Risks
Sentinel Node Biopsy is generally a safe procedure. However, like the general risks associated with any surgery, sentinel node dissection also carries a risk of complications, including:

- Bleeding
- Pain or bruising at the biopsy site
- Infection
- False intra-op result: The Sentinel Node is analysed by ‘frozen section’ by the pathologist during the surgery. If the node is reported as not showing cancer, no further surgery is performed for the armpit. However, there is a less than 5% chance that small cancer cells may not be visible on frozen section. This is known as a FALSE NEGATIVE report. In such cases, a second surgery may be required 7-10 days later to do an axillary clearance.

When to contact the doctor
You should contact your doctor immediately if you experience:

- Skin redness
- Bruising
- Fever

Why Medanta - The Medicity?
We at Medanta have developed a dedicated unit of Medanta Breast Services to diagnose and treat the entire spectrum of conditions affecting breasts. The latest use of technology integrated with radiology as well as nuclear medicine enables us to quantify the risk of relapse and tailor therapies accurately. We are the only centre in India to offer MRI guided Vacuum assisted Breast Biopsy (VABB), Gamma probe for Sentinel Node Biopsy etc. for all the diseases of breast. Also, our unit has been designed on the guidelines laid down by the European Union Society of Mastology (EUSOMA). Our innovative treatment strategies and supportive environment make treatment as effective and comfortable as possible.
Introduction
The Sentinel Lymph Node is the first lymph node that receives lymphatic drainage from the breast. The first potential place that breast cancer cells can spread to is the lymph glands in the axilla (armpit).

There may be more than one Sentinel Lymph Node.

Why is it done
Traditionally most of the lymph glands were removed as part of the first breast cancer operation in order to identify those glands that are involved. This in turn helps to determine whether other treatments (e.g. chemotherapy) are needed. It also prevents cancer spreading to the lymph glands in the future.

However, removing all the glands in the armpit is associated with complications like numbness and increased risk of infection in the arm and swelling of the arm (lymphedema). Sentinel Node Biopsy is a reliable and safe technique that avoids most of the complications associated with traditional axillary surgery. It is performed in breast cancer patients where pre-surgery tests do not show any abnormality in the lymph glands.

Preparation for the procedure
There are no specific preparations required for this procedure. Your surgeon will give you specific instructions on how to prepare for surgery, including guidelines on eating & drinking and avoiding certain medications.

Dos and Don'ts
DOs

- Bathe using antiseptic soap on the day of surgery, wash your hair.
- Brush your teeth properly on the day of surgery
- Remove nail polish
- Do not shave, rather preferably wax your armpit a few days before
- Remove all your jewelry
- Bring
  - Cotton bra
  - Comfortable footwear
  - Body lotion
- Front open cotton shirt / top
- Lip balm
- Reading materials

DON'Ts

- Do not wear make up/nail-polish
- Do not wear any kind of jewellery/hand or wrist bands
- Do not bring a synthetic/under-wire bra
- Do not use talc/body sprays/body lotion on the day of surgery

During the procedure

We at Medanta use the dual technique of a blue dye and a safe radioactive tracer as per the international guidelines to assess the sentinel or 'gatekeeper' lymph node(s) and check whether the cancer cells have spread to the axilla. It is based on the theory that cancer spread to the lymph nodes follows a systematic pattern. If the sentinel node is uninvolved, the remaining nodes are highly unlikely to have cancer.

Not all patients are suitable for this technique (for example those with large tumours or those that have enlarged glands on their initial assessment).

What if the sentinel node is positive for cancer?

In the event of the sentinel node being ‘positive’ for cancer, the rest of the axillary glands are removed.

In most of the cases, sentinel node biopsy is done at the same time as the primary surgery for breast cancer. In other cases, Sentinel Node Biopsy can be done before surgery to assess lymph node involvement, particularly if chemotherapy is being planned before the surgery.

After the procedure

You will wake up in the recovery room after your operation. While you are in the recovery room, a nurse will check your pulse and blood pressure regularly. Other symptoms after the procedure may include:

- Nausea
- Pain

Generally you will be able to go home the same day. However, returning to your regular activities will depend on your individual situation.

Benefits

- Minimally invasive treatment option as compared to the axillary Lymph Node Biopsy
- With sentinel node biopsy only one lymph node or a small cluster of two to three nodes need to be removed
- It accurately identifies the node(s) that are at highest risk for involvement with breast cancer
- Desirable treatment option for women who have early stage disease with a relatively low risk of lymph node involvement