



BREAST CENTRES NETWORK

Synergy among Breast Units

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AZ Sint-Jan AV Hospital - Brugge, Belgium

General Information



New breast cancer cases treated per year 218

Breast multidisciplinarity team members 11

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

Clinical Director: Jan Lesaffer

The breast unit, located in the AZ Sint-Jan AV Hospital, is dedicated to the treatment of benign and malignant breast diseases. The breast unit is made up of a multidisciplinary team including surgeons (general, gynaecologists and oncoplastic), medical oncologists, radiotherapists, radiologists, histopathologists, breast care nurses, psychologists and nutritioners. This team meets weekly to review all cases, examining treatment options according to regularly updated guidelines. Treatment within research protocols is available and coordinated by a data manager.

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

Available imaging equipment

- Mammography
- ✓ Ultrasound

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✓ 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

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ROLL: radio-guided occult lesion localization

Available breast tissue sampling equipment

- Stereotactic Biopsy (Mammography quided)
 - ☑ 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

- $lap{New}$ New operated cases per year (benign and malignant) 185
- ✓ Dedicated Breast Surgeons✓ Surgeons with more than 50 surgeries per year
- ✓ Breast Surgery beds 10✓ Breast Nurse specialists 2
- ✓ Breast Nurse specialists✓ 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 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) ✓ 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 **Medical Oncology** ✓ Dedicated Breast Medical Oncologists Outpatient systemic therapy Clinical Research

Radiotherapy	
✓ Dedicated Radiation Oncologists ☐ Clinical Research	Available techniques after breast-conserving surgery (including experimental)
Cliffical Research	
	☑ 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	(ТВ)
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
	☐ Genetic Counselling
✓ Postoperative cases	✓ Breast Nurse Service
	✓ Psycho-oncology
Further Services and Facilities	
Nuclear Medicine	Genetic Counselling
✓ Lymphoscintigraphy	✓ Specialist Providing Genetic Counselling/Risk assessment
☑ Bone scan	service:
Positron Emission Tomography (PET)	✓ Dedicated Clinical Geneticist
☑ PET/CT scan	☐ Medical Oncologist☐ Breast Surgeon
Rehabilitation	General Surgeon
	Gynaecologist
Prosthesis service	
Physiotherapy	✓ Genetic Testing available✓ Surveillance program for high-risk women
☑ Lymph-oedema treatment	Data Management
	☑ Database used for clinical information
	☑ Data manager available

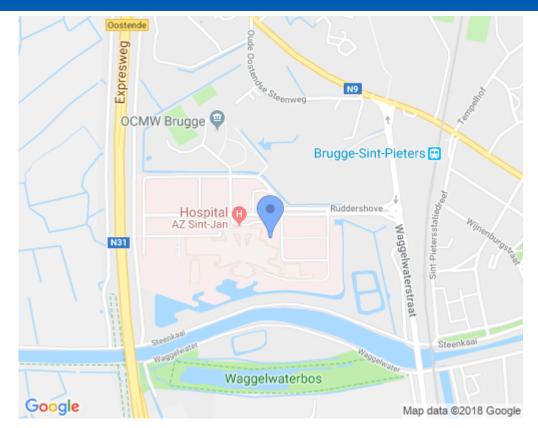
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From airport:

From Brussel International airport take the train to Bruges. At the entrance of the train station there is a bus stop where you can take the bus to A.Z. Dt. Jan.

By bus or sub-way/underground:

At the entrance of the train station there is a bus stop where you can take the bus to A.Z.Sint Jan.

By car:

Via the E40 motorway: take exit 8 off the E40 Gent-Oostende and head towards Zeebrugge on the N31. Here you take the exit 'Waggelwater' and then follow directions as indicated.

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