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Speciality: Surgical Oncology  
Special Interest: Small Tumor Infiltrates in Different Body Compartments

Alumnus of the University of Basel  
Alumnus Brigham and Women's Hospital, Harvard Medical School, Boston, MA, USA  
Alumnus European School of Oncology

President, Scientific Commission of the Cancer League of Both Basel  
Past Vice President, Swiss Group for Clinical Cancer Research (SAKK)

Reviewer of Different Surgical and Surgical Oncological Journals

Initiator and Past Editor-in-Chief, *swiss knife*, the Official Information Bulletin of the Swiss Society of Surgery

Past Head, Organizing Committee, Annual Congress of the Swiss Society of Surgery

Head, Organizing Committee, Swiss Course on Cancer Surgery, a Biennial Postgraduate Course in Surgical Oncology Under the Auspices of the Swiss Society of Surgery

**BIBLIOGRAPHY:** Selection of Recent Publications of the Clinical Research Groups

1. Langer I, Guller U, Viehl CT, Moch H, Wight E, Harder F, Oertli D, Zuber M. Axillary lymph node dissection for sentinel lymph node micrometastases may be safely omitted in early-stage breast cancer patients: long-term outcomes of a prospective study. **Ann Surg Oncol** 2009; 16: 3366-3374
2. Langer I, Guller U, Hsu Schmitz SF, Ladewig A, Viehl CT, Moch H, Wight E, Harder F, Oertli D, Zuber M. Performing sentinel lymph node biopsy is associated with improved survival compared with level I & II axillary dissection in node negative breast cancer patients. **Eur J Surg Oncol** 2009; 35: 805-813
3. Langer I, Guller U, Berclaz G, Koechli OR, Moch H, Schaer G, Fehr M, Hess T, Oertli D, Bronz L, Schnarwyler B, Wight E, Uehlinger U, Infanger E, Burger D, Zuber M. Accuracy of frozen section of sentinel lymph nodes: a prospective analysis of 659 breast cancer patients of the Swiss multicenter study. **Breast Cancer Res Treat** 2009; 113: 129-136
4. Langer I, Guller U, Berclaz G, Koechli OR, Schaer G, Fehr MK, Hess T, Oertli D, Bronz L, Schnarwyler B, Wight E, Uehlinger U, Infanger E, Burger D, Zuber M, for the Swiss Multicenter Study Group Sentinel Lymph Node in Breast Cancer. Morbidity of sentinel lymph node biopsy (SLN) alone versus SLN & completion axillary lymph node dissection after breast cancer surgery: a prospective Swiss multicenter study on 659 patients **Ann Surg** 2007; 245: 452-461
5. Langer I, Guller U, Koechli OR, Berclaz G, Singer G, Schaer G, Fehr MK, Hess T, Oertli D, Bronz L, Schnarwyler B, Wight E, Uehlinger U, Infanger E, Burger D, Zuber M, for the Swiss Multicenter Sentinel Lymph Node Study Group in Breast Cancer. Association of the presence of bone marrow micrometastases with the sentinel lymph node status in 410 early stage breast cancer patients: Results of the Swiss multicenter study. **Ann Surg Oncol** 2007; 14: 1896-1903
6. Viehl CT, Guller U, Hamel CT, Riehle HM, Plaass C, Marti WR, Oertli D, Zuber M. Carbon dye staining of sentinel lymph nodes facilitates microstaging of colon cancer patients. **World J Surg** 2006; 30: 453-456
7. Viehl CT, Hamel CT, Marti WR, Güller U, Eisner L, Stammberger U, Terracciano L, Spichtin HP, Harder F, Zuber M. Identification of sentinel lymph nodes in colon cancer depends on the amount of dye injected relative to tumor size. **World J Surg** 2003; 27: 1285-1290
8. Güller U, Nitzsche E, Moch H, Zuber M. Is positron emission tomography an accurate non-invasive alternative to sentinel lymph node biopsy in breast cancer patients? **J Natl Cancer Inst** 2003; 95: 1040-1043