



Correspondence

Automatic detection of perforators for microsurgical reconstruction



Sir:

We read with interest the article by Mavioso et al. this is a valuable pilot study on the use of artificial intelligence (AI) in preoperative mapping of perforators with computed tomography (CTA) [1]. Selection of the best perforators is of uttermost importance, as it is the only source of blood supply to the flap. This selection reduces operative time, lower complication rates and ensure an overall better result [2]. The current gold standard for perforator selection is CTA but it has disadvantages: use of intravenous (IV) contrast agents and ionizing radiation, high purchasing costs, a lack of preoperative usability, and a lack of physiological information on flow characteristics [3]. The use of AI will improve reproducibility and decrease time-consuming human input in perforator selection [1]. Dynamic Infrared Thermography (DIRT) can be an alternative technique in perforator mapping and perfusion assesment [4,5]. DIRT is less invasive than CTA as it does not use radiation nor contrast agents [4–7]. We developed a standardized measurement set-up for the use of DIRT during breast reconstruction with perforator flaps [8]. With this set-up AI can potentially be an interesting tool in assessing perforators and perfusion pre-, per- and postoperatively with DIRT.

References

- [1] Mavioso C, Araujo RJ, Oliveira HP, et al. Automatic detection of perforators for microsurgical reconstruction. *Breast* 2020;50:19–24. <https://doi.org/10.1016/j.breast.2020.01.001>.
- [2] Uppal RS, Casaer B, Van Landuyt K, et al. The efficacy of preoperative mapping of perforators in reducing operative times and complications in perforator flap breast reconstruction. *J Plast Reconstr Aesthetic Surg* 2009;62:859–64. <https://doi.org/10.1016/j.bjps.2008.04.015>.
- [3] Mohan AT, Saint-Cyr M. Advances in imaging technologies for planning breast reconstruction. *Gland Surg* 2016;5:242–54. <https://doi.org/10.3978/j.issn.2227-684X.2016.01.03>.
- [4] de Weerd L, Mercer JB, Weum S. Dynamic infrared thermography. *Clin Plast Surg* 2011;38:277–92. <https://doi.org/10.1016/j.cps.2011.03.013>.
- [5] Thiessen FEF, Tondu T, Cloostermans B, et al. Dynamic InfraRed Thermography (DIRT) in DIEP-flap breast reconstruction: a review of the literature. *Eur J Obstet Gynecol Reprod Biol* 2019;242:47–55. <https://doi.org/10.1016/j.ejogrb.2019.08.008>.
- [6] Weum S, Mercer JB, de Weerd L. Evaluation of dynamic infrared thermography as an alternative to CT angiography for perforator mapping in breast reconstruction: a clinical study. *BMC Med Imag* 2016;16:43. <https://doi.org/10.1186/s12880-016-0144-x>.
- [7] John HE, Niumsawatt V, Rozen WM, et al. Clinical applications of dynamic infrared thermography in plastic surgery: a systematic review. *Gland Surg* 2016;5:122–32. <https://doi.org/10.3978/j.issn.2227-684X.2015.11.07>.
- [8] Thiessen FEF, Tondu T, Vermeersch N, et al. Dynamic infrared thermography (DIRT) in Deep Inferior Epigastric Perforator (DIEP) flap breast reconstruction: standardization of the measurement set-up. *Gland Surg* 2019;8:799–805. <https://doi.org/10.21037/ggs.2019.12.09>.

Filip E.F. Thiessen^{a,*}, Thierry Tondu^a, Veronique Verhoeven^b, Guy Hubens^c, Gunther Steenackers^d, Wiebren A.A. Tjalma^e

^a Department of Plastic, Reconstructive and Aesthetic Surgery, Multidisciplinary Breast Clinic, Antwerp University Hospital, University of Antwerp, Wilrijkstraat 10, B-2650 Antwerp, Belgium and Department of Plastic, Reconstructive and Aesthetic Surgery, Ziekenhuis Netwerk Antwerpen, Lindendreef 1, B-2020, Antwerp, Belgium

^b Department of Primary and Interdisciplinary Care (ELIZA), University of Antwerp, Antwerp, Belgium

^c Department of Abdominal, Paediatric and Reconstructive Surgery, Antwerp University Hospital, University of Antwerp, Wilrijkstraat 10, B-2650, Antwerp, Belgium

^d Op3Mech Research Group University of Antwerp, Groenenborgerlaan 171, B-2020, Antwerp, Belgium

^e Multidisciplinary Breast Clinic, Gynecological Oncology Unit, Department of Obstetrics and Gynecology, Antwerp University Hospital, University of Antwerp, Wilrijkstraat 10, B-2650, Antwerp, Belgium

* Corresponding author.

E-mail address: filip.thiessen@clinic12b.be (F.E.F. Thiessen).

17 May 2020

Available online 13 June 2020