



BREAST CENTRES NETWORK

Synergy among Breast Units

★ Breast Unit, Fondazione IRCCS Policlinico San Matteo, University of Pavia - Pavia, Italy

General Information



New breast cancer cases treated per year 300

Breast multidisciplinary team members 14

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

Clinical Director: Adele Sgarella, MD

The Breast Cancer Interdisciplinary Group has been working in our hospital since 2004. In april 2010 the Breast Unit was established at Fondazione IRCCS Policlinico San Matteo, Pavia. The multidisciplinary team includes radiologists, oncoplastic and plastic surgeons, medical oncologists, radiotherapists, pathologists, nuclear doctors, psychologists, residents and breast nurses whose activity is dedicated to breast pathology. The activity takes place both in the Diagnostic Unit (from screening to diagnosis and first meeting with the surgeon) and in the Clinical Breast Unit. Tumour board is weekly held for case discussion and scientific update. The Breast Unit provides care for all stages BC: neo- and adjuvant chemotherapy, oncoplastic and mini-invasive videoassisted surgery, breast reconstruction, radio-guided surgery (ROLL, Sentinel Node Biopsy with intra-operative response), treatment of locally advanced and metastatic BC, rehabilitative and psychological support. We also offer a multidisciplinary approach for risk assessment including a risk clinic, genetic counselling, BRCA 1-2 tests, surveillance programme, chemoprevention trials and risk-reduction surgery for high risk women.

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CERTIFICATION(S) ACCREDITATION(S)

Breast Centres Certification

Expiration date: 17 September 2018



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** 4
- Mammograms per year** 11000
- 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)** 360
- Dedicated Breast Surgeons** 2
- Surgeons with more than 50 surgeries per year** 2
- Breast Surgery beds** 6
- 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
- lipoaspirate transplant

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
- E-cadherin, citokeratine profile

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

residents, data manager

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

risk clinic provided by a multidisciplinary team

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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How to reach us



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From airport:

From Milan Malpensa or Milan Linate airports you can go to Milan Central train station by shuttle or taxi. Then take the train Milan-Ventimiglia stopping in Pavia. The station in Pavia is very close to San Matteo Hospital: it is a 10-minute walk, but if you don't want to walk you can take the bus (n. 3 or 7).

By train:

From Milan: take the train Milan-Ventimiglia stopping in Pavia.

By bus or sub-way/underground:

The station in Pavia is very close to San Matteo Hospital: it is a 10-minute walk, but if you don't want to walk you can take the bus (n. 3 or 7).

Last modified: 04 October 2013