



BREAST CENTRES NETWORK

Synergy among Breast Units

★ Spedali Civili - Breast Unit - Brescia, Italy

General Information



New breast cancer cases treated per year 400

Breast multidisciplinary team members 26

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

Clinical Director: Edda Simoncini, MD

The Breast Unit of Spedali Civili Hospital was established in 2012 as a natural improvement of more than 25 year of attention and integrated approach to breast cancer. The multidisciplinary team is composed of radiologists, pathologists, breast surgeons, plastic surgeons, oncologist, radiation oncologists, nuclear physicians, physiatrist and physiotherapists, psychologist and nurses, according to EUSOMA guidelines. They meet twice a week for patient's evaluation and definition of diagnostic and therapeutic strategies. Every choice is always discussed with the patients. Our goal is to tailor individualized treatment according to clinical stage and tumor biology. We provide oncoplastic surgery and when mastectomy is needed, we offer immediate reconstruction. Radioguided Occult Lesion Localization (ROLL) and Sentinel Lymph Node Biopsy (even with intra-operative evaluation) are available. The Breast Unit provides care of all stages of breast cancer, including breast irradiation, pre-operative and adjuvant systemic therapy, management of locally advanced and metastatic cancer, psychological and rehabilitative support. Clinical research is part of global strategy treatment.

Spedali Civili - Breast Unit

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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** 9
- Mammograms per year** 37000
- Breast radiographers**
- Screening program**
- Verification for non-palpable breast lesions on specimen**
- Axillary US/US-guided FNAB**
- Clinical Research**

Available imaging equipment

- Mammography
- Ultrasound
- Magnetic Resonance Imaging (MRI)
- Mammography with Tomosynthesis, PET

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
- ROLL: radio-guided occult lesion localization

Available breast tissue sampling equipment

- Stereotactic Biopsy (Mammography guided)
 - 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)** 460
- Dedicated Breast Surgeons** 5
- Surgeons with more than 50 surgeries per year** 4
- Breast Surgery beds** 8
- 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

Reconstructive/Plastic Surgery

- ✓ **Reconstructive/Plastic surgeons** 5
- ✓ **Immediate Reconstruction available**

Type of breast reconstructive surgery 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
- ✓ Lipofilling

Pathology

- ✓ **Dedicated Breast Pathologists** 3

Available studies

- ✓ Cytology
- ✓ Haematoxylin & eosin section (H&E)
 - ✓ Surgical specimen
 - ✓ Sentinel node
 - ✓ Core biopsy
- ✓ Frozen section (FS)
 - ✓ Surgical specimen
 - ✓ Sentinel node
- ✓ Immunohistochemistry stain (IHC)
 - ✓ Estrogen receptors
 - ✓ Progesterone receptors
 - ✓ HER-2
 - ✓ Ki-67

Other special studies available

- ✓ Fluorescence in-situ Hybridization for HER-2 gene (FISH)
- Oncotype Dx (21-gene assay)
- MammaPrint (70-gene microarray)
- Prediction Analysis of Microarray 50-gene set (PAM 50)

Parameters included in the final pathology report

- ✓ Pathology stage (pT and pN)
- ✓ Tumour size (invasive component in mm)
- ✓ Histologic type
- ✓ Tumor grade
- ✓ ER/PR receptor status
- ✓ HER-2/neu receptor status
- ✓ Peritumoural/Lymphovascular invasion
- ✓ Margin status
- ✓ CK5/6, EGFR, claudina , e-caderina, calponina, P63, CD10, P53, Ck14

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

Targeted brachytherapy (MammoSite, SAVI applicator, other devices)

Intra-operative RT (IORT)

Multidisciplinary Meeting (MDM) / Tumour Board (TB)

Regular MDM/TB for case management discussion

Twice a week

Weekly

Every two weeks

Other Schedule

Cases discussed at MDM/TB

Preoperative cases

Postoperative cases

Specialties/services participating in MDM/TB

Radiology

Breast Surgery

Reconstructive/Plastic Surgery

Pathology

Medical Oncology

Radiotherapy

Genetic Counselling

Breast Nurse Service

Psycho-oncology

Data Manager

Further Services and Facilities

Nuclear Medicine

Lymphoscintigraphy

Bone scan

Positron Emission Tomography (PET)

PET/CT scan

Rehabilitation

Prosthesis service

Physiotherapy

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

Contact details

Clinical Director

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From airport:

From Malpensa, Linate, Bergamo airports : Highway A4. Continue following BRESCIA direction and exit at BRESCIA OVEST. Follow direction “Spedali Civili”.

By train:

From Milano Centrale: frequent trains to Brescia, then the hospital is easily accessible by public transportation.

By bus or sub-way/underground:

By subway: get off at the OSPEDALE station
By bus (urban area): lines 10, 15, 16 and 17 for the Piazzale Spedali Civili entrance.

By car:

From Milan: Highway A4 direction VENEZIA then continue following direction BRESCIA and exit to BRESCIA OVEST. Follow direction “Spedali Civili”.

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