ASO AUTHOR REFLECTIONS

ASO Author Reflections: Modified External Oblique Myocutaneous Flap for Breast Cancer

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PAST

Locally advanced breast tumors (LABT) at the limit of resectability are a problem in clinical practice. Fasciocutaneous flaps or myocutaneous flaps allow skin coverage after cutaneous extended resections, and the latissimus dorsi flap is the most common option used.^{1,2}

PRESENT

New therapies are able to decrease the size of LABTs,³ but some tumors are poor responders, making extended surgery necessary for local control.^{1,2} The external oblique myocutaneous flap is an option after LABT resection, with acceptable rates of complications.⁴

FUTURE

The modified external oblique myocutaneous flap is another possible option after LABT resection, and allows resection of large tumors at the limit of resectability.⁵

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