This brochure provides useful information on Breast Implant Anaplastic-Associated Large Cell Lymphoma (BIA-ALCL):

- What it is
- Symptoms
- Testing options
- Diagnosis
- Treatment

BIA-ALCL is a rare and highly treatable type of lymphoma that can develop around breast implants. BIA-ALCL occurs most frequently in patients who have breast implants with textured surfaces.

The risk of developing BIA-ALCL is between 1 in 1,000 to 1 in 30,000 women with textured breast implants. When caught early, BIA-ALCL is usually curable.



# WHAT PATIENTS NEED TO KNOW

# **Breast Implant Associated-Anaplastic Large Cell Lymphoma** (BIA-ALCL)









# **BIA-ALCL SYMPTOMS**



Common symptoms include breast enlargement, pain, asymmetry, lump in the breast or armpit, overlying skin rash, hardening of the breast, or a large fluid collection typically developing more than one year after receiving an implant.

### Have you developed symptoms?

Women who develop these symptoms should see their physician to be evaluated with a physical exam and further testing. Patients with BIA-ALCL symptoms will receive an ultrasound or a magnetic resonance imaging (MRI) of the symptomatic breast to evaluate for fluid or lumps around the implant and in the lymph nodes.

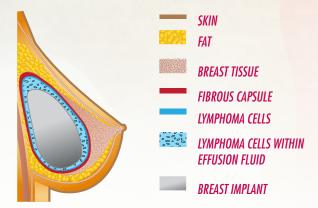
If fluid or a mass is found, patients will require a needle biopsy with drainage of the fluid to test for BIA-ALCL. This fluid will be tested for CD30 immune staining (CD30IHC) performed by a pathologist. Testing for CD30IHC is required to confirm a diagnosis or rule out BIA-ALCL. Fluid collections ruled out by CD30IHC for BIA-ALCL will be treated as typical seromas by a physician. Most insurance companies confirm coverage for both testing and treatment of BIA-ALCL, regardless of whether the patient received cosmetic or reconstructive implants; patients should review plans for their individual coverage. There is no testing or screening for women without symptoms.

# **BIA-ALCL DIAGNOSIS**

# Have you been diagnosed with BIA-ALCL?

Receiving the diagnosis of BIA-ALCL may cause anxiety and frustration but women should know that not all cancers are equal. When caught early, BIA-ALCL is curable in most patients.

ASPS endorses BIA-ALCL guidelines established by the National Comprehensive Center Network (NCCN), which defines diagnosis and treatment based on proven methods to treat the disease.



### **Treatment of BIA-ALCL**

When a woman is diagnosed with BIA-ALCL, her physician will refer her for a PET/CT scan to look for any disease that may have spread throughout the body. Any spread of the disease determines the stages, which is important for treatment.

For patients with BIA-ALCL only around the implant, surgery is performed to remove the breast implant and the scar capsule around the implant.

Patients with more advanced forms of BIA-ALCL may have disease in their lymph nodes, in their bones and/or organs. These patients require further treatment with chemotherapy.

#### **After Treatment**

Following removal of the disease, patients are commonly followed for two years with imaging tests in three- to six-month appointments. Disease re-occurrence is rare after surgical removal for early disease. The FDA recommends that all cases be reported to the ASPS PROFILE registry so that BIA-ALCL may be tracked and followed to better understand and prevent this rare disease.

# For further information, recommended BIA-ALCL resources are available:

- The Plastic Surgery Foundation: www.thepsf.org/PROFILE
- The American Society of Plastic Surgeons: www.plasticsurgery.org/alcl
- MD Anderson Cancer Center: www.mdanderson.org/cancer-types/ implant-associated-anaplastic-large-celllymphoma.html
- The US FDA: https://www.fda.gov/ MedicalDevices/ProductsandMedical Procedures/ ImplantsandProstheti

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