

BREAST CENTRES NETWORK

Synergy among Breast Units

Bulent Ecevit University The School of Medicine - Zonguldak, Turkey

General Information



 New breast cancer cases treated per year
 201

 Breast multidisciplinarity team members
 7

 Radiologists, surgeons, pathologists, medical oncologists, radiotherapists and nurses
 7

 Clinical Director: Guldeniz Karadeniz Cakmak, MD
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Bulent Ecevit University Hospital multidisciplinary breast group was established in 2008. Our mission is to provide optimal breast care with the highest quality of experience. A highly dedicated team of surgeons, pathologists, radiologists, medical and radiation oncologists, and nuclear medicine specialists weekly meets to discuss cases. Treatment algorithm for each case is established in a comprehensive multidisciplinary manner according to board consensus statements. The patient centered care design aims to provide individualized management on case-by-case basis. The breast team works in the field of prevention, screening, diagnosis, treatment, and follow-up. The Breast Unit provides care for all stages of breast cancer, including conservative and oncoplastic surgery (with intraoperative continuous ultrasound guidence), sentinel node procedure (with dual-agent), partial and whole breast irradiation, and neoadjuvant and adjuvant systemic therapy. Additionally, postgraduate education for residents and medical students with educational meetings is hosted.

Bulent Ecevit University The School of Medicine

Eski Kozlu Yolu 67000 Zonguldak, Phone: +903722612860 Fax: +903722610155 E-mail: <u>gkkaradeniz@yahoo.com</u> Web-site: <u>web.beun.edu.tr/</u> Bulent Ecevit University The School of Medicine

Available services

Vuclear Medicine Social Workers Radiology Rehabilitation Mutritional Counselling Breast Surgery Reconstructive/Plastic Surgery Genetic Counselling Survivorship Groups Z Data Management Sexual Health Counselling **Pathology** Psycho-oncology Supportive and Palliative Care Medical Oncology **Radiotherapy** Breast Nurses Manual Integrative Medicine Radiology **V** Dedicated Radiologists 1 Available imaging equipment Available breast tissue sampling equipment Mammograms per year 1500 Mammography Breast radiographers Stereotactic Biopsy (Mammography VItrasound Screening program quided) Core Biopsy (Tru-cut) Magnetic Resonance Imaging (MRI) Verification for non-palpable breast lesions Vacuum assisted biopsy Available work-up imaging on specimen equipment 🗹 Ultrasound-guided biopsy Axillary US/US-guided Fine-needle aspiration biopsy Computer Tomography **FNAB** (FNAB, cytology) **VItrasound** Clinical Research Core Biopsy Magnetic Resonance Imaging (MRI) Vacuum assisted biopsy V PET/CT scan MRI-guided biopsy Primary technique for localizing Core Biopsy non-palpable lesions Vacuum assisted biopsy Hook-wire (or needle localization) Charcoal marking/tattooing ROLL: radio-guided occult lesion localization

Breast Surgery

New operated cases per year (benign and malignant) 235
 Dedicated Breast Surgeons 2
 Surgeons with more than 50 surgeries per year 2
 Breast Surgery beds 10
 Breast Nurse specialists 1
 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
- V Blue dye + Radio-tracer
- Axillary sampling

Reconstructive/Plastic Surgery Reconstructive/Plastic surgeons 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

Pathology

Dedicated Breast Pathologists 1	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	\Box Prediction Analysis of Microarray 50-gene set (PAM 50)
Sentinel node	🗹 ICG detection, Spy
V Core biopsy	Parameters included in the final pathology report
✓ Frozen section (FS)✓ Surgical specimen	Pathology stage (pT and pN)
Sentinel node	🗹 Tumour size (invasive component in mm)
Munohistochemistry stain (IHC)	🗹 Histologic type
Strongen receptors	🗹 Tumor grade
Progesterone receptors	ER/PR receptor status
Mer-2	MER-2/neu receptor status
🗹 Ki-67	🗹 Peritumoural/Lymphovascular invasion
	🗹 Margin status
	V Lymphovascular invasion

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Medical Oncology

- V Dedicated Breast Medical Oncologists
- 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
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- 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	Specialties/services participating in MDM/TB
Twice a week	Radiology
🗹 Weekly	🗹 Breast Surgery
Every two weeks	Reconstructive/Plastic Surgery
Other Schedule	Z Pathology
Cases discussed at MDM/TB Preoperative cases	Medical Oncology
	🗹 Radiotherapy
	Genetic Counselling
M Postoperative cases	🗹 Breast Nurse Service
	Psycho-oncology

Further Services and Facilities

Nuclear Medicine

~	Lymphoscintigraphy
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- 🗹 Bone scan
- Positron Emission Tomography (PET)
- V PET/CT scan

Rehabilitation

- V Prosthesis service
- V Physiotherapy
- V Lymph-oedema treatment

Genetic Counselling

Specialist Providing Genetic Counselling/Risk assessment service:

- Dedicated Clinical Geneticist
- Medical Oncologist
- Breast Surgeon
- General Surgeon
- Gynaecologist

Clinical Geneticist of the University Hospital

- Senetic Testing available
- Surveillance program for high-risk women

Data Management

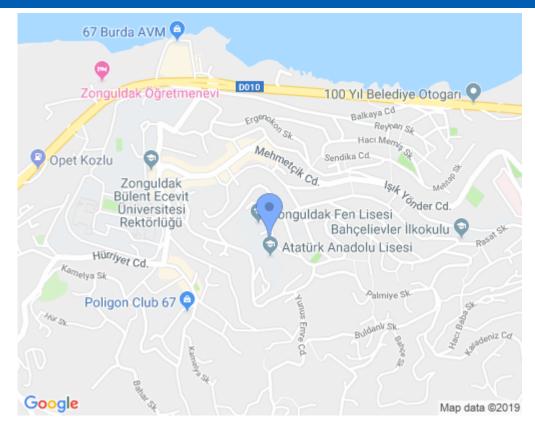
☑ Database used for clinical information

🗹 Data manager available

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Contact details			
Clinical Director			
Guldeniz Karadeniz Cakmak, MD	Director	gkkaradeniz@yahoo.com	+905323371860
Radiology			
lbrahim llker Öz, MD	Head of Radiology Dpt.		+903722613107
Emrah Caglar			
Breast Surgery			
Guldeniz Karadeniz Cakmak, MD	Head of the Breast Unit, Vice President of Surgical Sciences Division	gkkaradeniz@yahoo.com	+905323371860
Reconstructive Surgery			
Burçin Acuner, MD	Assistant Professor	burcinacuner@yahoo.com	
Eksal Kargi, MD	Professor		
Pathology			
Burak Bahadir, MD	Staff Pathologist		
Medical Oncology			
Huseyin Engin, MD	Head of Medical Oncology Dpt.		
Radiotherapy			
Hakan Bakkal, MD	Head of Radiation Oncology Dpt.		
Özlem Elmas			

How to reach us



Bulent Ecevit University The School of Medicine

Eski Kozlu Yolu 67000 Zonguldak, Phone: +903722612860 Fax: +903722610155 E-mail: <u>gkkaradeniz@yahoo.com</u> Web-site: <u>web.beun.edu.tr/</u> **From airport:** 66 km away from Zonguldak Çaycuma Airport. **By train:** 300 km away from Istanbul and 200 km away from Ankara. **By bus or sub-way/underground:** Buses from city center every 5 minutes. **By car:** The breast unit is 6 km from city center and is located in the university hospital that provides a free parking

area for patients and visitors.

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