

BREAST SURGERIES IN ONCOLOGY: NORTHERN REGION COMPARED TO OTHER BRAZILIAN MACRO-REGIONS

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Introduction: Breast cancer is the second most common cancer in all regions of Brazil and has the second highest cancer mortality among women in the North. Its treatment includes conservative or invasive clinical and surgical approaches, and the therapeutic choice depends on the degree of staging, tumor characteristics and the patient's clinical condition. In this perspective, late diagnosis, especially in regions where screening is not widely available, has increased the need for invasive surgical procedures, requiring major mobilization on the part of the public health network. **Objectives:** To analyze the differences between the profile of oncological surgical interventions for breast cancer between the public network in the North of Brazil and the other Brazilian macro-regions, in the period from 2020 to 2024. **Methods:** Descriptive, retrospective and quantitative study, using data from the SUS Information and Informatics Department (DataSUS), referring to the following procedures: radical mastectomy with lymphadenectomy; radical mastectomy with axillary lymphadenectomy in oncology; simple mastectomy in oncology; breast segmentectomy/quadrantectomy/sectectomy in oncology and resection of non-palpable breast lesion with marking in oncology, performed between 2020 and 2024. In this way, the variables hospitalizations, deaths and mortality rate were analyzed. **Results:** During the period analyzed, there were 99,825 hospitalizations for breast surgery in oncology in Brazil, with breast segmentectomy/quadrantectomy/sectectomy in oncology being the most recurrent (33,860) and radical mastectomy with lymphadenectomy the least frequent (3,214). The highest numbers of hospitalizations occurred in the Southeast (48,534), Northeast (20,247) and South (18,853), while the lowest numbers were in the North (6,721) and Midwest (5,470). There were a total of 77 deaths from breast surgery in the period under analysis, the highest number being in the Southeast (30), Northeast (15) and South (14), while the lowest were in the North (10) and Midwest (8). Regarding mortality rates, the highest were in the Midwest and North, which had the same value of 0.15, while the lowest were in the Northeast (0.07), South (0.07) and Southeast (0.06). **Conclusion:** In the last 5 years, the North was the fourth region in terms of hospitalization

rates for the procedures analyzed, with the Southeast leading the statistics, which can be explained by the greater number of inhabitants or the greater availability of health resources in the regions with higher registered values. Similarly, in terms of the gross number of deaths, the North was behind the Southeast, Northeast and South. However, the North stands out in second place when comparing the mortality rate between the macro-regions, which considers each region's population, a fact possibly related to lower healthcare quality when compared to the rest of the country. These parameters reinforce the need for investment in health systems in the North of Brazil, to meet the demand for important procedures associated with the oncological treatment of breast cancer, as well as improving screening and early diagnosis of the disease to avoid the need for more invasive procedures.

Keywords: Breast neoplasms; surgical oncology; epidemiology.