

Comparing Short- versus Long-Term Quality of Life Following Autologous or Implant-Based Breast Reconstruction

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Background/Aim

Autologous and alloplastic breast reconstruction techniques differ in risks and benefits, while the impact of follow-up duration on quality of life remains unclear. This study compares **short-term** (≤12 months) and long-term (>12 months) PROMS using the BREAST-Q.

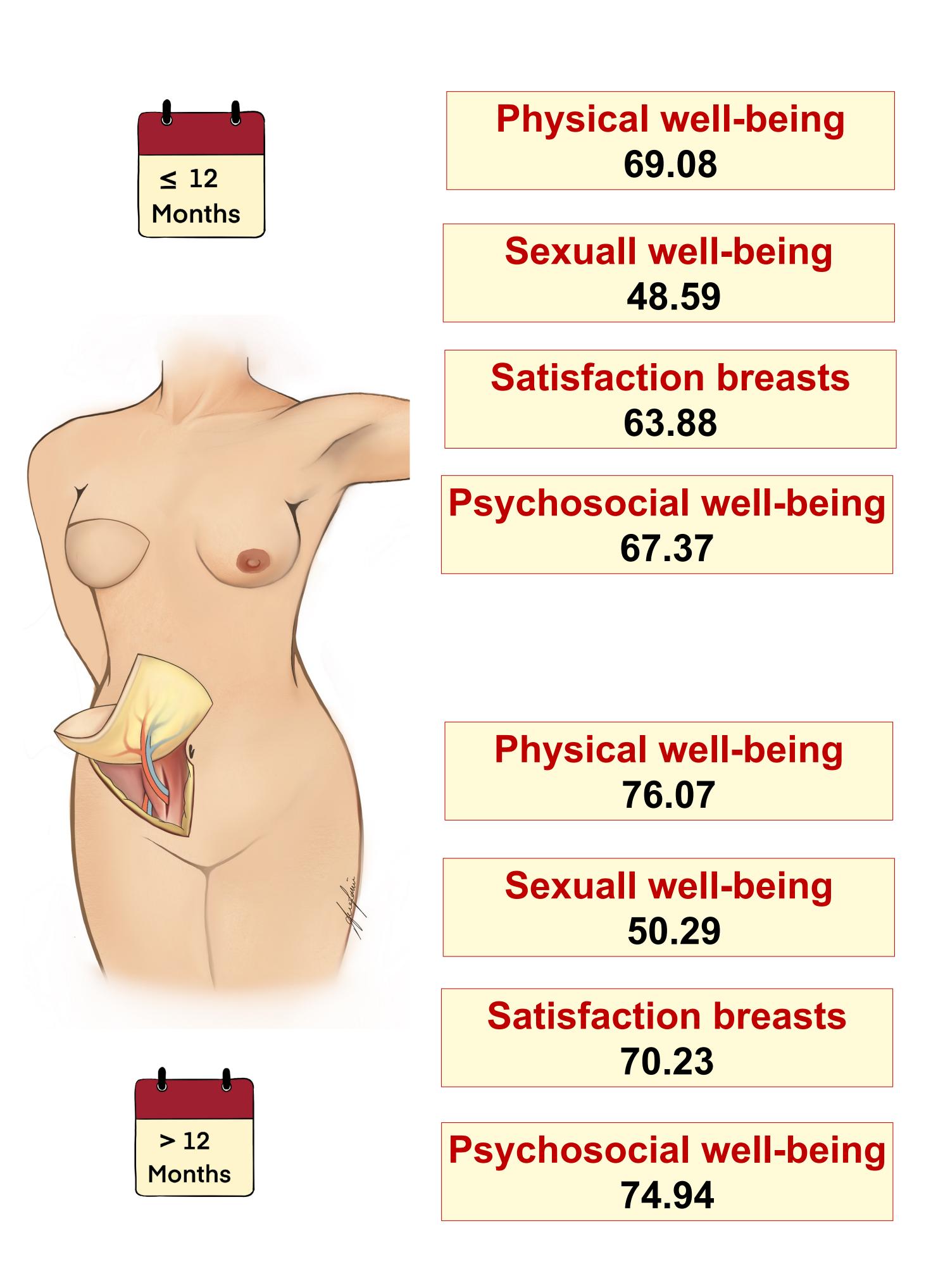
Methods

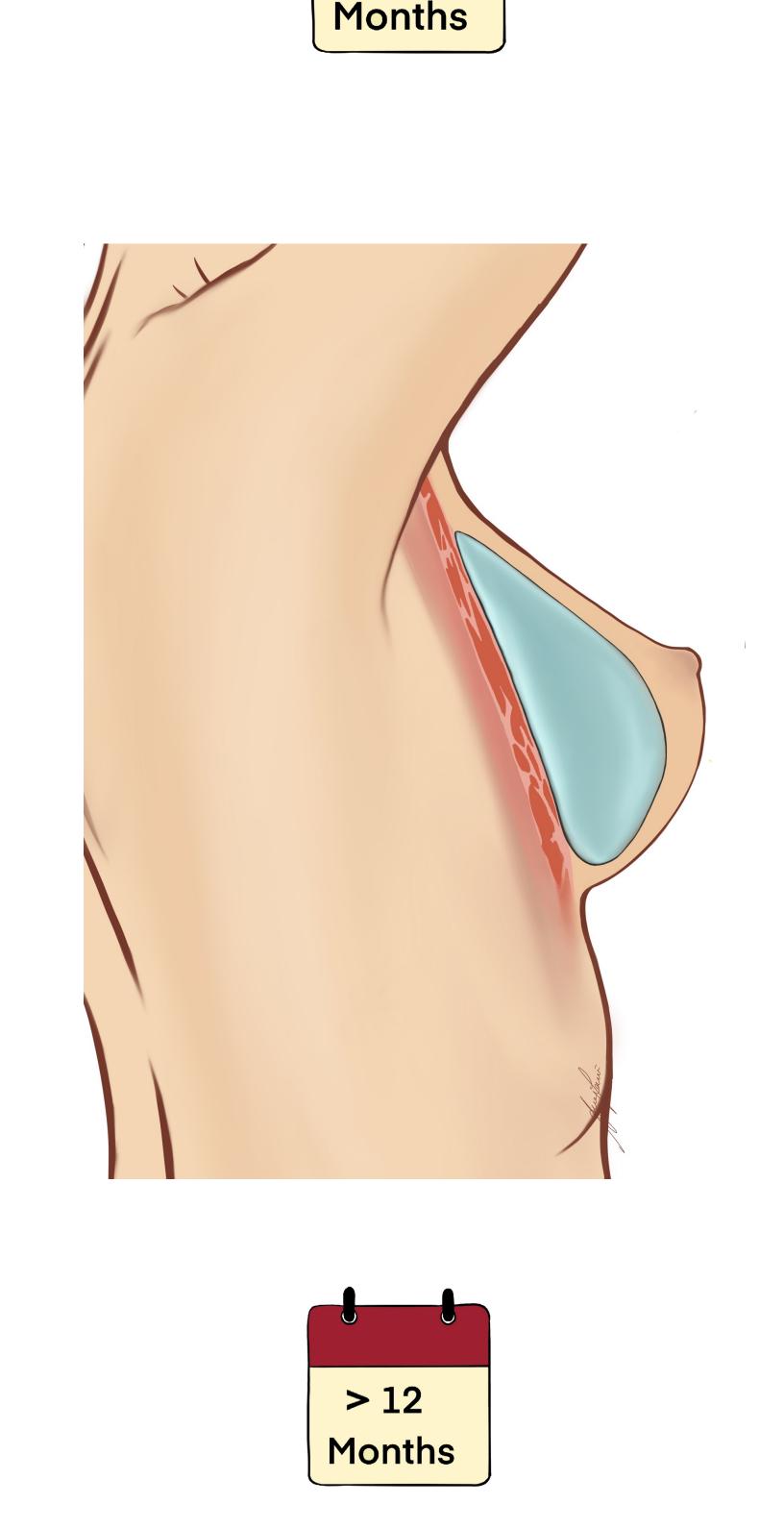
- Systematic review & meta-analysis of RCTs & cohort studies reporting BREAST-Q
 - Outcomes stratified by follow-up (≤12 vs. >12 months)

Results

Out of 9,141 records, 195 studies met inclusion criteria.

Breast-Q scores reported in mean.





≤ 12

Physical well-being 68.57

Sexuall well-being 58.28

Satisfaction breasts 64.43

Psychosocial well-being 72.78

Physical well-being 71.13

Sexuall well-being 56.66

Satisfaction breasts 62.86

Psychosocial well-being 72.97

Conclusion

Autologous reconstruction demonstrated superior long-term outcomes in physical, psychosocial, and breast satisfaction domains. In contrast, alloplastic reconstruction showed higher sexual well-being and slightly better short-term scores. Follow-up duration significantly influences PROMs and should be considered to manage patient expectations and tailor