



Senato  
della Repubblica

## Malattie ad andamento degenerativo di particolare rilevanza sociale,

con specifico riguardo al tumore della mammella,  
alle malattie reumatiche croniche ed alla  
sindrome HIV. Documento conclusivo  
con cd di testi allegato

indagini conoscitive

Atti dell'indagine  
conoscitiva svolta  
dalla 12ª commissione  
permanente del Senato  
(igiene e sanità)

n. 36  
giugno 2011

XVI legislatura

Breast Unit :  
Why a  
multidisciplinary  
approach ?

# **Differences in Treatment and Survival in Breast Cancer Patients in Europe.**

**Survival of women with breast cancer in Europe: variation with age, year of diagnosis and country.** The EURO CARE Working Group.  
Sant M, Capocaccia R, Verdecchia A, et al Int J Cancer. 1998 Aug 31;77(5):679-83

**Differences in stage and therapy for breast cancer across Europe.**  
Sant M; The EURO CARE Working Group  
Int J Cancer. 2001 Sep15; 93(6):894-901

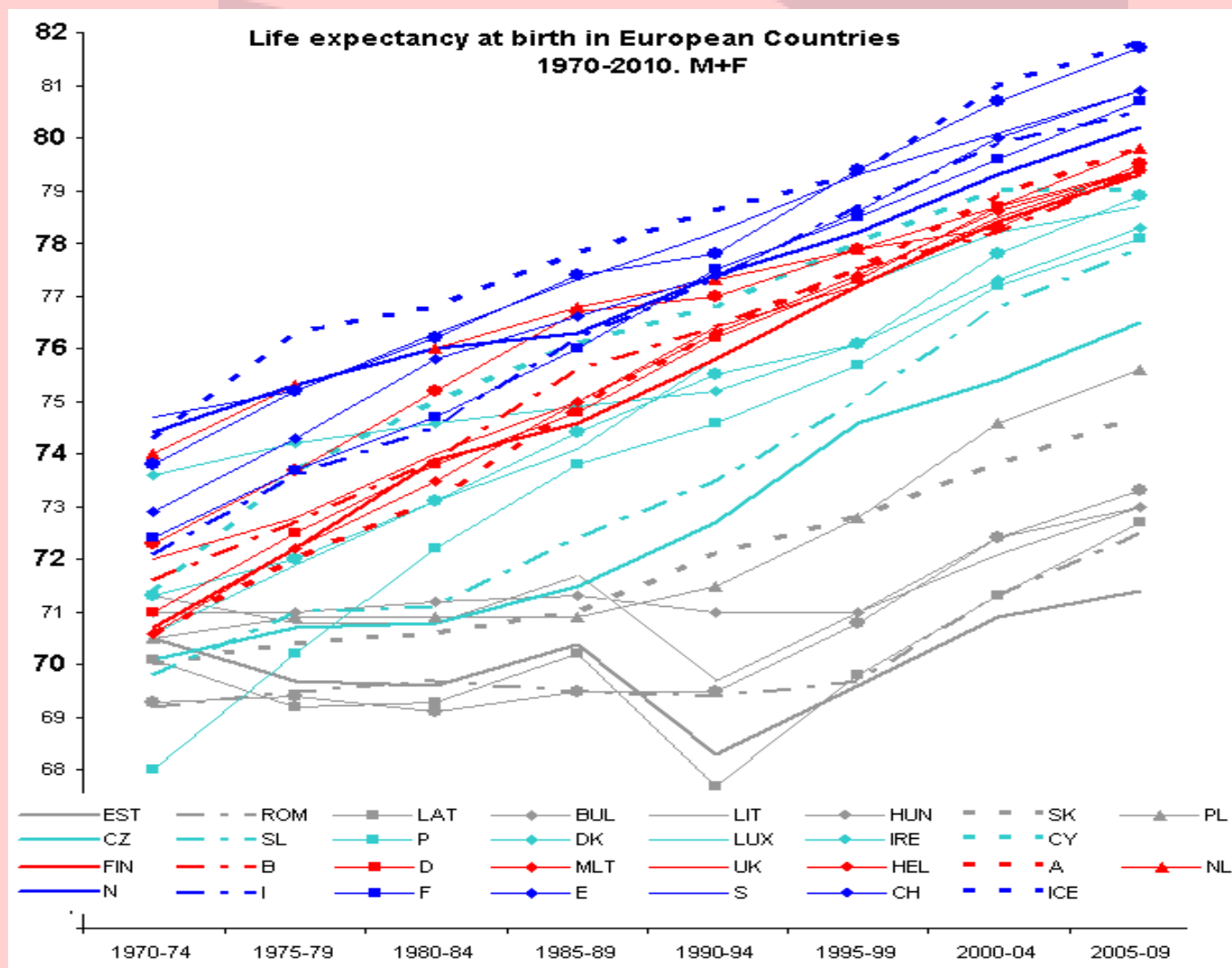
**Cancer survival increases in Europe, but international differences remain wide**

Sant M, Capocaccia R, Coleman MP, et al.; The EURO CARE Working Group  
Eur J Cancer 2001Sep; 37 (13): 1659-67

...the odds of healing of a patient are proportional to the level of competence of the hospital from which are treated

# LIFE EXPECTANCY TREND IN EUROPE

# OVERALL SURVIVAL AND QUALITY OF CARE



# **Importance of the Team Approach : Evidence**

**“Breast cancer patients cared for by a multi-disciplinary team (MDT), rather than a series of individual practitioners, have an improved survival 10 years following diagnosis”**

# Importance of the Team Approach: Evidence

*Annals of Surgical Oncology*, 10(6):606–615

DOI: 10.1245/ASO.2003.06.017

## Breast Cancer: Do Specialists Make a Difference?

*Annals of Surgical Oncology*, 10(6):589–590

DOI: 10.1245/ASO.2003.05.005

Editorial

## Breast Cancer: Specialists Do Make a Difference

**Treatment by a specialist resulted in a 33% reduction in the risk of death at 5 years**

## Effects of multidisciplinary team working on breast cancer survival: retrospective, comparative, interventional cohort study of 13 722 women

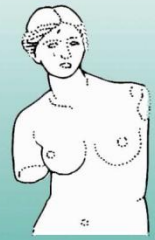
 OPEN ACCESS

Eileen M Kesson *project manager*<sup>1 4</sup>, Gwen M Allardice *statistician*<sup>1 4</sup>, W David George *school of medicine honorary professor*<sup>2</sup>, Harry J G Burns *chief medical officer for Scotland*<sup>3</sup>, David S Morrison *director*<sup>4</sup>

We found that the introduction of teams providing multidisciplinary care for the treatment of breast cancer was associated with 18% lower breast cancer mortality at five years

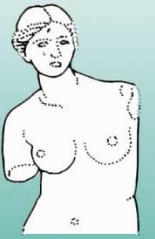
BMJ

# BREAST UNIT



**EUSOMA**  
European Society of Breast  
Cancer Specialists

- 1.  $\geq 150$  new breast cancer cases (any stage) per year**
- 2. Identified Clinical Director of Breast Unit**
- 3. Dedicated radiologist reading each  $\geq 1000$  mammograms per year**
- 4. Dedicated breast surgeons performing each  $\geq 50$  surgeries per year**
- 5. Breast dedicated pathologist, medical oncologist, radiotherapist**
- 6. Weekly MDM: Multidisciplinary case Management Meeting**



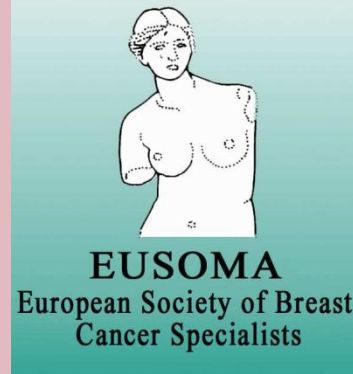
**EUSOMA**  
European Society of Breast  
Cancer Specialists

# **EUSOMA :**

- 1.- Critical mass**
- 2.- Clinical Director**
- 3.- Protocols (Guidelines)**
- 4.- Audit**
- 5.- Multidisciplinary Case Management Meeting**
- 6.- Communication of the diagnosis, treatment plan and waiting time**



# **EUSOMA**



**7.- Patient information**

**8.- Teaching**

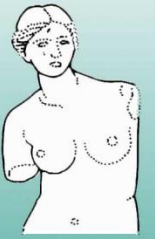
**9.- Research**

**10.- Breast Surgery and Reconstructive Surgery**

**11.- Breast Radiology**

**12.- Breast Pathology**

**13.- Medical Oncology**



**EUSOMA**  
European Society of Breast  
Cancer Specialists

# **EUSOMA**

**14.- Radiation Oncology**

**15.- Breast Care Nursing**

**16.- Other Services**

**Genetic Counseling, First Patient Visit, Advanced Breast Cancer, Psychological support, Follow-up, Prosthesis, Physiotherapy and lymphoedema, Palliative Care**

# **BREAST UNIT: model health care**

- **From diagnosis to therapy, from screening to advanced disease**
- **Multidisciplinarity**
- **EUSOMA requirements**
- **Adequate SSN reimbursement**
- **Dedicated equipe**

# **BREAST UNIT: training model**

- **Definition of new health roles with opportunity of career**
- **Home of training and clinical pathway**
- **Partnership with university and graduate school**
- **Develop translational research**

# Italian situation at 2010

**... only 12 % of hospital admissions at 2010 for breast cancer involving health care that reach the quantitative parameters recommended by EUSOMA**

# CONSIDERATIONS

**The NATIONAL CANCER PLAN covers not only the prevention but also the organization of care**

- **Introduce the Breast Units in the National Healthcare System identifying a dedicated pathway coherent with the costs**
- **Not only an “ ACT of ADDRESS “ but intervening in the organizational model of the Regions**

# **Implementing Proposal of Health Governance**

- **Avoid the spread of few cases in many hospital**
- **Reorganize the devolution of skills**
- **Offers health model to the Regions**
- **Allocation the resources**

# Advantages

- **Centralization of pathways**
- **Rationalization of costs SSN**
- **Standardization of therapies**
- **Reduction of the social costs**
- **Improvement of outcome through evaluation specific indicators**
- **Improvement Survival\***

\* Evidence-based





# Senonetwork Italian Association Onlus

The Senonetwork Italia project born in March 2012 and obtain the no-profit status in 2013 with aim to promote the treatment of breast cancer in Italy in dedicated center respecting the european requirements (EUSOMA).

The objective is to treat all women in center of excellence .

All the italian Breast Centers that treat more of 150 new cases\year , minimal volume requirements indicated from EUSOMA , will be invited to join at Senonetwork Italia Onlus and involved in the implementation of the scientific and organizational activities.

# SCIENTIFIC COMMITTEE

Coordinator : Luigi Cataliotti

Representative Scientific Society :

Associazione Italiana di Oncologia Medica (**AIOM**) - Fabio Puglisi

Associazione Italiana Radioterapia Oncologica (**AIRO**) – Cristiana Vidali

Associazione Nazionale Italiana Senologi Chirurghi (**A.N.I.S.C.**) - Roberto Murgo

Gruppo Italiano Screening Mammografico (**GISMa**) - Gianni Saguatti

Società Italiana di Anatomia Patologica e Citopatologia Diagnostica (**SIAPec-IAP**) - Anna Sapino

Società Italiana di Radiologia Medica (**SIRM**) - Pietro Panizza

Europa Donna Italia

Rosanna D'Antona

Breast Centres Network

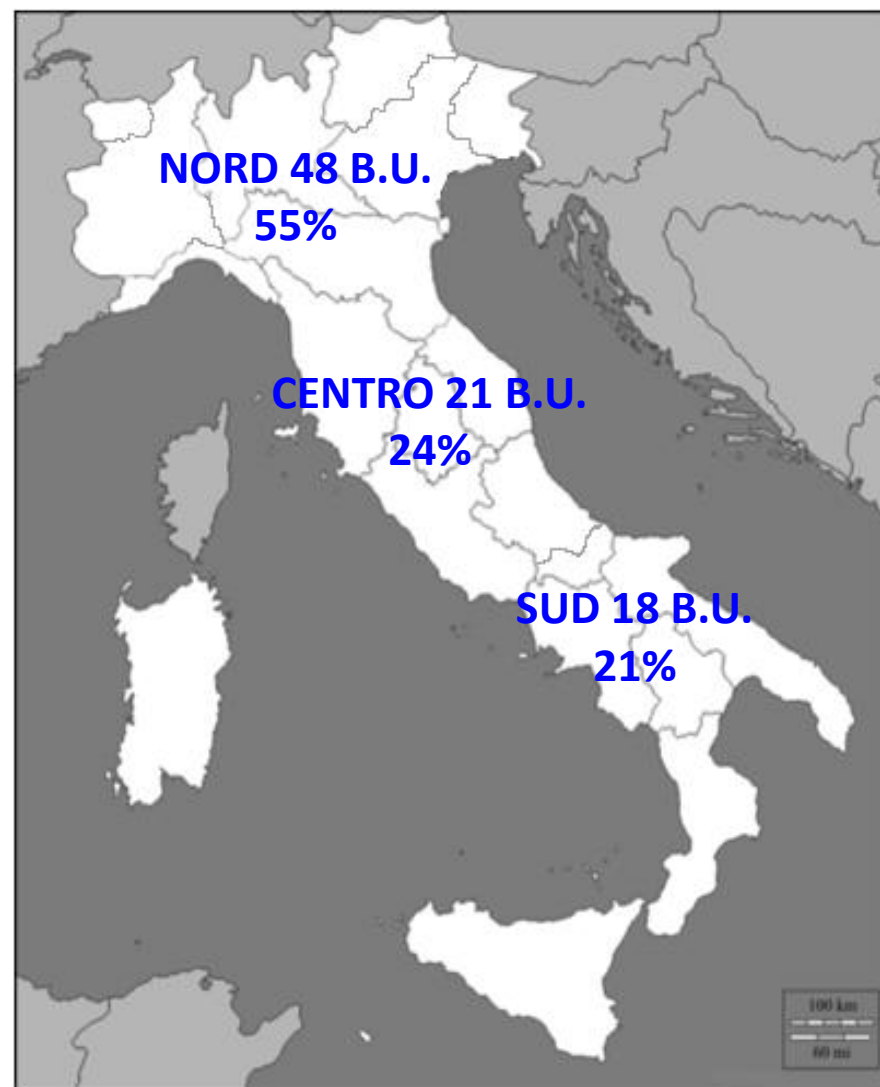
Alberto Costa, Corrado Tinterri

European Society of Breast Cancer Specialists

Lorenza Marotti

# Breast Centers participating : 87 centers

ABRUZZO	2
CALABRIA	3
CAMPANIA	3
EMILIA ROMAGNA	4
FRIULI VENEZIA GIULIA	7
LAZIO	8
LIGURIA	2
LOMBARDIA	21
MARCHE	1
PIEMONTE	6
PUGLIA	4
SICILIA	4
TOSCANA	9
TRENTINO ALTO ADIGE	1
UMBRIA	3
VALLE D'AOSTA	1
VENETO	6
SARDEGNA	1



**New cases treated in 2011: about 29.000**



**Regione Lombardia**  
LA GIUNTA

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DELIBERAZIONE N° IX / 4882

Seduta del 21/02/2013

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**CAROLINA ELENA PELLEGRINI**  
**LEONARDO SALVEMINI**

Con l'assistenza del Segretario **Marco Piloni**

Su proposta dell'Assessore **Mario Melazzini**

Oggetto

DETERMINAZIONI IN ORDINE ALLA RETE REGIONALE LOMBARDA DEI CENTRI DI SENOLOGIA -  
BREASTUNITS NETWORK - APPROVAZIONE LINEE GUIDA

Il Dirigente **Carlo Lucchina**

Il Direttore Generale **Carlo Lucchina**

# EUROPEAN PARLIAMENT MOTION FOR ACTION

- Special attention to women with breast cancer
- Surveillance for High Risk women ( familial and genetic women )

## **YOUNG WOMEN DEDICATED SCREENING**

- Attention to employment, financial and life-plan problems
- The role of nutrition, lifestyle, genetic factors, environmental pollutants
- **ESTABLISHMENT OF MULTIDISCIPLINARY BREAST UNIT**



# Joint Research Centre

*The European Commission's in-house science service*

## Overview of two WORKSHOPS

A European Commission initiative for a voluntary accreditation scheme & breast cancer guidelines for breast cancer services

*Institute for Health and Consumer Protection (JRC-IHCP)*

*Public Health Policy Support Unit*

*Healthcare Quality team*



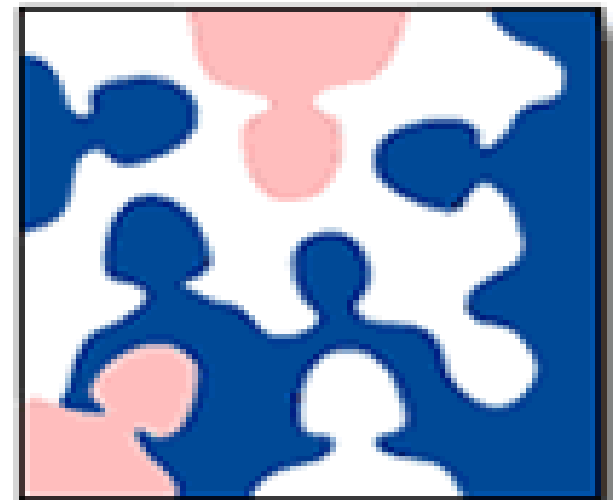
[www.jrc.ec.europa.eu](http://www.jrc.ec.europa.eu)

# Why a Breast Unit?

... what women want!



EUROPA



DONNA  
FORUM ITALIANO ONLUS