

# **BREAST CENTRES NETWORK**

Synergy among Breast Units

# University Medical Centre Groningen - Groningen, Netherlands

**General Information** 



New breast cancer cases treated per year 170

Breast multidisciplinarity team members 12 Radiologists, surgeons, pathologists, medical oncologists, radiotherapists and nurses

Clinical Director: Jakob de Vries, MD, PhD

The Breast Unit of University Medical Center Groningen has a central position in the Northern Netherlands and offers primary, secondary and tertiary care. New patients with breast problems are firstly seen by nurse practitioners for history and first physical exam. Imaging and needle biopsy (if necessary) are performed on the same day and results discussed by the team and communicated to the patient with a first treatment proposal. The team discusses all patients every week.

UMCG focuses on healthy aging in all priority areas: research, clinical care and education. The Institute of Healthy Aging focuses on the healthy aging-related research. This institute forms the shell in which healthy-aging activities are inserted, i.e. the cohort study LifeLines, the UMCG Center for Geriatric Medicine (UCO) and the future European Research Institute on Biology of Ageing (ERIBA).

# **University Medical Centre Groningen**

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# CERTIFICATION(S) ACCREDITATION(S)

Roze Lintje Expiration date: 01 July 2019



Borstkanker Vereniging Nederland

This Centre has notified to be certified and, as such, been requested to upload the certification document for further information. When the certification document/s is/are provided, it is/they are made available hereafter.

# Available services

<ul> <li>Radiology</li> <li>Breast Surgery</li> <li>Reconstructive/Plastic Surgery</li> <li>Pathology</li> <li>Medical Oncology</li> <li>Radiotherapy</li> </ul>	<ul> <li>Nuclear Medicine</li> <li>Rehabilitation</li> <li>Genetic Counselling</li> <li>Data Management</li> <li>Psycho-oncology</li> <li>Breast Nurses</li> </ul>	<ul> <li>Social Workers</li> <li>Nutritional Counselling</li> <li>Survivorship Groups</li> <li>Sexual Health Counselling</li> <li>Supportive and Palliative Care</li> <li>Integrative Medicine</li> </ul>
adiology		
<ul> <li>Dedicated Radiologists 3</li> <li>Mammograms per year 3000</li> <li>Breast radiographers</li> <li>Screening program</li> <li>Verification for non-palpable breast lesions on specimen</li> <li>Axillary US/US-guided</li> <li>FNAB</li> <li>Clinical Research</li> </ul>	Available imaging equipment         Mammography         Ultrasound         Magnetic Resonance Imaging (MRI)         3D US, Tomosynthesis, Bio-optical Imaging         Available work-up imaging equipment         Computer Tomography         Ultrasound         Magnetic Resonance Imaging (MRI)         Magnetic Resonance Imaging (MRI)         PET/CT scan         Nuclear Medicine, HER2 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

### **Breast Surgery**

Mew operated cases per year (benign and malignant)	217
Dedicated Breast Surgeons	2
Surgeons with more than 50 surgeries per year	2
Breast Surgery beds	5
Sreast Nurse specialists	2
V Outpatient surgery	
Intra-operative evaluation of sentinel node	
Reconstruction performed by Breast Surgeons	
Clinical Research	

### Primary technique for staging the axilla

- $\square$  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 2 Type of breast reconstructive surgery available Immediate Reconstruction available Remodelling after breast-conserving surgery Reconstruction after mastectomy: V Two-stage reconstruction (tissue expander followed by implant) ✓ One-stage reconstruction Autogenous tissue flap V Latissimus dorsi flap Transverse rectus abdominis (TRAM) Free-flaps (free TRAM, DIEP, SIEA, gluteal, etc.) Surgery on the contralateral breast for symmetry All Forms of Oncoplastic Surgery

## Pathology

Dedicated Breast Pathologists	2	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)
<ul><li>✓ Sentinel node</li><li>✓ Core biopsy</li></ul>		Parameters included in the final pathology report
Frozen section (FS)		Pathology stage (pT and pN)
Surgical specimen		🗹 Tumour size (invasive component in mm)
Sentinel node		🗹 Histologic type
Immunohistochemistry stain (IHC)		🗹 Tumor grade
Estrogen receptors		ER/PR receptor status
Progesterone receptors		V HER-2/neu receptor status
HER-2		🗹 Peritumoural/Lymphovascular invasion
<ul> <li>✓ Ki-67</li> </ul>		🗹 Margin status

## **Medical Oncology**

V Dedicated Breast Medical Oncologists	2
Outpatient systemic therapy	
V 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)
- 🗹 Simultaneous Integrated Boost

## 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 Medical Oncology Cases discussed at MDM/TB Radiotherapy Preoperative cases Senetic Counselling Postoperative cases Marse Service Psycho-oncology V Nurse Specialists

## **Further Services and Facilities**

#### **Nuclear Medicine**

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

#### Rehabilitation

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

#### **Genetic Counselling**

Specialist Providing Genetic Counselling/Risk assessment service:

- V Dedicated Clinical Geneticist
- Medical Oncologist
- Breast Surgeon
- General Surgeon
- Gynaecologist
- Senetic Testing available
- Surveillance program for high-risk women

#### Data Management

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

# Contact details

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## How to reach us



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## From airport:

The UMCG is located in the center of Groningen. It can be easily reached by car and by public transportation. **By train:** 

If you travel by public transportation, take city bus 7, 8 or P+R-bus 22 from the Central Station.

## By bus or sub-way/underground:

The district buses 40, 42, 65, 165, 174, 671 and 679 stop at the UMCG.

## By car:

Follow the ANWB-signpostings to UMCG. These will lead you to the car park below UMCG reception hall. **Last modified:** 13 July 2018