



BREAST CENTRES NETWORK

Synergy among Breast Units

★ Istituto Clinico S. Anna - Brescia, Italy

General Information



New breast cancer cases treated per year 250

Breast multidisciplinary team members 13

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

Clinical Director: Antonio Barni, MD

The Breast Unit at Istituto Clinico S. Anna (Rete Ospedaliera Gruppo San Donato), Eastern Lombardy/North of Italy, has been working since January 2010. Such an initiative aims at an accurate and beneficial multidisciplinary standard therapy, thanks to the cooperation of specialists from all the branches involved in the breast disease. The approach to the patient starts from/at the time of screening followed by diagnosis (precocious when possible), surgery, radiotherapy and therapy with anti-proliferant drugs up to an individualized follow up. So we're able to offer onco-plastic surgery, radiotherapy and chemotherapy in adjuvant setting or in advanced disease. A multidisciplinary meeting is also organized weekly and each patient's case management discussed, when needed.

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CERTIFICATION(S) ACCREDITATION(S)

BCCERT - Breast Centres Certification

Expiration date: 25 November 2018



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** 2
- Mammograms per year** 7000
- 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)
- elastosonography

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)** 310
- Dedicated Breast Surgeons** 2
- Surgeons with more than 50 surgeries per year** 2
- Breast Surgery beds** 10
- 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

Reconstructive/Plastic Surgery

Reconstructive/Plastic surgeons 2

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

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)

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
- Not neoplastic pathology

Medical Oncology

Dedicated Breast Medical Oncologists 3

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)

IMRT

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

Further Services and Facilities

Nuclear Medicine

Lymphoscintigraphy

Bone scan

Positron Emission Tomography (PET)

PET/CT scan

Rehabilitation

Prosthesis service

Physiotherapy

Lymph-oedema treatment

Psycho-Oncology

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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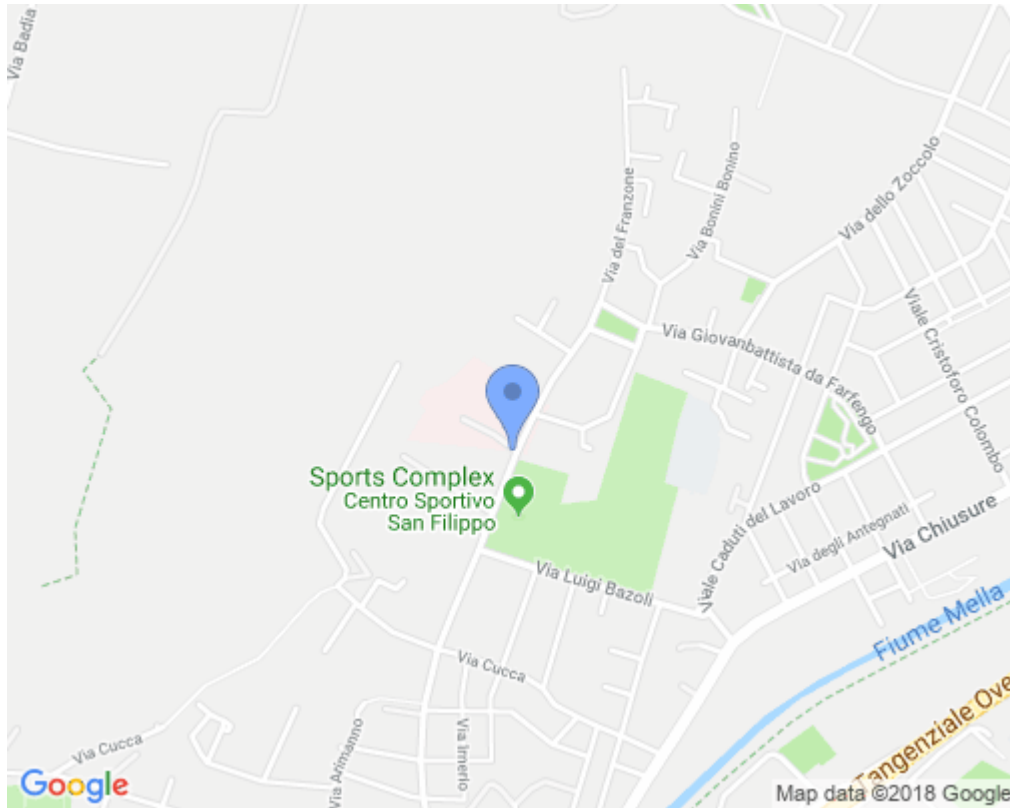
Medical Oncology

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Radiotherapy

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From airport:

From Malpensa: Motorway A4. Continue following BRESCIA direction and exit to BRESCIA OVEST. Follow the direction for “Istituto Clinico S. Anna”.

By train:

From Milano Centrale: there are trains every hour to Brescia. Istituto Clinico S. Anna is easy reachable from Railway Station by bus (n° 9, 16).

By car:

From Milan: Motorway A4 direction VENEZIA then continue following direction BRESCIA and exit to BRESCIA OVEST. Follow the direction for “Istituto Clinico S. Anna”.

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