



# BREAST CENTRES NETWORK

Synergy among Breast Units

## A.O.R.N. 'A. Cardarelli' - Naples, Italy

### General Information



**New breast cancer cases treated per year** **230**

**Breast multidisciplinary team members** **10**

Radiologists, surgeons, pathologists, medical oncologists, radiotherapists and nurses

**Clinical Director:** **Giuseppe Borea**

We consider at A. Cardarelli Breast Unit that patients with neoplastic diseases need a multidisciplinary approach. The diagnostic-therapeutic pathway of Dr. Borea's Breast Unit firstly provides specialized visits (and breast-scan, echography, FNAC and/or mammotome, if needed), then, in case surgical operation is necessary, we schedule it in 7-10 days. Patients undergo anesthesiologic evaluation first. Different surgical operations can be offered: mastectomy, quart or quad (with negative sentinel lymph-node) and immediate or delayed reconstruction. An intra-operating ecographer allows us high-precision for cancer removal. Sentinel lymph-node biopsy can be offered in collaboration with Pascale Nuclear Medicine Institute and, when intraoperative evaluation results positive, we perform an immediate axillary cavity drain. In case of no complications, the average stay in our hospital is about two days, then patients can go home with a discharge letter sent to the district doctor and be scheduled for further medication and follow-up by the breast surgery dpt. Following therapeutical decisions are taken by collective and multidisciplinary consultation.

### **A.O.R.N. 'A. Cardarelli'**

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## Available services

- Radiology
- Breast Surgery
- Reconstructive/Plastic Surgery
- Pathology
- Medical Oncology
- Radiotherapy

- Nuclear Medicine
- Rehabilitation
- Genetic Counselling
- Data Management
- Psycho-oncology
- Breast Nurses

- Social Workers
- Nutritional Counselling
- Survivorship Groups
- Sexual Health Counselling
- Supportive and Palliative Care
- Integrative Medicine

## Radiology

- Dedicated Radiologists** 2
- Mammograms per year** 6000
- Breast radiographers**
- Screening program**
- Verification for non-palpable breast lesions on specimen**
- Axillary US/US-guided FNAB**
- Clinical Research**

**Available imaging equipment**

- Mammography
- Ultrasound
- Magnetic Resonance Imaging (MRI)

**Available work-up imaging equipment**

- Computer Tomography
- Ultrasound
- Magnetic Resonance Imaging (MRI)
- PET/CT scan

**Primary technique for localizing non-palpable lesions**

- Hook-wire (or needle localization)
- Charcoal marking/tattooing
- ROLL: radio-guided occult lesion localization

**Available breast tissue sampling equipment**

- Stereotactic Biopsy (Mammography guided)
  - Core Biopsy (Tru-cut)
  - Vacuum assisted biopsy
- Ultrasound-guided biopsy
  - Fine-needle aspiration biopsy (FNAB, cytology)
  - Core Biopsy
  - Vacuum assisted biopsy
- MRI-guided biopsy
  - Core Biopsy
  - Vacuum assisted biopsy

## Breast Surgery

- New operated cases per year (benign and malignant)** 480
- Dedicated Breast Surgeons** 2
- Surgeons with more than 50 surgeries per year** 2
- Breast Surgery beds** 2
- Breast Nurse specialists** 2
- Outpatient surgery**
- Intra-operative evaluation of sentinel node**
- Reconstruction performed by Breast Surgeons**
- Clinical Research**

**Primary technique for staging the axilla**

- Axillary lymph node dissection
- Sentinel lymph node biopsy:
  - Blue dye technique
  - Radio-tracer technique
  - Blue dye + Radio-tracer
- Axillary sampling

**Reconstructive/Plastic Surgery**

**Reconstructive/Plastic surgeons** \_\_\_\_\_ 1

**Immediate Reconstruction available** \_\_\_\_\_

**Type of breast reconstructive surgery available**

- Remodelling after breast-conserving surgery
- Reconstruction after mastectomy:
  - Two-stage reconstruction (tissue expander followed by implant)
  - One-stage reconstruction
  - Autogenous tissue flap
    - Latissimus dorsi flap
    - Transverse rectus abdominis (TRAM)
    - Free-flaps (free TRAM, DIEP, SIEA, gluteal, etc.)
- Surgery on the contralateral breast for symmetry

**Pathology**

**Dedicated Breast Pathologists** \_\_\_\_\_ 2

**Available studies**

- Cytology
- Haematoxylin & eosin section (H&E)
  - Surgical specimen
  - Sentinel node
  - Core biopsy
- Frozen section (FS)
  - Surgical specimen
  - Sentinel node
- Immunohistochemistry stain (IHC)
  - Estrogen receptors
  - Progesterone receptors
  - HER-2
  - Ki-67

**Other special studies available**

- Fluorescence in-situ Hybridization for HER-2 gene (FISH)
- Oncotype Dx (21-gene assay)
- MammaPrint (70-gene microarray)
- Prediction Analysis of Microarray 50-gene set (PAM 50)

**Parameters included in the final pathology report**

- Pathology stage (pT and pN)
- Tumour size (invasive component in mm)
- Histologic type
- Tumor grade
- ER/PR receptor status
- HER-2/neu receptor status
- Peritumoural/Lymphovascular invasion
- Margin status

**Medical Oncology**

**Dedicated Breast Medical Oncologists** \_\_\_\_\_ 2

**Outpatient systemic therapy** \_\_\_\_\_

**Clinical Research** \_\_\_\_\_

**Radiotherapy** **Dedicated Radiation Oncologists** **Clinical Research****Available techniques after breast-conserving surgery (including experimental)** Whole-Breast RT (WBRT) Partial breast irradiation (PBI): External beam PBI Interstitial brachytherapy Targeted brachytherapy (MammoSite, SAVI applicator, other devices) Intra-operative RT (IORT)**Multidisciplinary Meeting (MDM) / Tumour Board (TB)****Regular MDM/TB for case management discussion** Twice a week Weekly Every two weeks Other Schedule**Cases discussed at MDM/TB** Preoperative cases Postoperative cases**Specialties/services participating in MDM/TB** Radiology Breast Surgery Reconstructive/Plastic Surgery Pathology Medical Oncology Radiotherapy Genetic Counselling Breast Nurse Service Psycho-oncology**Further Services and Facilities****Nuclear Medicine** Lymphoscintigraphy Bone scan Positron Emission Tomography (PET) PET/CT scan**Rehabilitation** Prosthesis service Physiotherapy Lymph-oedema treatment**Genetic Counselling** Specialist Providing Genetic Counselling/Risk assessment service: Dedicated Clinical Geneticist Medical Oncologist Breast Surgeon General Surgeon Gynaecologist Genetic Testing available Surveillance program for high-risk women**Data Management** Database used for clinical information Data manager available

**Contact details****Clinical Director**

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**Radiology**

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**Breast Surgery**

Giuseppe Borea                      Head of the Breast Unit

**Reconstructive Surgery**

Martino Trunfio                      Head of Reconstructive Surgery Dpt.

**Pathology**

Giovanna Carrillo                      Head of Pathology Dpt.

Paola Galloro                      Staff Member of Pathology Dpt.

**Medical Oncology**

Riccardi Ferdinando                      Head of Medical Oncology Dpt.

How to reach us



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**From airport:**

Naples Capodichino Airport.

**By train:**

Naples Central Station.

**By bus or sub-way/underground:**

From Naples Central Station: Underground line 2, get off at Piazza Cavour, then change to line 1, Piscinola direction, and get off at Policlinico Station.

**By car:**

From Capodichino Airport by : Naples tangential, Pozzuoli direction, exit at Zona Ospedaliera.

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