

Surgery & Integrative Medicine

November 17-18, 2025 | London, UK



Mahin Chowdhury, Jan Walukiewicz, Kantappa Gajanan

The Christie Hospital NHS, Manchester, United Kingdom

Prevalence of contralateral lymphatic drainage patterns during sentinel lymph node biopsy for truncal melanoma: A retrospective, observational study

This study aimed to examine the prevalence, patterns, and outcomes of contralateral lymphatic drainage during sentinel lymph node biopsy (SLNB) in truncal melanoma patients. Understanding this phenomenon is crucial for improving surveillance and management strategies for melanoma patients. This retrospective cohort study analysed 1,308 consecutive patients aged 18 and over who underwent wide local excision (WLE) for truncal melanoma followed by SLNB at The Christie Hospital, Manchester, UK, between October 2006 and November 2024. Exclusions included non-truncal melanoma and cases without lymphoscintigraphy (LS) data. SLNB evolved from intradermal injection of blue dye to include radiolabelled Technetium-99m-nano colloid. Contralateral drainage was defined as sentinel lymph nodes draining exclusively to the opposite side of the coronal midline relative to the WLE scar. Data were correlated with imaging results and patient outcomes. Contralateral drainage occurred in 14 patients (1.1%). This subgroup had melanoma thicknesses ranging from 0.80–6.40 mm and included 8 males and 6 females (ages 26–72 years). Notably, 10 cases involved posterior torso melanomas, with 6 located on the lower back. Three patients (21.4%) experienced melanoma recurrence during follow-up, all on the ipsilateral side. One patient treated in 2007 died following recurrence, while two patients treated in 2018 and 2021 remain alive following immunotherapy. Contralateral sentinel lymph node drainage, though rare, highlights the need for tailored surveillance strategies for truncal melanoma patients, particularly those with posterior torso lesions. These findings underscore the importance of incorporating this data into patient consent and individualised care plans.

Keywords

Truncal melanoma, Wide local excision, Sentinel lymph node biopsy, Contralateral lymphatic drainage, lymphoscintigraphy, Melanoma recurrence

Biography

I am a motivated surgical trainee who has a research background encompassing publication of multiple papers in the field of medicine and surgery. I also have an established record of teaching medical students and doctors in hospitals, and am enthusiastic about presenting my work at international conferences to share and learn about clinical practices globally.