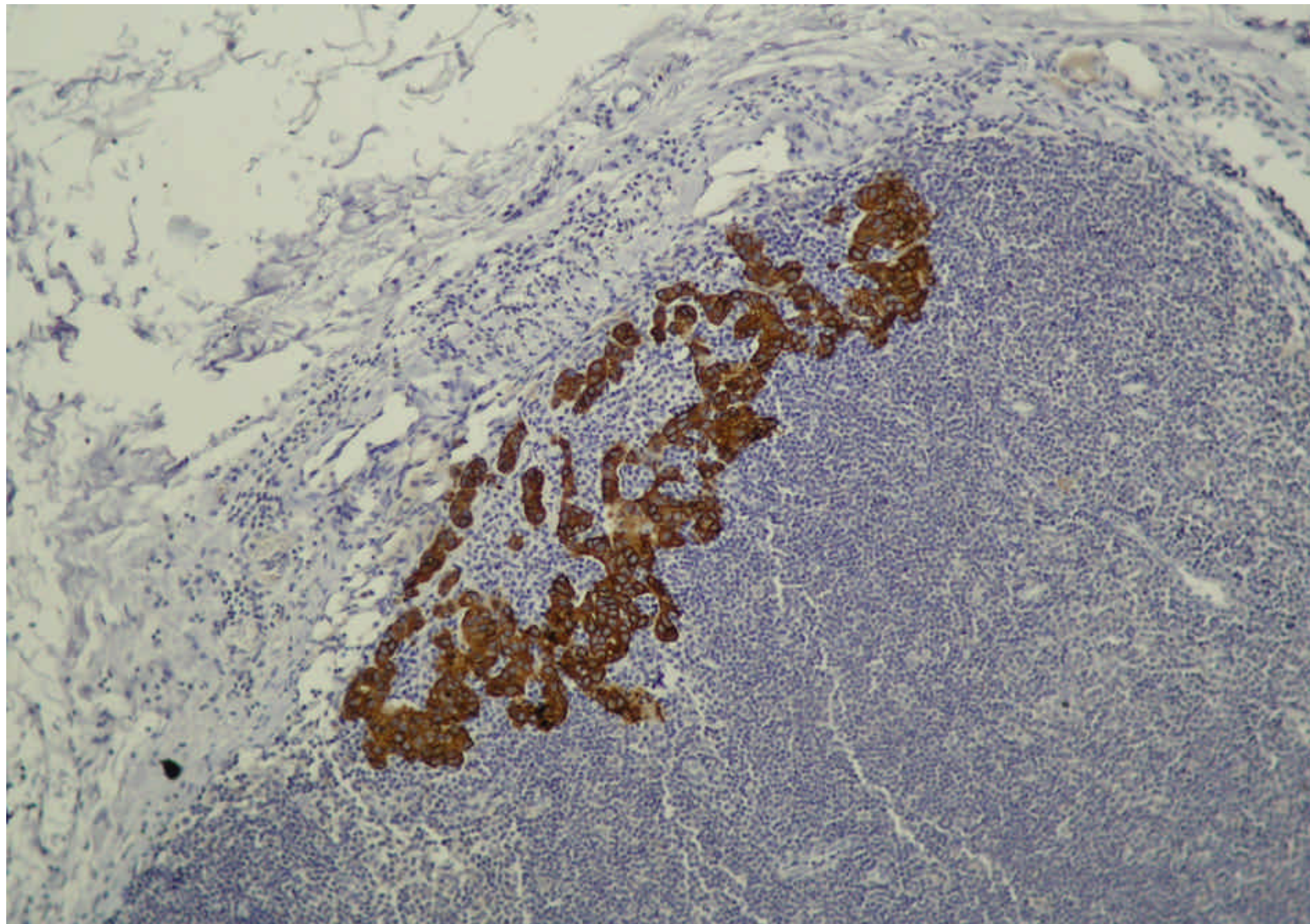
Se descartan casos de CTA
o de grupos celulares < 0,2 mm

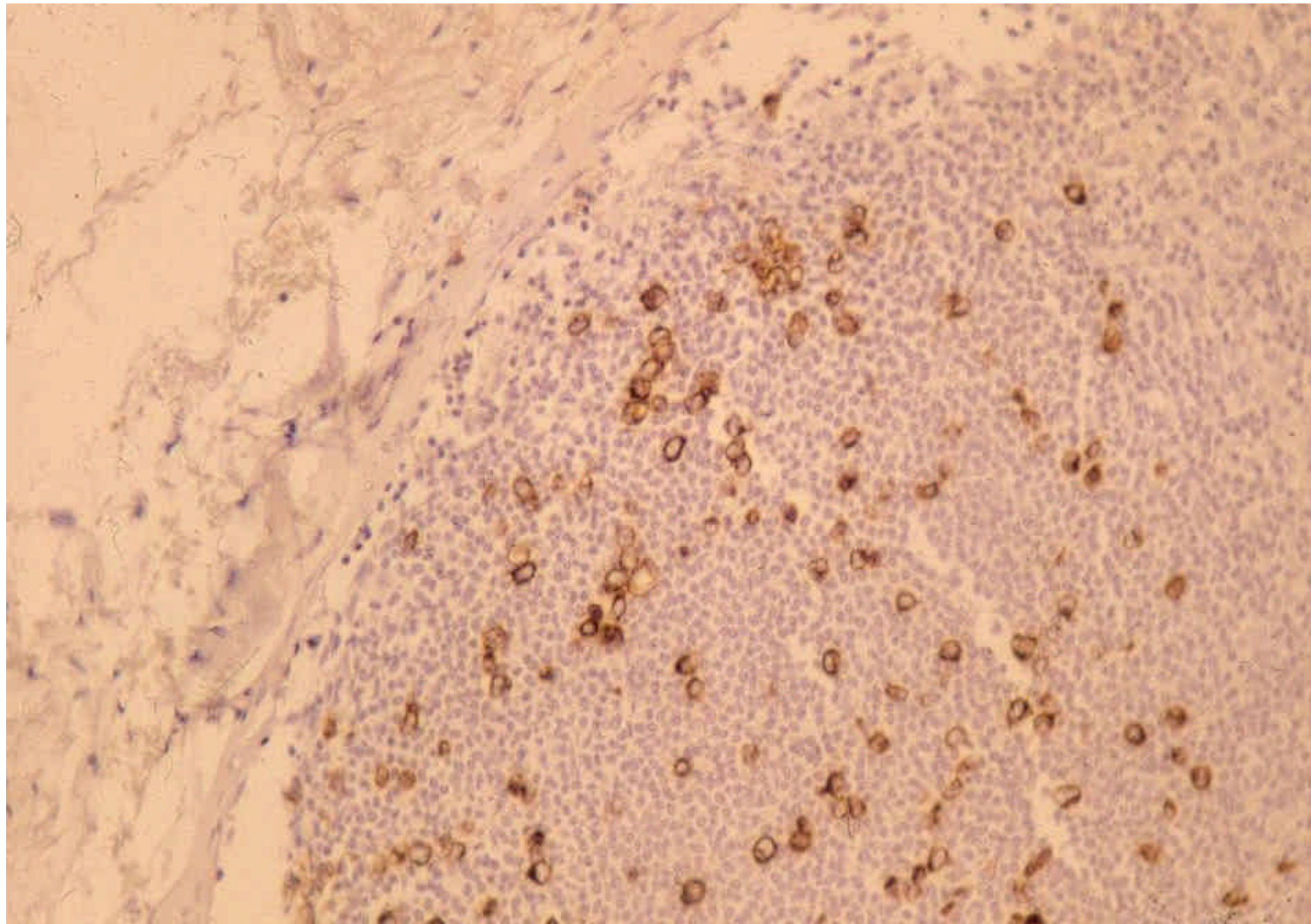
➔ NO













Resultados de la intraoperatoria

		HISTOLOGIA	
C I T O L O G I A		POSITIVO	NEGATIVO
	POSITIVO	VP 93 (14mmet)	FP 0
	NEGATIVO	FN 66 (59mmet)	VN 294



PARAMETROS DE EFICACIA

- SENSIBILIDAD 59%
- ESPECIFICIDAD 100%
- EXACTITUD DIAGNÓSTICA 85%
- VALOR PREDICTIVO POSITIVO 100%
- VALOR PREDICTIVO NEGATIVO 81%
- SENSIBILIDAD (macromet) 95%



CONCLUSIONES

- Técnica viable
- Valoración intraoperatoria del GC
- Cirugía primaria en un solo tiempo
- No alarga el tiempo de la intervención
- Sensibilidad óptima
- Baja detección de micrometástasis



RESULTADOS BGC POST-VALIDACION EN 490 PACIENTES CON CRITERIOS + RESULTADOS AP DEFINITIVOS

