



Australasian Society for Breast Disease

Dedicated to promoting knowledge in the areas of prevention, diagnosis and management of breast disease

NEWSLETTER No.8 JUNE 2015

UPCOMING EVENTS



10th Scientific Meeting, Brisbane September 2015

Registrations are open. Online registration and Meeting details can be accessed on the conference website. Members wishing to present a paper or poster must submit an abstract by 17 July 2015. Email to info@asbd.org.au All people who submit an abstract will be advised accordingly by 3 August 2015.

Applied Ultrasound for Clinicians

The ASBD Applied Ultrasound for Clinicians course was held on 28 February 2015 at the Melbourne Marriott Hotel. This was a fully subscribed, hands-on workshop that was well received. Plans are to continue this annual introductory workshop and another is planned for Saturday 27 February 2016 in Melbourne.

Auckland Meeting 2016

There are plans underway to have a workshop style meeting in Auckland, July 7-9th, with BreastSurgANZ running another oncoplastic workshop prior. ASBD will host a one day multidisciplinary program and other small workshops. Dr Douglas Macmillan, an Oncoplastic Surgeon from Nottingham has accepted the invitation to be part of the faculty. Details are yet to be confirmed but keep an eye on our website for further information.

PRESIDENT'S REPORT

It has been another busy year for the ASBD Executive with changes to the Executive and an exciting conference coming up in September in Brisbane. Sydney based Kerry Eyles brings a wealth of experience as our new Executive Officer. Kerry has worked at Cancer Council NSW and at the Westmead Breast Cancer Institute and she has tertiary qualifications in Education and I.T.

10th Scientific Meeting, Brisbane September 2015

The Organizing Committee for the 10th Scientific Meeting of the Australasian Society for Breast Disease has been diligently working on the event to bring a relevant and informative program. The meeting will be held in Brisbane September 17th – 19th at the Brisbane Convention and Exhibition Centre. The location is centrally placed in the cultural enclave of South Bank, a good base to explore Brisbane.

The Faculty includes Professor Philip Poortmans, a Radiation Oncologist, currently Chair of Radiation Oncology at the Radboud University Medical Centre in Nijmegen, The Netherlands. He has been on numerous editorial boards and international committees and is the current president of the European Society for Radiation and Oncology (ESTRO).

Pat Whitworth is a Breast Surgical Oncologist and Director of the Nashville Breast Center. His research interests include targeted treatments based on tumour genomic analysis as well as image-guided, minimally invasive surgical techniques for the diagnosis and management of breast cancer.

Fraser Symmans is Professor and Director of Research Operations in the Department of Pathology at M.D. Anderson Cancer Center. His research is focused on breast cancer, with specific emphasis on neoadjuvant treatment trials.

Sophia Zackrisson is a Radiologist from Sweden, currently at Lund University Hospital, Malmo, with specific interests in breast cancer screening and digital tomosynthesis.

There will be an Advanced Ultrasound workshop for clinicians and Tomosynthesis workshops. Prior to the ASBD program surgeons can participate in a two day Oncoplastic Cadaver workshop run by BreastSurgANZ. With such an impressive line up I would strongly encourage you to register early and enjoy this year's meeting.

Daniel de Viana
President



EXECUTIVE OFFICER'S REPORT

I have just completed my first three months as Executive Officer for ASBD. During this hectic and exciting time, under the guidance of the executive, I have achieved quite a lot including:

- Relocation of the ASBD home-based office from Queensland to NSW
- Event planning for the 10th Scientific Meeting
- Finalising of program and registration for the 10th Scientific Meeting
- Setup of the online registration and Meeting website
- Organising and holding the Strategic Planning Meeting in Sydney
- Distribution of membership renewals for 2015-16.

I would like to thank Kerry McMahon and Meagan Brennan for the huge amount of time they have invested in ASBD over the past 6 months, during its transition period from one Executive Officer to another.

I look forward to working with you and providing efficient membership services. Later in the year I will be starting on the development of a new website for ASBD with enhanced features. If you have any suggestions for inclusions in the new website that would be of benefit to members, please email me.

I have had a busy time learning about this role and getting to know the executive members. I look forward to meeting many of you in September!

With regards
Kerry Eyles



FUTURE DIRECTIONS

The ASBD executive met in Sydney recently for our regular strategic planning meeting. The focus was again on remaining relevant to the membership with plans over the next 6-12 months to enhance the website and update the members' only area, making it a useful educational resource and networking tool. Improving ease of online subscriptions is also a focus and it is essential that you provide ASBD with a current email address, as all future renewal notices will be sent this way. Any suggestions for improving ASBD meetings, membership services or other ASBD issues are welcome and please email Kerry Eyles at kerrye@asbd.org.au.

ACCOMMODATION IN BRISBANE FOR THE 10TH SCIENTIFIC MEETING

We have negotiated special rates with several hotels located close to the Brisbane Conference and Exhibition Centre (BCEC) including:

- Rydges South Bank
- Mantra South Bank
- Mantra on Edward
- Treasury Heritage Hotel

[See the conference website for details.](#)

Accommodation must be booked directly with the hotel by each delegate, not through the secretariat. ASBD is not accepting reservations or payment for accommodation. A number of rooms have been reserved at each venue. However, it is advisable to book early to ensure accommodation is secured, as the room allocation is reviewed each month by the hotels.

Conference registration should be completed online, or the registration form sent to the Executive Officer (post or scan and email).

CASE REPORT

A 71 year old women with a past history of breast cancer, presents with a 7 week history of erythematous, bruise-like rash on the inferior aspect of the right breast. There was no history of prior trauma.

She originally had a right wide local excision and axillary clearance 3 years earlier and received post operative radiotherapy followed by hormone therapy with Fareston. Examination revealed a 53 mm x 28 mm erythematous lesion with a small blister at 6 o'clock and a second less defined lesion of 11 mm. There were no other masses and no lymphadenopathy.

Mammogram and ultrasound were normal apart from some ill-defined thickening of the subcutaneous tissues.

What is the diagnosis?

What are risk factors for developing this condition?

What is the treatment for this condition?



SOLEI GIBBS

ASBD would like to advise members that Ms Solei Gibbs, long term Executive Officer has moved on to other challenges in life. We wish to acknowledge her long and dedicated hard work and we wish her the best of luck in the future.

MEMBERSHIP REMINDER

Membership renewal is now due. ASBD membership is from July 1 to June 30 each year due to Elsevier's requirements for The Breast subscription. Renew your membership by 24th June to ensure that you receive the August edition of The Breast. Renew online now.

AGM NOTICE

All members are invited to attend the Annual General Meeting of the Australasian Society for Breast Disease to be held Saturday 19th September 7:00 am at Brisbane Convention and Exhibition Centre. Breakfast will be provided. Please indicate your intention to attend when registering for the 10th Scientific meeting, for catering purposes.

ASBD EMAIL ADDRESS

ASBD can still be contacted on info@asbd.org.au, but if you have previously had that email address stored in your contacts you will need to change the contact details:

Contact - Kerry Eyles

Phone number - 0477 330 054.

info@asbd.org.au is used on the website as a point of contact for ASBD. However, Kerry also has her own email address

kerrye@asbd.org.au (not listed on the website to avoid spam). She can be contacted on either email address.

Angiosarcoma of the breast

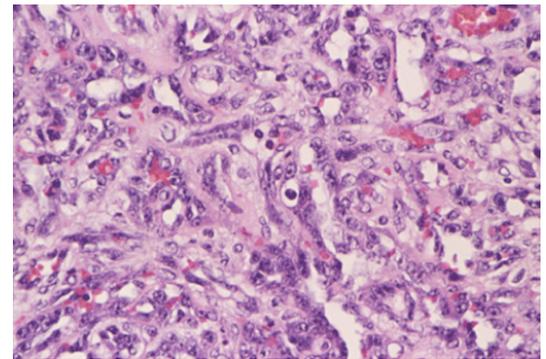
Angiosarcoma of the breast is a rare malignancy seen in approximately 0.05% of cases. The age of affected individuals ranges from 35-90 years with a median of around 65 years. Given it's rarity statistics tend vary amongst different case series.

Angiosarcomas of the breast can be divided into primary and secondary with approximately half of cases seen in each group. Secondary lesions are classically seen post radiotherapy to the breast, but may be seen with chronic lymphoedema. With increasing breast conservation and use of post mastectomy radiation, an increase in incidence of angiosarcoma could be anticipated.

In secondary cases, clinical presentation is rare inside 3 years post radiotherapy and the mean latency to presentation is around 5-6 years. Lesions may be single or multiple. They can appear as focal, macular lesions or as ill-defined patches of skin discolouration ranging in colour from red to blue to purple. Skin haemorrhage, blistering or ulcerations may occur.

As in this case report, mammography and ultrasound are usually unhelpful. Anecdotal reports in the literature suggest contrast MRI may be of value. Generous biopsies, either punch or open are advised as post irradiation changes can be confused with low grade tumour changes at the margins of the lesion.

Histology is characterized by rapidly proliferating, extensively infiltrating anaplastic cells derived from blood vessels and lining irregular blood-filled spaces.



Initial treatment is usually surgery, typically mastectomy. Aggressive treatment with wide margins is indicated as loco-regional recurrences are common.

Radiotherapy can be beneficial, however chemotherapy appears to be of limited value.

This patient had a mastectomy and received no chemotherapy or radiation. On review at 2 months a rash at the medial aspect of mastectomy scar was noted. Punch biopsy was inconclusive.



Further excision was performed confirming recurrent angiosarcoma. Staging revealed no metastatic disease and post operative chest wall radiotherapy was given. The patient remained free of recurrence at her 10 year review.

GOVERNANCE STRUCTURE

Executive

Dr Daniel de Viana, *President*
Dr Kerry McMahon, *Treasurer*
A/Prof Wendy Raymond
Dr Meagan Brennan
Dr Michelle Reintals
A/Prof Nirmala Pathmanathan
Dr Catherine Shannon
Dr Reena Ramsaroop
A/Prof Bruno Giuffre
Dr Roslyn Drummond
Dr Richard Harman
Dr Yvonne Zissiadis
Dr James French
Dr Susan Fraser

Executive Officer

Kerry Eyles
PO Box 1004 Narellan NSW 2567
T: 0477 330 054
kerrye@asbd.org.au

TELL US WHAT YOU THINK

It is obvious that ASBD needs to remain relevant to its members' needs and the Executive would be grateful if you have any comments on meetings, membership or other issues to take a few moments to email Kerry at: kerrye@asbd.org.au

Daniel de Viana (President)

on behalf of the Executive Committee.

Australasian Society for Breast Disease
PO Box 1004 Narellan NSW 2567
T: 0477 330 054
E: kerrye@asbd.org.au
W: www.asbd.org.au

Mortality from this condition is high, however with early diagnosis and aggressive treatment some case series show reasonable results.

References

1. Hodgson NC Am J Clin Oncol. 2007 Dec;30(6):570-3
2. Rosen PP. Sarcoma. In Rosen PP. Rosen's Breast Pathology. Philadelphia : Lippencott, Williams, & Wilkins, 2001:813-861.
3. Jojanneke M. Seinen, MD, Ann Surg Oncol. 2012 Aug; 19(8): 2700-2706



ASCO 2015

Thanks to Nirmala Pathmanathan for this contribution

The theme for ASCO 2015 in Chicago this year was "Illumination and Innovation: Transforming Data into Learning." This rather evocative title was in reference to the steady stream of new knowledge regarding the molecular basis of cancer and the application of this knowledge in novel and creative ways to improve patient care.

I have attended this meeting a couple of times and am usually overwhelmed by the huge crowds, which take over the beautiful lakeside city of Chicago for 4 or 5 days, the massive stadium like halls with the speakers miles away looking like miniature rock stars in the distance. It is hard to believe that there are almost 40,000 delegates at the meeting! Yet everything is organised and works like clock work (apart from the several hour long queues at Starbucks).

In the breast cancer sessions there were 4 areas that stood out in the oral abstracts sessions (click on the links to read more):

[ER positive disease and Palbociclib in the metastatic setting \(PALOMA\)](#)

[HER2 positive disease and Neratib in Early Breast Cancer \(ExteNET\)](#)

[HER2 positive disease and T-DM1 in the metastatic/locally advanced setting \(MARIANNE\)](#)

[DCIS – Anastrozole versus Tamoxifen](#)

Education Sessions

There were some excellent educational sessions on a comprehensive range of breast cancer topics. The main messages from some of the sessions are available via the links below:

[Individualising approach for the older woman with breast cancer](#)

[Controversies in neoadjuvant therapy for breast cancer](#)

[Triple negative breast cancer](#)

Overall the meeting provided a wealth of information on all aspects of breast cancer diagnosis, treatment and biology. Particularly valuable were some of the educational sessions and the abstract discussion sessions in which a subject matter expert summarised the major findings and clinical relevance of important oral abstracts that were presented.