



BREAST CENTRES NETWORK

Synergy among Breast Units

★ Centro de Mama - Hospital de S. João - Porto, Portugal

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: José Luis Fougo, MD, MSc, PhD

The Breast Unit activity effectively started in 1997, with the main goal of integrating diagnosis and treatment. In 2008 the name and status changed from Breast Unit to Breast Center - Hospital São João is now an independent, multidisciplinary, one-stop centre. It is the fourth busiest Breast Center in Portugal. The Center has pre-graduate and post-graduate teaching students and all specialities residents training and working within the centre. Oral presentations, posters, and publications, as well as clinical investigation works, are also of high interests. Team members work on high-risk clinics, neo-adjuvant chemotherapy concept, senior patients (>75), axillary management and on aesthetic result of breast cancer conservative treatment. The Hospital de São João is recognized as the best Portuguese Hospital, and its Faculty of Medicine is the most requested by the Portuguese medical students. From September 2017, the Breast Centre is a EUSOMA (European Society of Breast Cancer Specialists)/Breast Centres Certification certified unit.

Centro de Mama - Hospital de S. João

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CERTIFICATION(S) ACCREDITATION(S)

BCCERT - Breast Centres Certification

Expiration date: 07 February 2023



Certification document (eng lang.)

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** 5
- Mammograms per year** 5000
- 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)
- Tomosynthesis

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)** 440
- Dedicated Breast Surgeons** 7
- Surgeons with more than 50 surgeries per year** 7
- Breast Surgery beds** 0
- Breast Nurse specialists** 7
- 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
 - Combined technique (Blue Dye + Indocyanine Green)
- Axillary sampling

Reconstructive/Plastic Surgery

- Reconstructive/Plastic surgeons** 4
- 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
- Fat Grafting; Lymphnode Transfer

Pathology

- Dedicated Breast Pathologists** 2

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)
- Other Microarray Sets - Translational Research

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
- When needed p63, CK5, Ki67

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)

Accelerated Partial Breast Irradiation

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

Nuclear Medicine

Further Services and Facilities

Nuclear Medicine

Lymphoscintigraphy

Bone scan

Positron Emission Tomography (PET)

PET/CT scan

SPECT - CT

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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Radiology

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Breast Surgery

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Reconstructive Surgery

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Pathology

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Medical Oncology

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Radiotherapy

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How to reach us



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From airport:

You can reach Porto from Francisco Sá Carneiro Airport, the largest airport in the Northeast of the Iberian Peninsula. It is located 11 km from Oporto and provides connections with over 30 international destinations. Public transportation and taxis connect the airport with the city and the Breast Unit (Metro and Bus).

By train:

There are fast trains connecting Porto to the other main cities in Portugal. At Campanhã Station you can find a Metro Line connecting to São João Hospital.

By bus or sub-way/underground:

There is a subway line arriving at S. João Hospital, from the airport and the train station. There are several buses arriving at S. João Hospital from all city areas.

By car:

The main road accesses are the Porto/Lisboa highway, the IP 4 linking Vila Real and Bragança, the A3 linking Porto and Braga as well as the IC 1 and IC 24.

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