



BREAST CENTRES NETWORK

Synergy among Breast Units

Unidade de Senologia - Hospital de Santarém, EPE - Santarém, Portugal

General Information



New breast cancer cases treated per year 198

Breast multidisciplinarity team members 19

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

Clinical Director: Madalena Nogueira, MD, MSc

The Santarém Senology Unit (USS) was founded in 1998. It is responsible for the prevention, diagnosis, treatment and follow-up of patients with breast disease, currently treating 180 new cases/year of breast cancer. We have a multidisciplinary team (gynaecologists dedicated to breast surgery, radiologists, pathologists, medical oncologists, radiotherapists, plastic surgeons, specialized nurses, etc...) with specific training in the field of breast care. We have modern and innovative diagnostic and therapeutic technologies. We have been pioneers in breast cancer treatment in 'one-day surgery' (conservative surgery and, more recently, in selected cases, mastectomy with sentinel lymph node biopsy). The instituted therapeutics reflect the use of national and international guidelines, adapted to each patient. The care of excellence provided by the professionals of the Breast Unit of Santarém reflects the standards of quality and well-being provided to our patients.

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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

FNAB

✓ Clinical Research

- ✓ Dedicated Radiologists
 ✓ Mammograms per year
 ✓ Breast radiographers
 ✓ Screening program
 ✓ Verification for
 non-palpable breast lesions
 on specimen
 ✓ Axillary US/US-guided
- Available imaging equipment

 ✓ Mammography
- ✓ Ultrasound
- ✓ Magnetic Resonance Imaging (MRI)
- ✓ Contrast Enhanced Mammography

Available work-up imaging equipment

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

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 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)
 331

 ✓ Dedicated Breast Surgeons
 4

 ✓ Surgeons with more than 50 surgeries per year
 3

 ✓ 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 surgeons	Type of breast reconstructive surgery available
☑ Immediate Reconstruction available	✓ Remodelling after breast-conserving surgery
	✓ Reconstruction after mastectomy:
	 Reconstruction after mastectomy: Two-stage reconstruction (tissue expander followed by implant)
	✓ One-stage reconstruction
	Autogenous tissue flapLatissimus dorsi flap
	☑ Transverse rectus abdominis (TRAM)
	\square Free-flaps (free TRAM, DIEP, SIEA, gluteal, etc.)
	lacksquare Surgery on the contralateral breast for symmetry
athology	
☑ Dedicated Breast Pathologists	4 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	☑ SISH, OSNA (One-Step Nucleic Acid Amplification) Sentinel
☑ Core biopsy	Lymph Node
✓ Frozen section (FS)	Parameters included in the final pathology report
✓ Surgical specimen	☑ Pathology stage (pT and pN)
✓ Sentinel node	✓ Tumour size (invasive component in mm)
☑ Immunohistochemistry stain (IHC)	✓ Histologic type
Estrogen receptors	✓ Tumor grade
✓ Progesterone receptors	✓ ER/PR receptor status
☑ HER-2	✓ HER-2/neu receptor status
☑ Ki-67	✓ Peritumoural/Lymphovascular invasion
	✓ Margin status
	Residual Cancer Burden (RCB
ledical Oncology	
. ,	
☑ Dedicated Breast Medical Oncologists	4
✓ Outpatient systemic therapy	

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	(TB)
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
	☑ Radiotherapy
✓ Preoperative cases✓ Postoperative cases	Genetic Counselling
	✓ Breast Nurse Service
	✓ Psycho-oncology
	☑ Data Manager, oncology clinic secretary
Further 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	lacksquare Offered through the Lisbon Cancer Centre (IPOFG, Lisboa)
✓ Lymph-oedema treatment	☑ Genetic Testing available
	☑ Surveillance program for high-risk women
	Data Management
	lacksquare Database used for clinical information
	☑ Data manager available

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From airport:

From Lisbon, go North through highway A1- Norte (73.2 Km, 44 min). Take the exit towards Santarém (A2/A6/A13/N114). Continue along N114. Take the exit towards Santarém Centro/ Hospital.

By train:

Buy the train ticket at The Orient railway station. Lisbon- Santarém (Lisbon-Tomar (R)/ Lisbon - Porto (IC/AP)). Online timetable and information at https://www.cp.pt/. Local buses connect to the center every 30 minutes from Santarém Station.

By bus or sub-way/underground:

Bus 'Rede Expressos'. Online timetable and information at https://www.rede-expressos.pt/

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