使用抗白三烯酸類藥物治療夾膜攣縮的實證分析

鄭旭棠　許永昌　吳肇毅　張家寧
中國醫藥大學附設醫院 外科部 整形外科

Antileukotriene Agents for Capsular Contracture: An Evidence-Based Analysis

Hsu-Tang Cheng, Yung-Chang Hsu, Chao-I Wu, Sophia Chia-Ning Chang
Division of Plastic and Reconstructive Surgery, Department of Medicine, China Medical University Hospital

Purpose:
Capsular contracture is one of the most distressing complications following breast augmentation. Currently, the therapeutic mainstay for capsular contracture is revision surgery. However, surgical management is limited by its high recurrence rate. Antileukotriene agents are approved medications for the treatment of asthma. A number of studies indicated their efficacy in the treatment of capsular contracture, but to date there is no consensus on the off-label use of antileukotriene agents for capsular contracture. To assess the efficacy and safety of antileukotriene agents in capsular contracture, we conducted a systematic review.

Materials and Methods:
We searched the PubMed database from January 2000 to October 2011. We used the following key words: antileukotriene agents, Zafirlukast (Accolate), Montelukast (Singulair), and capsular contracture. We excluded the non-English articles and studies in experiment animals. This search was supplemented by a review of reference lists of potentially eligible studies. Two reviewers independently extracted data in two steps: titles and abstracts, and then full text articles. Current experience, indications and outcome were analyzed. Relevant studies were assigned a level of evidence with the American Society of Plastic Surgeons Evidence Rating Scale for Therapy.

Results:
Through our electronic and reference search we identified five citations. There were one randomized controlled trial (Level II Evidence), three case series (Level IV Evidence), and one cases report (Level V Evidence). In the randomized controlled trial involving 120 patients conducted by Scuderi N et al., Zafirlukast, compared to Vitamin E, dramatically reduced “mean” mammary compliance after 6 months of treatment without major complications. However, in this study, only the mammary compliance examiners were blinded, and there was no description about the method used to generate the sequence of randomization, patient characteristics in each group, and the duration of follow-up. Moreover, we could not know the treatment response rate in this study

Conclusion:
The literature on the clinical efficacy and safety of antileukotriene agents in capsular contracture had not well documented. A prospective, well-designed, large scale, randomised, controlled, triple-blind trial involving identical patient groups,

with clearly-defined treatment outcome, adequate follow-up duration, and elaborate side effect report is needed.