



BREAST CENTRES NETWORK

Synergy among Breast Units



ASUGI - SSD Breast Unit - Trieste, Italy

General Information



New breast cancer cases treated per year 317

Breast multidisciplinarity team members 19
Radiologists, surgeons, pathologists, medical oncologists, radiotherapists and nurses

Clinical Director: Marina Bortul, MD

The Breast Unit of Trieste is located in a functional women department scheduled on a multidisciplinary approach. It takes care of breast pathology from diagnosis to treatment and follow-up according to a pathway which relies on international guidelines for breast pathology, diagnosis and treatment. The breast unit of Trieste obtained EUSOMA Certification in June 2016 with confirmation in June 2019.

ASUGI - SSD Breast Unit

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CERTIFICATION(S) ACCREDITATION(S)

BCCERT - Breast Centres Certification

Expiration date: 09 June 2025



Certification document (original lang.)

Available services

- ✓ Radiology
- ✓ Breast Surgery
- ☑ Reconstructive/Plastic Surgery
- ✓ Pathology
- Medical Oncology

✓ Clinical Research

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) 3D Mammography 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

- ✓ New operated cases per year (benign and malignant)
 311

 ✓ Dedicated Breast Surgeons
 3

 ✓ Surgeons with more than 50 surgeries per year
 3

 ✓ Breast Surgery beds
 4

 ✓ Breast Nurse specialists
 3

 ✓ 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

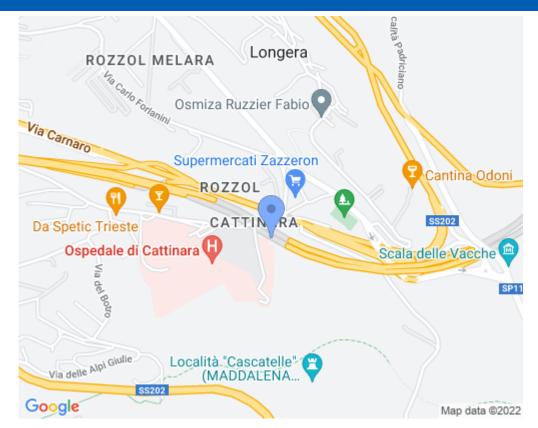
☑ Immediate Reconstruction available	Type of breast reconstructive surgery available		
✓ Immediate Reconstruction available	✓ Remodelling after breast-conserving surgery		
	★ Remodelling after breast-conserving surgery ✓ Reconstruction after mastectomy:		
	 Reconstruction after mastectomy: Two-stage 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.)		
	lacksquare Surgery on the contralateral breast for symmetry		
athology			
☑ Dedicated Breast Pathologists	3 Other special studies available		
Available studies	✓ Fluorescence in-situ Hybridization for HER-2 gene (FISH)		
☑ Cytology			
☑ Cytology ☑ Haematoxylin & eosin section (H&E)	Oncotype Dx (21-gene assay)		
✓ Surgical specimen	MammaPrint (70-gene microarray)		
✓ Sentinel node	Prediction Analysis of Microarray 50-gene set (PAM 50)		
✓ Core biopsy	✓ oncotype dx outside + PDL1 Parameters included in the final pathology report		
✓ Frozen section (FS) ✓ Surgical specimen	✓ Pathology stage (pT and pN)		
Sentinel node	✓ Tumour size (invasive component in mm)		
	✓ Histologic type		
✓ Immunohistochemistry stain (IHC)✓ Estrogen receptors	☑ Tumor grade		
✓ Progesterone receptors	✓ ER/PR receptor status		
₩ HER-2	✓ HER-2/neu receptor status		
₩ HER-2 ₩ Ki-67	Peritumoural/Lymphovascular invasion		
E N O	✓ Margin status		

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
	\square 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	☑ Breast Surgery
Every two weeks	✓ Reconstructive/Plastic Surgery
Other Schedule	✓ Pathology
Cases discussed at MDM/TB	☑ Medical Oncology
	☑ Radiotherapy
Preoperative cases	☑ Genetic Counselling
Postoperative cases	☑ Breast Nurse Service
	✓ Psycho-oncology
	☑ gynecologist
Further 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
Prostnesis service Physiotherapy	✓ Genetic Testing available
✓ Physiotherapy ✓ Lymph-oedema treatment	✓ Genetic Testing available ✓ Surveillance program for high-risk women
EL LYMPH-OEGEMA TREATMENT	Data Management
	☑ Database used for clinical information
	✓ Data manager available
	- Data Manager available

Contact details

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How to reach us



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From airport:

Trieste Airport (Friuli Venezia Giulia) located in Ronchi dei Legionari (40 Km from Trieste)

By train:

Trieste Central Station

By bus or sub-way/underground:

Bus n. 22 from the Railway Station Trieste

By car:

Highway following indications to Trieste - Cattinara Hospital

Last modified: 28 January 2022