



BREAST CENTRES NETWORK

Synergy among Breast Units

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Hospital Garcia de Orta - Almada, Portugal

General Information



New breast cancer cases treated per year 250

Breast multidisciplinarity team members 17

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

Clinical Director: Daniel Travancinha, MD

The HGO Breast Unit was established in 2012 under the direction of Dr Daniel Travancinha as an independent unit. Our main goal is to provide an integrated, multidisciplinary and individually tailored approach to breast cancer patients based on international guidelines. Multidisciplinary meetings are held every week and include breast surgeons, oncologists, imaging diagnostics specialists, plastic surgeons, pathologists, radiation oncologists, nuclear medicine and palliative care specialists, and a specialized nurse. In addition, the unit is involved in Surgery and Gynecology residents training and teaches medical students from Faculdade de Medicina da Universidade de Lisboa.

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

Available imaging equipment

- **Mammography**
- ✓ Ultrasound

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1200

✓ 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

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ROLL: radio-guided occult lesion localization

Available breast tissue sampling equipment

- Stereotactic Biopsy (Mammography quided)
- ☑ 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) 220
- ✓ Dedicated Breast Surgeons
- ☑ Surgeons with more than 50 surgeries per year
- Breast Surgery beds
- ✓ Breast Nurse specialists
- ✓ Outpatient surgery
- ✓ Intra-operative evaluation of sentinel node
- ☑ Reconstruction performed by Breast Surgeons
- Clinical Research

Primary technique for staging the axilla

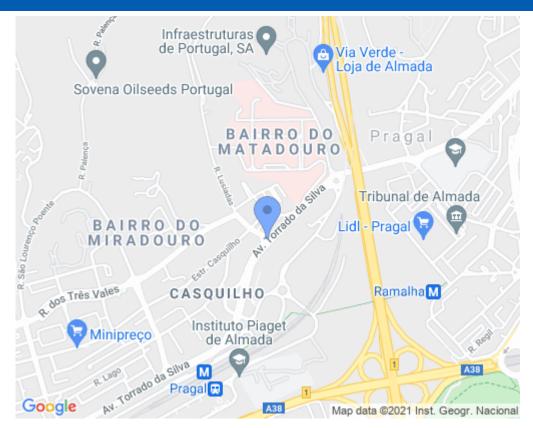
- Axillary lymph node dissection
- ✓ Sentinel lymph node biopsy:
- ☐ Blue dye technique
- ☐ Radio-tracer technique
- ☑ Blue dye + Radio-tracer
- Axillary sampling

Reconstructive/Plastic Surgery Reconstructive/Plastic surgeons Type of breast reconstructive surgery available ✓ Immediate Reconstruction 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 remodelling with lipofilling, areolar tattooing **Pathology** Dedicated Breast Pathologists Other special studies available Available studies ✓ Fluorescence in-situ Hybridization for HER-2 gene (FISH) Cytology Oncotype Dx (21-gene assay) ✓ Haematoxylin & eosin section (H&E) ☐ MammaPrint (70-gene microarray) ✓ Surgical specimen ✓ Prediction Analysis of Microarray 50-gene set (PAM 50) ✓ Sentinel node Parameters included in the final pathology report ✓ Core biopsy ✓ Pathology stage (pT and pN) ✓ Frozen section (FS) ✓ Tumour size (invasive component in mm) ☐ Surgical specimen ✓ Histologic type ✓ Sentinel node ✓ Tumor grade Immunohistochemistry stain (IHC) ✓ ER/PR receptor status Estrogen receptors ✓ HER-2/neu receptor status ✓ Progesterone receptors Peritumoural/Lymphovascular invasion ₩ HER-2 Margin status ✓ Ki-67 ☑ OSNA, TILs **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
	\square Targeted brachytherapy (MammoSite, SAVI applicator, other devices)
	☐ Intra-operative RT (IORT)
Multidisciplinary Meeting (MDM) / Tumour Board	(ТВ)
Regular MDM/TB for case management discussion	Specialties/services participating in MDM/TB
☐ Twice a week	☑ Radiology
✓ Weekly	☑ Breast Surgery
Every two weeks	✓ Reconstructive/Plastic Surgery
Other Schedule	✓ Pathology
Cases discussed at MDM/TB	✓ Medical Oncology
7	✓ Radiotherapy
✓ Preoperative cases	Genetic Counselling
✓ Postoperative cases	✓ Breast Nurse Service
	Psycho-oncology
	☑ Nuclear Medicine, Palliative Care Unit
urther Services and Facilities	
Nuclear Medicine	Genetic Counselling
✓ Lymphoscintigraphy	Specialist Providing Genetic Counselling/Risk assessment service:
☑ Bone scan	☐ Dedicated Clinical Geneticist
✓ Positron Emission Tomography (PET)	☐ Medical Oncologist
▼ PET/CT scan	☐ Breast Surgeon
Rehabilitation	General Surgeon
Prosthesis service	Gynaecologist
✓ Physiotherapy✓ Lymph-oedema treatment	IPO Lisboa (Genetic Counselling/Risk Assessment Department)
	✓ Genetic Testing available
	lacksquare Surveillance program for high-risk women
	Data Management
	☑ Database used for clinical information
	Data manager available

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From airport:

20 km (15 minutes by car) from Lisbon Airport (Airport Humberto Delgado)

By train:

Rail Station - Pragal - 10 minutes walking

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