



# BREAST CENTRES NETWORK

Synergy among Breast Units

## ★ Breast Unit Voorkepen - Brasschaat, Belgium

### General Information



**New breast cancer cases treated per year** 300

**Breast multidisciplinary team members** 18

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

**Clinical Director:** **Didier Verhoeven**, MD, PhD

The Breast Clinic Voorkepen is the result of the association of a major breast clinic (AZ KLINA, Brasschaat) with a smaller centre (AZ Sint-Jozef, Malle): the two institutions have established a very close collaboration, sharing the same oncological unit and diagnostic centre, weekly discussing all cases together and using the same handbook. In close collaboration with general practitioners, a special 'pathway for breast cancer' has been set up and diagnosis and follow-up are done together and integrated.

A specialized breast cancer registry has been created and it has been approved by the National Cancer Registry. An intensive research program is elaborated with three dedicated data nurses. Special attention is given to reconstructive surgery.

### Breast Unit Voorkepen

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### CERTIFICATION(S) ACCREDITATION(S)

### Erkend Speciaal Zorgprogramma Borstkanker

Expiration date: 31 December 2014



AZ Klina, VZW Emmaüs



## 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** 3
- Mammograms per year** 8500
- 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)
- tomosynthesis

**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)** 696
- Dedicated Breast Surgeons** 4
- Surgeons with more than 50 surgeries per year** 4
- Breast Surgery beds** 10
- Breast Nurse specialists** 3
- 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** 3

### 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
- Ki-67 staining

## Medical Oncology

**Dedicated Breast Medical Oncologists** 4

**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

data nurses

## Further Services and Facilities

**Nuclear Medicine**

Lymphoscintigraphy

Bone scan

Positron Emission Tomography (PET)

PET/CT scan

**Rehabilitation**

Prosthesis service

Physiotherapy

Lymph-oedema treatment

onco-revalidation program organised

**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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**Reconstructive Surgery**

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**Medical Oncology**

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**Radiotherapy**

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## How to reach us



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### From airport:

**ANTWERP AIRPORT (Deurne):** follow the highway to the Netherlands (Breda) and exit at Brasschaat. Then take the Bredabaan direction Brasschaat. In the centre of Brasschaat, go to the left. The clinic is at about 500m from the centre.(18 km from Antwerp).

**BRUSSELS AIRPORT (Zaventem):** follow the highway to Antwerp, then from Antwerp to the Netherlands (Breda) and exit at Brasschaat. Take the Bredabaan direction Brasschaat. In the centre of Brasschaat, go to the left. The clinic is at about 500m from the centre.(65 km from the airport of Brussels).

### By train:

**ANTWERP (Berchem station):** take the highway in direction Breda (the Netherlands). Exit at Brasschaat, Bredabaan and go to the centre of Brasschaat. Go to the left. The clinic is at about 500m from the centre.

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

Bus from Antwerp Central Station (Rooseveltplace) to Brasschaat - AZ KLINA: NR 64 or NR 73.

### By car:

Take the highway from Antwerp to Breda (The Netherlands), exit at Brasschaat and then take the Bredabaan

direction Brasschaat. In the centre of Brasschaat, go to the left. The clinic is at about 500m from the centre.(18 km from Antwerp).

**Last modified:** 08 June 2014