

BREAST CENTRES NETWORK

Synergy among Breast Units

😫 Cairo Oncology Center - Giza, Egypt

General Information



New breast cancer cases treated per year421Breast multidisciplinarity team members18Radiologists, surgeons, pathologists, medical oncologists, radiotherapists and
nurses

Clinical Director: Hamdy Abdel Azim, PhD

Cairo Oncology Center (Cairocure) is the biggest private oncology facility in the Middle East with around 1.800 new patients each year, and more than 15.000 patients under follow up. Cairocure was founded by Prof. Dr. Hamdy A. Azim, Professor of Clinical Oncology, Faculty of Medicine Cairo University in 1992. Vision & Mission: With a vision to be the first leader in the field of oncology in the Middle East, we are doing our best to give our patients a special care and a unique service, through a strong commitment to quality, a highly qualified medical team and a well established medical infrastructure. Giving our patient the best care in the filed of oncology, helping them all over the disease stages starting from early detection and diagnosis, choosing and providing them with best treatment, helping them to overcome any hazards. We are building a highly qualified team of professional oncologist through frequent training and continuous updated education and are putting the Middle East region on the clinical research map.

Cairo Oncology Center

55, Abdelmoneim Riad ST, Cairo Medical Tower, Mohandesseen 12311 Giza, Phone: +20233026814 Fax: +20233028656 E-mail: <u>info@cairocure.com</u> Web-site: <u>www.cairocure.com</u>

Cairo Oncology Center

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
 Dedicated Radiologists Mammograms per year 200 Breast radiographers Screening program Verification for non-palpable breast lesions on specimen Axillary US/US-guided FNAB Clinical Research 	Available imaging equipment Mammography Magnetic Resonance Imaging (MRI) contrast enhanced mammography Available work-up imaging equipment Computer Tomography Ultrasound Magnetic Resonance Imaging (MRI) Computer Tomography Ultrasound Magnetic Resonance Imaging (MRI) Magnetic Resonance Imaging (MRI) PET/CT scan endoscopic ultrasonography, 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 Vacuum assisted biopsy Fine-needle aspiration biopsy (FNAB, cytology) Core Biopsy Vacuum assisted biopsy MRI-guided biopsy Core Biopsy Vacuum assisted biopsy Vacuum assisted biopsy

Breast Surgery

☑ New operated cases per year (benign and malignant)	175
Z Dedicated Breast Surgeons	3
Surgeons with more than 50 surgeries per year_	2
☑ Breast Surgery beds	5
🗹 Breast Nurse specialists	4
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

2	Type of breast reconstructive surgery available
	Remodelling after breast-conserving surgery
	Reconstruction after mastectomy:
	Two-stage reconstruction (tissue expander followed by implant)
	Mone-stage reconstruction
	🗹 Autogenous tissue flap
	🗹 Latissimus dorsi flap
	🗹 Transverse rectus abdominis (TRAM)
	Free-flaps (free TRAM, DIEP, SIEA, gluteal, etc.)
	2

Pathology

Dedicated Breast Pathologists	2	Other special studies available
Available studies		Sluorescence 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		Parameters included in the final pathology report
Frozen section (FS)		Z Pathology stage (pT and pN)
Surgical specimen		Tumour size (invasive component in mm)
Sentinel node		🗹 Histologic type
Munohistochemistry stain (IHC)		🗹 Tumor grade
Stan (Inc)		ER/PR receptor status
Progesterone receptors		V HER-2/neu receptor status
V HER-2		Peritumoural/Lymphovascular invasion
✓ Ki-67		Margin status
		ECE, TIL, Ki67

Medical Oncology

V Dedicated Breast Medical Oncologists	5
V 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	Specialties/services participating in MDM/TB
Twice a week	Z Radiology
🗹 Weekly	V Breast Surgery
Every two weeks	Reconstructive/Plastic Surgery
Other Schedule	Z Pathology
Cases discussed at MDM/TB	Medical Oncology
	🗹 Radiotherapy
Preoperative cases	☑ Genetic Counselling
Postoperative cases	V Breast Nurse Service
	Z Psycho-oncology

Further Services and Facilities

Nuclear Medicine

Lymphoscintigraphy

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

Rehabilitation

- Prosthesis service
- Physiotherapy
- V Lymph-oedema treatment

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

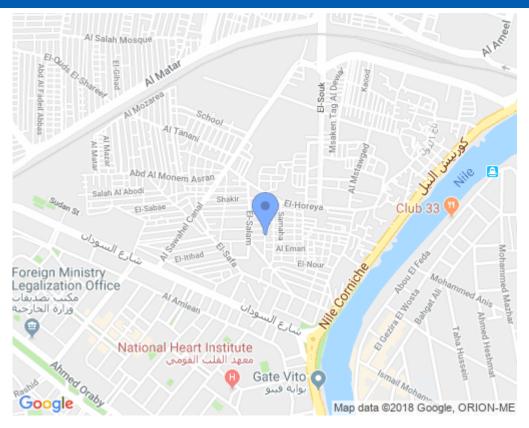
- ☑ Database used for clinical information
- 🗹 Data manager available

Cairo Oncology Center

Contact details			
Clinical Director			
Hamdy Abdel Azim, PhD	Founder/Head and Cheif Medical Officer	azimonc@cairocure.com	+201222102233
Radiology			
Dorria Salem, MD	Professor	azimonc@cairocure.com	+201222102233
Breast Surgery			
Ahmed Badran, MD	Professor		
Reconstructive Surge	ery		
Omar Zakaria, MD	Professor		
Pathology			
Elia Isaac, MD	Professor		+2025790935
Medical Oncology			
Nermine Kamal, MD	Consultant	nermine.kamal@cairocure.com	+201222139313
Dina Abdel Moneim, MSc	specialist	dmoneim@cairocure.com	+201222321587
Farek yakoot, MSc	specialist	tarek.yakoot@cairocure.com	+201001770154
Boules Eshaak, MSc	specialist	boules.eshaak@cairocure.net	+201003163538
Radiotherapy			
₋oay Kassem, MD	Consultant	loay.kassem@cairocure.com	+201003022907

Cairo Oncology Center

How to reach us



Cairo Oncology Center

55, Abdelmoneim Riad ST, Cairo Medical Tower, Mohandesseen 12311 Giza, Phone: +20233026814 Fax: +20233028656 E-mail: <u>info@cairocure.com</u> Web-site: <u>www.cairocure.com</u> **From airport:** Cairo International Airport, taxi to 55, Abdelmoneim Riad ST, Cairo medical tower, Mohandesseen, Giza, Egypt. By train:

From Giza Train station, then by taxi like above.

By car:

55 Abdelmoneim Riad Street, Giza. Near Vacsera Institution.

Last modified: 30 January 2017