



BREAST CENTRES NETWORK

Synergy among Breast Units

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CHC - Centre Hospitalier Chrétien - Liège, Belgium

General Information



New breast cancer cases treated per year	430
Breast multidisciplinarity team members	24
Radiologists, surgeons, pathologists, medical oncologists, radiothera nurses	pists and

Clinical Director: Joseph Weerts, FRCS, MD

The unit offers an integrated multidisciplinary approach including all steps from screening to diagnosis of breast cancer with detailed risk assessment to long-term follow-up.

Continuous care is also provided to all patients and family thus accompanied until eventual death.

All patients are invited to follow a 'breast cancer itinerary' at the time of diagnosis or relapse as well as as during their multi-modal treatment and their follow-up. Indivudalized itineraries may be also offered in various situations. Those structured clinical itineraries allowed to substantially reduce any delay in the management of patients. Patients are proposed to various clinical trials according to the status of their disease taking into account new possible therapeutic perspectives which could be interesting for them.

CHC - Centre Hospitalier Chrétien

Rue de Hesbaye, 75 4000 Liège,

Phone: +3242248111

Fax:

E-mail: catherine.marissiaux@chc.be

Web-site: www.chc.be

CERTIFICATION(S) ACCREDITATION(S)

Belgian Breast Cancer Clinic (over 150 new cases/year)

Expiration date: 15 April 2016

Belgian Ministry of Health

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

- ✓ 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
 ✓ Mammograms per year
 ✓ Breast
 radiographers
 ✓ Screening program
 ✓ Verification for
 non-palpable breast lesions
 on specimen
 ✓ Axillary US/US-guided
 FNAB
- Available imaging equipment

 Mammography
 Ultrasound
 Magnetic Resonance Imaging (MRI)

 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
Core Biopsy
Vacuum assisted biopsy

Breast Surgery

✓ Clinical Research

- ✓ New operated cases per year (benign and malignant)
 400

 ✓ Dedicated Breast Surgeons
 4

 ✓ Surgeons with more than 50 surgeries per year
 3

 ✓ Breast Surgery beds
 6

 ✓ 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 Type of breast reconstructive surgery available 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 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) ✓ Sentinel node Parameters included in the final pathology report Core biopsy ✓ Pathology stage (pT and pN) ✓ Frozen section (FS) ✓ Tumour size (invasive component in mm) ✓ Surgical specimen Mistologic type ✓ Sentinel node ✓ Tumor grade ✓ Immunohistochemistry stain (IHC) ✓ ER/PR receptor status Estrogen receptors ✓ HER-2/neu receptor status Progesterone receptors Peritumoural/Lymphovascular invasion ☑ HER-2 Margin status ✓ Ki-67 ✓ KI67 **Medical Oncology** Dedicated Breast Medical Oncologists Outpatient systemic therapy ✓ Clinical Research

adiotherapy	
☑ 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)
lultidisciplinary 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
Cases discussed at MDM/TB	✓ Medical Oncology
₩ Posterior to the control of the c	✓ Radiotherapy
Preoperative cases	Genetic Counselling
✓ Postoperative cases	✓ Breast Nurse Service
	✓ Psycho-oncology
	☑ Palliative Care
urther Services and Facilities	
Nuclear Medicine	Genetic Counselling
☑ Lymphoscintigraphy	✓Specialist Providing Genetic Counselling/Risk assessment
☑ Bone scan	service: Dedicated Clinical Geneticist
Positron Emission Tomography (PET)	☐ Medical Oncologist
✓ PET/CT scan	☐ Breast Surgeon
Rehabilitation	General Surgeon
✓ Prosthesis service	☐ Gynaecologist
✓ Prosidesis service ✓ Physiotherapy	✓ Gastroenterologist
✓ Lymph-oedema treatment	☑ Genetic Testing available
✓ Lympn-oedema treatment ✓ Fitness programme; yoga; tai-chi	✓ Surveillance program for high-risk women
	Data Management
	lacksquare Database used for clinical information
	✓ Data manager available

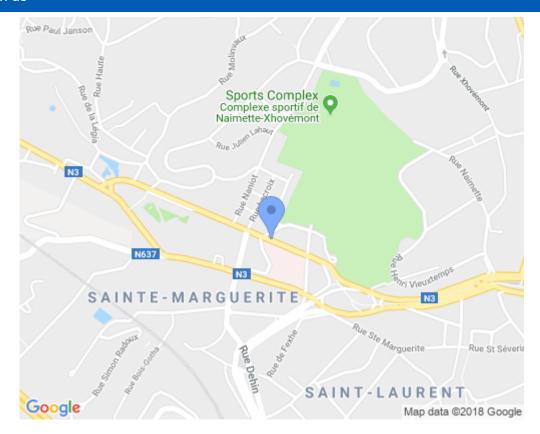
Contact details **Clinical Director** Joseph Weerts, FRCS, MD Master in Training Surgery-Oncological joseph.weerts@chc.be +3242248901 Programmes Radiology **Bernard Bourdoux** Mammogram Unit Coordinator +3242248800 bernard.bourdoux@chc.be Maitia Lastra Radiologist maitia.lastra@chc.be +3242248800 Vinciane Henon vinciane.henon@chc.be +3242248800 Radiologist **Damien Martin** Radiologist damien.martin@chc.be +3242248800 Roxanne Ouhadi +3242248800 Radiologist roxanne.ouhadi@chc.be **Breast Surgery** Michel Coibion Staff Member of the Gynecology Oncology michel.coibion@chc.be +3242395700 Pino Cusumano Staff Member of the Gynecology Oncology pino.cusumano@chc.be +3242248980 Joseph Weerts Staff Member of Surgery Dpt. joseph.weerts@chc.be +3242248900 Jean-Marc Dewandre Staff Member of Surgery Dpt. jean-marc.dewandre@chc.be +3243747070 **David Francart** Staff Member of Surgery Dpt. david.francart@chc.be **Reconstructive Surgery** Xavier Nelissen Head of the Plastic Surgery Dpt. x.nelissen@chirplast.be +3242212728 Laurence Preud'homme, MD Staff of the Plastic Surgery Team laurence.preudhomme@chc.be +3242212728 **Pathology** Veronique Jossa Staff Member of Pathology Dpt veronique.jossa@chc.be +3242248870 Anne Servais Staff Member of Pathology Dpt. anne.servais@chc.be +3242248870 Brigitte Massart, MD Staff member of Pathology Dpt. brigitte.massart@chc.be +3242248870 Florence Dome Staff Member of Pathology Dpt +3242248870 Noella Bletard Staff Member of Pathology Dpt +3242248870 **Medical Oncology** Marie-Pascale Graas +3242248990 Staff Member of Medical Oncology Dpt. marie-pascale.graas@chc.be **Geoffrey Matus** Staff Member of Medical Oncology Dpt. geoffrey.matus@CHC.BE +3242248990 +32-42248990 Anne-Catherine Davin, MD Staff Member of Medical Oncology Dpt. anne-catherine.davin@chc.be Francoise Kreutz, MD Staff Member of Medical Oncology Dpt. francoise.kreutz@chc.be +32-42248990 Radiotherapy Nadine Lombard, MD Staff Member of Radiotherapy Dpt. nadine.lombard@chu.ulg.ac.be +3242248650

+3242248650

Staff Member of Radiotherapy Dpt.

Jean Vanderick, MD

How to reach us



CHC - Centre Hospitalier Chrétien

Rue de Hesbaye, 75

4000 Liège,

Phone: +3242248111

Fax:

E-mail: catherine.marissiaux@chc.be

Web-site: www.chc.be

From airport:

Liège airport is 15 minutes away (by car) from the hospital.

By train:

Liège Guillemins station is approximately 3 Km from the hospital. Buses leave every 10 minutes. Take one of the following buses to Place Saint Lambert: 1, 4.

By bus or sub-way/underground:

From the city centre, take bus number 12, 75, 80, 80/, 81, 82, 83, 84, 85, 88, 175 to the CHC-Clinique >Saint-Joseph. Bus stop is right in the front of the hospital main entrance.

By car:

Via E25, motorway, and exit n. 33. Then follow arrows.

Last modified: 30 March 2016