

BREAST CENTRES NETWORK

Synergy among Breast Units

Erasme Hospital Free University of Brussels - Brussels, Belgium

General Information



New breast cancer cases treated per year150Breast multidisciplinarity team members9Radiologists, surgeons, pathologists, medical oncologists, radiotherapists and nursesClinical Director: Philippe Simon, MD, PhD

The Breast Unit of our academic hospital covers the whole spectrum of breast diseases. We provide care for benign diseases as well as for all stages of breast cancer. We take part in the national breast cancer screening program, support and provide public education and strongly emphasize and support continuous education of our own team. We perform all diagnostic interventions with all imaging modalities. We work in perfect cooperation among the departments of haematology/oncology, pathology, radiation therapy and psychotherapy/psychosomatic medicine. There are interdisciplinary meetings held at least once a week concerning diagnostic procedures, surgical approaches, presentation of pathological results and further post-operative management in terms of, e.g. chemotherapy or radiation therapy for breast cancer patients (interdisciplinary tumour conference). Patient support is granted by one breast-care nurse and one clinical psychologist. Physiotherapy and lymph-oedema treatment are available for all our patients, and palliative care is well established.

Erasme Hospital Free University of Brussels

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Available services

Radiology Vuclear Medicine Social Workers Rehabilitation Mutritional Counselling Breast Surgery Reconstructive/Plastic Surgery Genetic Counselling Survivorship Groups **Pathology** Z Data Management Sexual Health Counselling Psycho-oncology Supportive and Palliative Care Medical Oncology **Radiotherapy** V Breast Nurses Manual Integrative Medicine Radiology **V** Dedicated Radiologists 2 Available imaging equipment Available breast tissue sampling equipment Mammograms per year 12500 Mammography 🗹 Breast Stereotactic Biopsy (Mammography VItrasound radiographers quided) Screening program Core Biopsy (Tru-cut) Magnetic Resonance Imaging (MRI) Verification for Vacuum assisted biopsy Available work-up imaging non-palpable breast lesions equipment 🗹 Ultrasound-guided biopsy on specimen Fine-needle aspiration biopsy Computer Tomography Axillary US/US-guided (FNAB, cytology) **V**Itrasound **FNAB** Core Biopsy Magnetic Resonance Imaging (MRI) Clinical Research Vacuum assisted biopsy V PET/CT scan MRI-guided biopsy Primary technique for localizing 🗹 Core Biopsy non-palpable lesions Vacuum assisted biopsy Hook-wire (or needle localization) Charcoal marking/tattooing ROLL: radio-guided occult lesion localization

Breast Surgery

200
2
2
5
1

New exercised energy new year (benign and malignent)

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 surgeons	3	Type of breast reconstructive surgery available
Immediate Reconstruction available		
		Remodelling after breast-conserving surgery
		Reconstruction after mastectomy:
		\mathbf{M} Two-stage reconstruction (tissue expander followed by implant)
		Mone-stage reconstruction
		🗹 Autogenous tissue flap
		🗹 Latissimus dorsi flap
		🗹 Transverse rectus abdominis (TRAM)
		🗹 Free-flaps (free TRAM, DIEP, SIEA, gluteal, etc.)

Pathology

Dedicated Breast Pathologists	1 Other special studies available
Available studies	☑ Fluorescence in-situ Hybridization for HER-2 gene (FISH)
V Cytology	Oncotype Dx (21-gene assay)
✓ Haematoxylin & eosin section (H&E)	MammaPrint (70-gene microarray)
Surgical specimen	\Box Prediction Analysis of Microarray 50-gene set (PAM 50)
✓ Sentinel node ✓ Core biopsy	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	Iistologic type
☑ Immunohistochemistry stain (IHC)	🗹 Tumor grade
Strogen receptors	R/PR receptor status
Progesterone receptors	HER-2/neu receptor status
✓ HER-2	Peritumoural/Lymphovascular invasion
✓ Ki-67	Margin status

Medical Oncology

Dedicated Breast Medical Oncologists	2
Soutpatient systemic therapy	
🗹 Clinical Research	

Radiotherapy

Dedicated Radiation Oncologists

V 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)

Multidisciplinary Meeting (MDM) / Tumour Board (TB)

Regular MDM/TB for case management discussion	Specialties/services participating in MDM/TB
Twice a week	Radiology
🗹 Weekly	Sreast Surgery
Every two weeks	Reconstructive/Plastic Surgery
Other Schedule	V Pathology
Cases discussed at MDM/TB	Medical Oncology
	🗹 Radiotherapy
Preoperative cases	Senetic Counselling
Postoperative cases	Sreast Nurse Service
	Sycho-oncology

Further Services and Facilities

Nuclear Medicine

V Lymphoscintigraphy

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

Rehabilitation

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

Genetic Counselling

Specialist Providing Genetic Counselling/Risk assessment service:

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

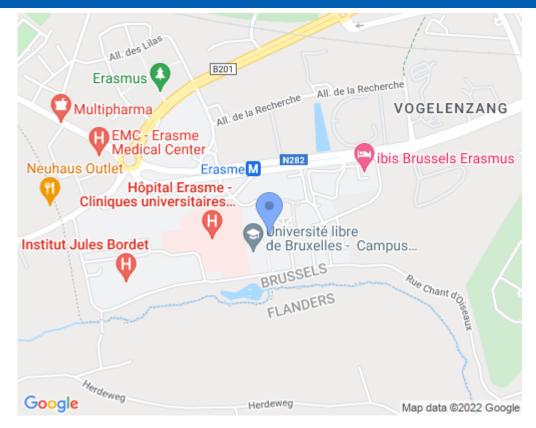
Data Management

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

Erasme Hospital Free University of Brussels

Contact details			
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How to reach us



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From airport:

Website: http://www.brusselsairport.be/

From Brussels National Airport, take the West Ring (RO) and exit 'ULB Erasme' (No. 16 or 15a).

At the exit, follow signs 'ULB Erasme Hospital.

By train:

SNCB information: +32(0)2 5552525 - Website: http://www.sncb.be/.

BITS Information: +32(0)2 5152000 - Website: http://www.stib.irisnet.be/.

From Central Station: take the subway (line 1B) direction 'Erasme'. Get off at 'Erasme Hospital' (terminus). The journey takes about 35 minutes.

From Gare du Nord: take tram 23 direction 'Heysel'. Get off at 'De Brouckere'. Walk to the stop 'De Brouckere' (for correspondence). Take the subway (line 1B) direction 'Erasme'. Get off at 'Erasme Hospital' (terminus). The journey takes about 30 minutes.

From Gare du Midi: Walk to the station 'Midi B', located South Station - Indoor Street / Avenue Fonsny. Take tram 56 direction 'Erasme' (destination CERIA). Get off at 'Debussy.' Take the subway (line 1B) direction

'Erasme'. Get off at 'Erasme Hospital' (terminus). The journey takes about 20 minutes.

By bus or sub-way/underground:

Information BITS: +32(0)2 5152000 - Website: http://www.stib.irisnet.be/ De Lijn Bus Information & Schedules: +32(0)2 5262811 - Website: http://www.delijn.be/

The inauguration of the new metro station Erasmus took place on 15 September 2003. This new station is the terminus of the line 1B, resulting from the extension of the current line 'Stockel - Bizet.

By car:

From motorways Namur (E411/A4), Liège (E40/A3), Antwerp (E19), Ostend (A10), Charleroi (E19/A9), take exit 'ULB Erasme' (No. 16 or 15a) on Brissels ring. At the exit, follow signs 'ULB Erasme Hospital. **Last modified:** 10 December 2020