



BREAST CENTRES NETWORK

Synergy among Breast Units

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San Martino Polyclinic Hospital - Genova, Italy

General Information



New breast cancer cases treated per year 829

Breast multidisciplinarity team members 23

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

Clinical Director: Lucia Del Mastro, MD

The Breast Unit was established in 2016 at Ospedale Policlinico San Martino IRCCS, in order to give patients a multidisciplinary approach to breast cancer diagnosis and treatment. The multidisciplinary team (oncologists, surgeons, radiologists, radiation oncologists, pathologists, genetist and gynecologists) meets once a week to define diagnostic and therapeutic strategies of all breast cancer patients. On average, 800 patients are evaluated every year at our Istitute. We provide care of breast cancer at every setting, including conservative and demolitive surgery with reconstruction and oncoplastic surgery, partial and whole breast irradiation, pre-operative and adjuvant systemic therapy, treatment of locally advanced and metastatic breast cancer, psychological and rehabilitative support. Our Breast Unit is the regional HUB of breast cancer genetic evaluation and fertility preservation strategy.

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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	7
Mammograms per year	20000
✓ 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)

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 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

✓ Clinical Research

✓ New operated cases per year (benign and maligna	int) 1139
✓ Dedicated Breast Surgeons	6
☑ Surgeons with more than 50 surgeries per year	6
✓ Breast Surgery beds	16
☑ Breast Nurse specialists	1
☑ 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 ✓ Immediate Reconstruction available	5	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	3	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		
☑ 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		✓ Histologic type
✓ Immunohistochemistry stain (IHC)		☑ Tumor grade
☑ Estrogen receptors		✓ ER/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 ✓ Outpatient systemic therapy ✓ Clinical Research 	5	

diotherapy	
☑ 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)
ultidisciplinary 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
✓ Preoperative cases✓ Postoperative cases	✓ Genetic Counselling
	✓ Breast Nurse Service
	✓ Psycho-oncology
urther Services and Facilities	
Nuclear Medicine	Genetic Counselling
✓ Lymphoscintigraphy	Specialist Providing Genetic Counselling/Risk assessment service:
☑ Bone scan	✓ Dedicated Clinical Geneticist
Positron Emission Tomography (PET)	☐ Medical Oncologist
☑ PET/CT scan	☐ Breast Surgeon
Rehabilitation	General Surgeon
☑ Prosthesis service	Gynaecologist
✓ Physiotherapy	☑ Genetic Testing available
✓ Lymph-oedema treatment	Surveillance program for high-risk women
	Data Management
	lacksquare Database used for clinical information
	☑ Data manager available

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