

# **UNIVERSITY OF TORONTO BREAST CANCER RECONSTRUCTION**

## **FELLOWSHIP – July 2014 – June 2015**

I had the pleasure of being appointed as a University of Toronto Breast Reconstruction Fellow for the 12 month period of July 2014 – June 2015. The Fellowship is divided into 2 separate 6-month rotations, which provides exposure to all facets of breast reconstruction.

I spent the first 6 months based at Women's College Hospital under the supervision of Dr Semple and Dr Brown. Their practice has a strong focus on alloplastic breast reconstruction. I was able to be involved with a range of techniques including 2 stage reconstruction with tissue expanders, the use of AlloDerm to allow direct to implant reconstruction, and microfat grafting in the context of radiotherapy to improve the quality of tissue prior to expander placement. There was also a smaller volume of pedicled flap reconstruction. Women's College functions as an ambulatory care facility, which allowed me to observe these cases being performed as day surgery or short stay procedures and the protocols that they had in place to facilitate early discharge.

During this 6 month period I also had the opportunity to work with Dr Brown in his private clinic. This provided the chance to be involved with aesthetic breast surgery, as well as other aesthetic cases. The principles of aesthetic surgery are very relevant to reconstructive surgery and this experience enhanced my overall understanding of breast surgery.

The second 6 months was based at Toronto General Hospital, with time spent at Princess Margaret Cancer Centre and Mt Sinai Hospital. This period was supervised by Dr Zhong, Dr Hofer and Dr O'Neill. Their breast reconstruction practice has a strong emphasis on microsurgical techniques, whilst also providing further experience in alloplastic and pedicled flap procedures. Microvascular reconstruction is largely abdominal based (DIEP or muscle-sparing TRAM), but they also utilise SGAP and TUG flaps when appropriate. This time allowed me to hone my microsurgical skills in a high volume centre.

Additionally, I was exposed to other reconstructive cases, especially for sarcoma, head and neck, and pelvic or perineal. These were treated with a range of techniques including local, regional and free flaps. It was beneficial to see how they facilitated multidisciplinary cases with multiple other services around their already very busy personal schedules.

I had a very positive fellowship experience overall. In both centres I was involved in operating 3-4 days a week and clinic 1-2 days. This experience in 2 highly specialised, large volume centres has given me an excellent platform on which to start my own practice when I return home.

I am very grateful for this fellowship opportunity and would like to thank all of the mentors who gave freely of their knowledge and time. I would also like to thank Allergan for funding this fellowship and making it possible for me to spend this time in Toronto.

Sandhya Deo