

# **BREAST CENTRES NETWORK**

Synergy among Breast Units

# Max Institute of Cancer Care, Max Healthcare - Delhi, India

# **General Information**

Image: Max Institute of Cancer Care, Max Healthcare

New breast cancer cases treated per year 300

Breast multidisciplinarity team members 9 Radiologists, surgeons, pathologists, medical oncologists, radiotherapists and nurses

Clinical Director: Geeta Kadayaprath, FRCS

The Breast Unit of Max Institute of Cancer Care, Patparganj is a well-staffed and equipped unit that caters to about 300 cases of breast cancer every year. There is a close collaboration between surgical, medical, and radiation oncologists along with excellent support from radiologists, pathologists, physiotherapists, psychologists, geneticist, fertility specialists, and nurse practitioners, to deliver the best to the patients who come under our care. All cases are discussed in our twice-weekly MDTs to arrive at a consensus on what is optimum for each patient. We have the best in technology in terms of Diagnostics, Surgery as well as Radiation Oncology. There is a 1-year fellowship program in Breast Surgery and a 3-year post-doctoral course in Medical Oncology, which allows for a robust academic program. Clinical research, six-monthly audits, thesis submissions, Lymphedema Certificate courses, and Workshops form an integral part of the unit. Monthly Breast Support Group programs to handhold patients through treatment and beyond is also a much-appreciated endeavor of the Unit. A Patient volunteer group carved out of the Support group is actively engaged with new patient needs.

# Max Institute of Cancer Care, Max Healthcare

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## Available services

Vuclear Medicine Social Workers Radiology Rehabilitation **W** Nutritional 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 1200 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 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) 254
 Dedicated Breast Surgeons 2
 Surgeons with more than 50 surgeries per year 1
 Breast Surgery beds 7
 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
- V Blue dye + Radio-tracer
- Axillary sampling

# Reconstructive/Plastic Surgeons 1 Reconstructive/Plastic surgeons 1 Immediate Reconstruction available Type of breast reconstructive surgery available Remodelling after breast-conserving surgery

# Reconstruction after mastectomy:

 $\mathbf{M}$  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		V Fluorescence in-situ Hybridization for HER-2 gene (FISH)	
V 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)	
V Sentinel node		Parameters included in the final pathology report	
V Core biopsy		r arameters included in the final pathology report	
V Frozen section (FS)		Pathology stage (pT and pN)	
🗹 Surgical specimen		V Tumour size (invasive component in mm)	
☑ Sentinel node		🗹 Histologic type	
Immunohistochemistry stain (IHC)		V Tumor grade	
Strogen receptors		🗹 ER/PR receptor status	
Progesterone receptors		VHER-2/neu receptor status	
MER-2		Peritumoural/Lymphovascular invasion	
🗹 Ki-67		🗹 Margin status	
		✓ Ki-67,	

## **Medical Oncology**

V Dedicated Breast Medical Oncologists	2
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	🗹 Radiology
Weekly	Marast Surgery
Every two weeks	🗹 Reconstructive/Plastic Surgery
Other Schedule	Pathology
Cases discussed at MDM/TB	Medical Oncology
	🗹 Radiotherapy
<ul><li>Preoperative cases</li><li>Postoperative cases</li></ul>	🗹 Genetic Counselling
	Marast Nurse Service
	🗹 Psycho-oncology

## **Further Services and Facilities**

#### **Nuclear Medicine**

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

#### Rehabilitation

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

#### **Genetic Counselling**

Specialist Providing Genetic Counselling/Risk assessment service:

- V 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

#### Max Institute of Cancer Care, Max Healthcare

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# From airport:

The distance between the airport to the Patparganj facility is about 26kms and can be covered in 45 minutes to an hour and 10 minutes depending on traffic

# By train:

By Metro Rail- via the Airport Express line to Dwarka Sector 21- change to Blue Line going towards Vaishali and get off at Anand Vihar Station and now change to Pink Line and get off at IP Extension Station, which is right next to the hospital

# By bus or sub-way/underground:

Bus No 534A from Airport Terminal 2 to Hasanpur Bus Depot. The Hospital is located about 200 metres from the Bus Depot

# By car:

The distance between the airport to the Patparganj facility is about 26kms and can be covered in 45 minutes to an hour and 10 minutes depending on traffic, by car **Last modified:**