

Life Support Technologies Group Announces That Hyperbaric Medicine Shown to Benefit Breast Cancer Survivors Undergoing Breast Reconstruction

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The clinical benefits of using hyperbaric oxygen therapy for breast cancer patients undergoing breast reconstruction has been described in a poster presentation at the 28th Annual Clinical Symposium on Advances in Skin & Wound Care held on October 23-27 at Lake Buena Vista, FL. In threatened mastectomy skin flaps treated at Good Samaritan Hospital, Suffern, NY, over a 4 year, 15 patient period, an 87.5% success rate was realized when hyperbaric oxygen therapy was used, against a success rate of only 14.2% in cases where it was not used.

Laura Sudarsky, MD, FACS, the study's Principal Investigator, said, "Complications from mastectomy and breast reconstruction can be devastating to our patients and may delay their cancer treatment, resulting in longer hospitalizations. This study indicates that hyperbaric treatment helps reduce some complications so the patients can resume their lives and cancer treatment with less delay."

Authors of the poster presentation, titled, "Hyperbaric Oxygen as an Adjunctive Therapy for Threatened Post Mastectomy Skin Flaps in the Setting of Staged Prosthetic Breast Reconstruction," are: Donovan Rosas, MD; Laura Sudarsky, MD, FACS; Michele Gilbert MSN, NP-C; all of Good Samaritan Regional Medical Center, Suffern, NY; and, Glenn J. Butler, CEO of the Life Support Technologies group (LST), Tarrytown, NY.

Hyperbaric treatment involves placing a patient in a specially constructed chamber under increased atmospheric pressure and administering 100% oxygen for the patient to breathe. From a medical standpoint, this treatment does several things: it highly oxygenates tissue to help restore viability, it promotes the building of capillary beds, kills bacteria, makes several facets of the immune system more effective, and helps wounds heal faster.

According to the National Breast Cancer Foundation, Inc., 1 out of 8 women will be diagnosed with breast cancer during their lifetimes. The National Cancer Institute at the

National Institutes of Health estimates that 2,829,041 women are currently living with breast cancer in the United States.

The presentation had several important conclusions based on the successful, early use of hyperbaric medicine for salvage of the reconstructed breast that presented a threatened mastectomy skin flap. Necrosis represents one of the most significant threats to successful breast reconstruction; in such cases, early identification and initiation of hyperbaric therapy (HBOT) is critical. The average time for initial HBOT was 8.57 days, whereas the lone HBOT failure has been attributed to significant HBOT treatment delay. Aggressive surgical debridement must also be used early in the treatment cycle and coupled with HBOT to salvage breast reconstructions and improve patient outcomes.

Glenn Butler, CEO of the Life Support Technologies group, which provides hyperbaric medicine services to Good Samaritan Regional Medical Center and 8 other hospitals, said, "This study shows how great an impact the proper use of hyperbaric treatment has when coordinated with other medical disciplines. The results are better outcomes for patients, reduced suffering, and savings in medical costs. Based on these results, a larger study is warranted."