



BREAST CENTRES NETWORK

Synergy among Breast Units

★ Breast Cancer Centre Aachen City - University Hospital - Aachen, Germany

General Information



New breast cancer cases treated per year **245**

Breast multidisciplinary team members **15**

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

Clinical Director: **Uwe Heindricks, MD**

Our breast cancer unit focuses on providing the best treatment for breast cancer patients with regard to their physical, psychosocial and psycho-oncological demands. With respect to diagnosis we offer the whole variety of technical equipment including MRI-guided core biopsies. In recent years we got advancing experience in intraoperative irradiation therapy, that has become a routine procedure. Further more the associated institute of pathology has established a tumor bank for research reasons and to give answers to special questions according to treatment.

We focus on molecular biology research, i. e. finding discriminative tumormarkers and having more insight in methylating processes. Secondly we offer patients evaluation with partial breast irradiation (IORT with Novac 7) with regard to surgical features as well as to follow-up criteria. The third emphasis is on psycho-oncological research: stress profiles are derived with non-invasive measuring methods in order to distinguish between patients being able to relax or not (coherence).

There is regular participation in clinical trials (for example chemotherapy / hormonal treatment).

Breast Cancer Centre Aachen City - University Hospital

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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** 3000
- ✓ **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)** 272
- ✓ **Dedicated Breast Surgeons** 4
- ✓ **Surgeons with more than 50 surgeries per year** 4
- ✓ **Breast Surgery beds** 15
- ✓ **Breast Nurse specialists** 4
- ✓ **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 2

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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How to reach us



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From airport:

Aachen is conveniently located nearby the three borders of Germany-Belgium-Netherlands. Aachen's traffic is favourable because of the European arterial roads to Brussels, Paris and Antwerpen. Aachen can be reached comfortably by train as well. The airports of Duesseldorf, Mönchengladbach, Cologne, Maastricht-Aachen and Brussels are at close range to Aachen.

By train:

On the opposite roadside of the main station you rise at the bus stop H2 into 3 B. The bus stops in front of the main portal of University Hospital Aachen.

Departure times main station Aachen:

working-day

06:04 - 19:49 o'clock (every 15 minutes)

19:58 - 23:28 o'clock (every 30 minutes)

Saturday

05:58 - 07:58 o'clock (every 30 minutes)

08:19 - 15:58 o'clock (every 15 minutes)

15:58 - 23.28 o'clock (every 30 minutes)

Further information at www.avv.de

By bus or sub-way/underground:

The public local passenger traffic is well organised. All city and external areas are reachable by bus and train. A detailed timetable can be received at AVV online-services.

By car:

At Aachen motorway intersection hold on the Holland route toward Antwerpen / Heerlen. You leave the motorway at exit no. 2, Aachen-Laurensberg, drive off right, then farther direction Maastricht and follow the shuttle with 4 lanes with the signpost 'Universitätsklinikum'. Parking lots (both free of charge and chargeable) are available in front of the clinical complex.

Last modified: 21 June 2010