

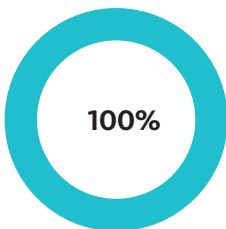
**PUBLICATION SPOTLIGHT**

## Sentimag® – Magseed®

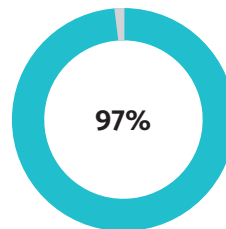
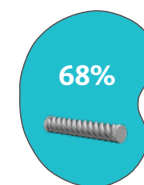
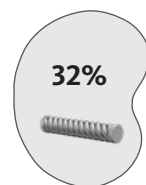
# Targeted Axillary Dissection (TAD) – results from 390+ target node localisations

Breast cancer patients diagnosed with clinically positive lymph nodes often receive neoadjuvant systemic therapy (NAST) with the aim to downstage or eradicate the disease. To accurately assess the response in the breast and the axilla, it is important that both the positive lymph node/s and the breast lesion are marked before NAST to be able to locate them later on. Systemic therapy can negatively impact lymphatic drainage and hence reduce the accuracy of the sentinel lymph node biopsy (SLNB). However, when SLNB is paired with removal of the previously positive target lymph node, a technique called Targeted Axillary Dissection (TAD), the operation becomes a lot more accurate. Studies of TAD have demonstrated a false negative rate of < 2% compared to SLNB alone. (Caudle et al. JCO 2016)

The Magseed® marker has already been used to safely and effectively localise over 100,000 breast lesions and axillary lymph nodes. Its small size makes it the ideal marker for TAD and can now be implanted in any soft tissue for as long as required. Clinical studies involving over 370 patients globally have demonstrated accurate placement, no migration once implanted and accurate removal. In addition to improving clinical outcomes, it also offers a better patient experience and promotes seamless radiology and OR scheduling. When the Magseed® marker is used in combination with the lymphatic tracer Magtrace®, they offer the world's only wire-free, radiation-free solution for TAD in one platform.

**Placement success**

**Longest placement to surgery time**


Range = 0 – 155 days

**Retrieval rate**

**Nodal identity**

 Sentinel  
node

 Non-sentinel  
node

## Clinical study results – selection

First author	Patients	Seeds placed	Placement success	Longest placement to surgery time	Retrieval rate	TLN = SLN
Reitsamer <sup>1</sup>	40	50	100%	ND	100%	65%
Salazar Gomez <sup>2</sup>	28	29	100%	ND	100%	52%
Benn <sup>3</sup>	4	5	100%	155 days	100%	ND
Greenwood <sup>4</sup>	35	38	97%	31 days	97%	ND
Sinnett <sup>5</sup>	15	15	93%	ND	93%	86%
Miller <sup>6</sup>	ND	129	100%	ND	100%	ND
Simons <sup>7</sup>	50	50	100%	30 days	100%	80%

## Target lymph node localisation – clinical results

### Publications

**[1] Reitsamer R et al. (2021):** *The applicability of Magseed® for Targeted Axillary Dissection in breast cancer patients treated with neoadjuvant chemotherapy. The Breast 57: 113–7. [abstract]*



**[2] Salazar Gomez et al. (2019):** *Utilidad de la semilla magnética para la localización de los ganglios axilares tras tratamiento neoadjuvante. 4th Spanish Breast Congress. [open access]*

**[3] Benn C et al. (2019):** *The use of Magseed to localise loco-regional lymph node recurrences prior to chemotherapy. ESSO39–0509. [abstract]*



**[4] Greenwood H et al. (2019):** *Feasibility of Magnetic Seeds for Pre-Operative Localization of Axillary Lymph Nodes. AJR 213: 1–5. [abstract]*

**[5] Sinnett V (2019):** *Magnetic seeds: An attractive localisation option for management of axillary node positive breast cancer. EJSO 45(5): 889. [abstract]*



**[6] Miller et al. (2019):** *Hospital system rollout and initial experience with stainless magnetized seeds for breast and lymph node localization. Ann. Surg. Oncol. 26(suppl. 1). [abstract]*

**[7] Simons JM et al. (2019):** *Prospective Trial of Magnetic Seed Localization of Clipped Nodes after Neoadjuvant Chemotherapy in Node Positive Breast Cancer. Ann. Surg. Oncol. 26(suppl. 1). [open access]*



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