

# ASBD UPDATE

A multidisciplinary approach to prevention,  
diagnosis and management of breast disease



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## IMPORTANT DATES

Applied Ultrasound for Clinicians  
4 March, Sydney, or  
14 September Adelaide

ASBD 13th SM  
14-16 September 2023, Adelaide

ASBD 2023 AGM  
15 September 2023

## PRESIDENT'S REPORT



After years of uncertainty and multiple changes, it was wonderful to finally get together again at the Australasian International Breast Cancer conference (AIBC) in Brisbane from 13th to 15th October 2022. As most of you would know, this was a collaboration

between ASBD, BreastSurgANZ and CoBrCa (Controversies in Breast Cancer). There were 1193 conference registrations including 252 virtual registrations. It was exciting to see so many people venturing back to conferencing and to experience the live presentations and debates of our expert international faculty.



Some of the AIBC Faculty L-R Douglas Macmillan, UK; Ritse Mann, Netherlands; Melanie Walker (BreastSurgANZ); Prue Francis; Elisabeth Elder (ASBD); Richard de Boer; Kirsten Pilatti (BCNA); Bruce Mann (CoBrCa); Sunil Lakhani

## TELL US WHAT YOU THINK

**We want to hear from you!**

ASBD wants to remain relevant to its members' needs. If you have any articles to submit, feedback or suggestions on meetings, membership or other issues please take a few moments to email Kerry at: [kerrye@asbd.org.au](mailto:kerrye@asbd.org.au)



## PRESIDENT'S REPORT CONTINUED



ASBD and BreastSurgANZ shared an exhibition space at AIBC - Kerry Eyles, ASBD and Sam Rawlings, BreastSurgANZ

involved in treating breast cancer and other breast disease. On the ASBD online educational platform you will find recordings of webinars covering the fundamentals of the various disciplines, which have been converted to online learning modules. These webinars have been very successful. The latest in the series focused on medical oncology, with talks and discussion on management strategies for the three main biological breast cancer subtypes. Other modules that are already available cover breast surgery, including oncoplastic surgery, breast pathology and lymphoedema prevention and management.

Looking to the future, the planning is well underway for next year's ASBD conference, which will be held in Adelaide from the 14th to 16th of September 2023. The theme for that meeting is **"Breast 360- interdisciplinary perspectives and breakthroughs"** with a line-up of internationally renowned speakers and a focus on emerging treatment strategies and technological innovations, as well as Living Well and Survivorship. Please put the dates in your calendar now.

If you have any ideas for future workshops or seminars or would like to get more involved in ASBD, please let me or Kerry know by emailing [info@asbd.org.au](mailto:info@asbd.org.au). Hope to see you in Adelaide in 2023!

**A/Prof Elisabeth Elder**  
**ASBD President**

I'm very pleased to welcome many new members to ASBD. The membership is now the biggest it has ever been with almost 650 members. Largely that is due to our fruitful collaboration with the McGrath foundation, which has enrolled all its breast care nurses in ASBD, and to our development of online education activities including webinars and online learning modules that have attracted new members. Membership in ASBD gives free access to our online educational platform, as well as subsidised conference registration fees.

ASBD celebrated its 25th anniversary at AIBC with a dinner and dance on Thursday 13th October attended by 150 ASBD members. It was a wonderful way to celebrate 25 years of achievements including:

- our growing membership
- our expansion into nursing and allied health memberships to better reflect the multidisciplinary team model
- our expanding educational services such as webinars, online learning modules, online and practical workshops and conferences.
- development of our strong relationship with other groups including Breast Surgeons of Australia and New Zealand, the McGrath Foundation, Breast Cancer Network Australia, New Zealand Breast Cancer Foundation.

One of the missions of ASBD is to provide high quality education relevant to multidisciplinary team members



Director's table, ASBD 25th Anniversary Dinner L-R Sanjeev Kumar, Kerry Eyles, Jennifer O'Sullivan, Cath Shannon, Nirmala Pathmanathan, Minjae Lah, Peter Chin, Elisabeth Elder, Patty Connor, Maree Colosimo



# Our New Director

ASBD welcomes Dr Parisa Aminzadeh to the ASBD Board of Directors.



Parisa is a radiologist working in public and private hospitals in Melbourne with her main interest being in breast and women's imaging. She works in both diagnostic and screening breast cancer services.

The roles of designated radiologist from 2011 to 2015 in Breast Screen Tasmania, and national site visitor BreastScreen Australia since 2011 has provided her great opportunity to understand, learn and become familiarised with quality improvement aspects of BreastScreen and National Accreditation standards.

Currently Parisa is a member of the

Quality Group BreastScreen Victoria and Director of Training at St Vincent's BreastScreen.

She is interested in research with border line breast lesions, including lobular neoplasia.

She has a special interest in the multidisciplinary approach for treatment of breast cancer and tailoring screening for breast cancer.

Parisa's volunteer roles include board member and assessor at the College of Radiologists, breast and women's imaging examiner at RANZCR.

## ASBD EDUCATION PLANS FOR 2023

ASBD will finalise plans for our 2023 Education Calendar at the Executive Strategic Planning Day in February. Plans discussed so far include:

### Applied Breast Ultrasound for Clinicians

The 2023 course is offered as online learning modules followed by a half-day practical workshop. One registration covers the two components of the course. [Register now for the online theory modules.](#)

The practical course will be offered twice during 2023.

- 1 4th March 2023, Crowne Plaza Sydney, Coogee Beach, NSW
- 2 14th September 2023, Adelaide Convention Centre, South Australia, alongside the ASBD 13th Scientific Meeting

### Online Learning and Webinars

#### RADIATION ONCOLOGY

The Radiation Oncology Online Learning Modules will be released in January

#### MEDICAL ONCOLOGY

Eli Lilly is supporting ASBD to expand our educational material in medical oncology. The online learning modules based on the webinar Systemic Therapy in Breast Cancer - A Summary for the Breast MDT will be released in the first half of 2023. A second medical oncology module - An update in therapeutic strategies in early and metastatic breast cancer will be developed mid-year.

#### GENETICS

A Genetics online learning course is planned for 2023





# Breast Cancer Trials Annual Scientific Meeting July 2022

## Prof Gelareh Farshid

After a COVID imposed hiatus, it was good to attend this scientific meeting in person. The meeting was well attended and maintained its customary high standards. Colleagues from the Japanese sister society supported this meeting, a sign of our strengthening relationship with international groups.

Refreshingly, prevention and screening were part of the opening session of the conference. The ideas of population-based prevention strategies, individual risk assessment and medical and surgical risk reducing interventions were reviewed. In imaging, impressive developments in contrast enhanced mammography were presented and the value of MRI in the PROSPECT

trial was emphasised. This positive trial offered carefully selected women with early breast cancer the option of foregoing XRT after WLE. For women with high-risk ER+/HER2 negative EBC, the results of the monarchE study and the overseas approval of adjuvant Abamaciclib was the subject of several discussions, as the criteria for patient selection and optimal triaging of patients is being worked out. Interestingly Ki-67 immunohistochemistry is being used as a companion diagnostic for this indication in the United States.

For women with advanced breast cancer, the apparent cure of some patients with HER2 positive disease was highlighted. The approach to

oligometastatic disease and particularly the merits (and otherwise) of early detection of metastatic disease were debated.

Dr Laura Essermann was presented with the Robert Sutherland award. In her acceptance address she described her group's visionary work in adaptive clinical trial design with the I-SPY initiative, as well as their work in risk adjusted screening. She bookended her address with songs!

Interesting translational research was highlighted with updates on TNBC and ongoing developments in CDK4/6 inhibitors.

**The 2023 BCT ASM will be held 26-28 July 2023 in Auckland, New Zealand.**

## Memoire: Population Screening in a Pandemic

### Dr Nicholas Repin

Emerging now post pandemic it is probably worth considering the effects on BreastScreen as an example of one of our three national population screening services, and I can speak mainly and somewhat subjectively for NSW North Coast and for Tasmania.

Quantitative effects were present with cessation and delayed catchup of screening numbers, with impact on timeframes, and more subtly with potentially delayed cancer diagnoses. Qualitative effects were also present with loss of service resilience, workforce availability, and potentially of quality. Not all effects were negative as there was considerable development of resilience, technologies, and processes.

The changes in screening numbers were straightforward but with variation across jurisdictions, and with some potentially unaffected.

Screening numbers in January 2020 were normal and dropped off in February/March. There was talk at this time that the risk benefit of continuing to run population screening would become adverse, but the possibility of a shutdown was dismissed as highly unlikely.

However, service shutdowns did then take place for variable periods from March to June. These were initiated initially by government for a combination of reasons and became difficult to reverse as many staff had been lost to redeployment, with many facilities repurposed.

Screening shutdown did not allow immediate service shutdown with a tail of recalled cases that still needed to be assessed, and if necessary referred for treatment into a treatment environment that was becoming challenged.

Screening services began to come back online in May-June 2020 but required that assessment services start shortly after. In some jurisdictions the ability to provide these was limited by border closures. Luckily, just pre-dating the pandemic, there had been reviews of processes and safety of remote breast assessment clinics by teleradiology. This option was possible and the technology had come into general use.

Nevertheless assessment issues have been significant where there has been variable reliance on FIFO radiologists, and local radiologists were unpredictably impacted by COVID rules and illness. Airline limitations and unreliability continue to feed into this.

Screening numbers in 2020 slowly increased through to December but with initially reduced numbers due to extra COVID precautions, extra cleaning and COVID screening tools. Restrictions became less stringent and Staff became used to the 'new normal'.

In 2021 variable COVID restrictions continued representing 'new normal', but most of the catch up happened this year.

Comparison to screening targets is biennial, but comparison of 2022 to 2020 is problematic. At present comparing Jan 2022 to Jan 2020 the participation rate has almost recovered.

In 2022 the COVID screening tool was still active with a high rate of cancellations never seen prior and given at late notice, without time to rebook and therefore reducing clinic utilisation. In some cases this caused missed targets for allowable assessment timeframes.

This is also a challenging year as staff are experiencing burn out, which is multifactorial. Leave/holidays have been difficult, staff illness and replacements are difficult, but slowly we are coming back to normal operations.

**Lessons? Recognise that priorities become highly variable when there is a potential significant population level risk.**

# Brief ASCO 2022 update



## Dr Sanjeev Kumar

ASCO this year highlighted some interesting advances particularly in the treatment of patients with metastatic breast cancer.

The MAINTAIN study posed the important question of whether extending the use of CDK 4/6-inhibitors beyond progression by changing the endocrine therapy backbone from a non-steroidal aromatase inhibitor to either exemestane or fulvestrant is in fact a useful strategy. A modest improvement in progression free survival compared to endocrine therapy alone was demonstrated, but the study more successfully highlighted the abysmal responses seen with single agent endocrine therapy alone after patients have progressed on 1st line CDK 4/6i (2-3 months). The study also failed to address the important question of whether we actually need to switch both the CDK 4/6i as well as the backbone endocrine therapy, as most patients on the study in fact switched CDK 4/6i from Palbociclib to ribociclib in this Novartis study.

The most practice-changing developments were presented with therapeutic strategies involving the new breed of antibody drug conjugates (ADCs). These novel compounds contain an antibody attached by a linker to a cytotoxic drug or 'payload', which is cleverly released inside the cancer cell. Studies were presented utilising ADCs targeting HER2 (trastuzumab deruxtecan or T-DXd), HER3 (patritumab deruxtecan) and Trop-2 (sacituzumab govitecan).

The TROPiCS-02 study confirmed a potential role for Sacituzumab govitecan beyond triple negative breast cancer, demonstrating modest improvements in progression free survival compared to chemotherapy in heavily pre-treated patients with oestrogen receptor positive breast cancer. However, jubilant cheers and standing ovations were reserved for the DESTINY-Breast 04 study, presented in the plenary session. As an ADC, T-DXd has a very high cytotoxic payload: antibody ratio (8:1), making it incredibly potent and proven more biologically active than other HER2-targeting ADCs.

It can also permeate the cell membrane, allowing it to get into neighbouring cells regardless of their HER2 expression. DESTINY-Breast 04 recruited patients with 'HER2 low' breast cancer, defined as IHC 1+ or 2+ but ISH negative, that would normally be considered either ER+ HER2 negative or triple negative. Incredibly, in HER2 low metastatic patients who had received up to 2 prior lines of chemotherapy (and were considered endocrine-refractory if ER+), T-DXd proved to be considerably more efficacious than standard chemotherapy, with marked improvements in response rate, progression free and overall survival. Profoundly, this highlighted a novel strategy that could potentially benefit ~50% of all metastatic breast cancer patients, and certainly looks more biologically active than any single agent chemotherapy option that we have available to us. However, as we contemplate bringing this drug into the clinic, we need to remain cautious and wary of the potential for significant (and sometime fatal) lung toxicity.

**Breast 360**

Australasian Society for Breast Disease  
**13th Scientific Meeting**  
14-16 September 2023  
Adelaide Convention Centre, South Australia

asbd.org.au

Interdisciplinary perspectives and breakthroughs

Australasian Society for Breast Disease

## The ASBD 13th Scientific Meeting website is now live! REGISTRATION IS OPEN | ABSTRACT SUBMISSION IS OPEN

The organising Committee have secured several prominent international keynote speakers that will ensure a stimulating scientific program with lively interactions as we explore and discuss diagnosis, treatment and management of breast cancer in the context of *"Breast 360 - interdisciplinary perspectives and breakthroughs"*.

### CONFIRMED INTERNATIONALLY RENOWNED SPEAKERS:

Prof. Julie Margenthaler, surgeon, USA

Dr. Hope Rugo, medical oncologist, USA

Prof Debra Ikeda, radiologist, USA

Prof Vincent-Salomon, Pathologist, France

Dr Nisha Sharma, Radiologist, UK

### ACCOMMODATION

ASBD has secured competitive accommodation rates at several hotels within walking distance of the Adelaide Convention Centre. These can be accessed via the links on the accommodation page on the ASBD conference website.  
[www.asbd2023.com.au](http://www.asbd2023.com.au)



# Cook Islands Breast Screening 2022

## Dr Jennifer O'Sullivan

In September 2022 I had the pleasure and privilege of being part of a small team from NSW to go to the Cook Islands to assist with their breast screening program.

The Cook Islands are located in the Pacific Ocean, to the north-east of New Zealand, and comprise 15 islands over a total area of 2.25 million square kilometres (nearby New Zealand is 2.68 million square kilometres). The land area of all 15 islands combined is just 240 square kilometres. The largest Island, Rarotonga, is about 67 square kilometres, and is home to the majority of the roughly 16,000 population. Rarotonga has an international airport and the country's largest hospital.

The Cook Islands Ministry of Health has a number of Health Specialist Visit programmes to assist with providing health services to Cook Islanders. Due to the onset of the COVID-19 pandemic, there had been no breast screening available to Cook Islanders since 2019, so a small medical team, including breast physicians, radiographers, and a sonographer was invited to join the

local nursing, radiography and surgical team to provide breast screening and assessment as well as symptomatic workup over a four-week period.

The Ministry of Health, working closely with the Cook Islands Breast Cancer Foundation, actively recruited women in the 40-70 year age group, with priority given to women needing yearly screening due to family history or previous breast cancer treatment, women with family history of breast cancer but no previous screening, followed by women suitable for 2 yearly screening within the target age group.

A total of 809 women attended for a screening mammogram in 2022 - double the number seen in the years prior to the pandemic. The mammograms were double-read and those recalled attended for mammography workup, ultrasound, clinical examination and biopsy as indicated. Those with a malignant assessment outcome are then eligible for transfer to New Zealand for treatment.

In addition to the mammography screening, symptomatic assessment with clinical and ultrasound



examination was also offered to younger women, with the aim of detecting breast cancer in younger women, and also avoiding unnecessary excision of benign breast lesions.

The local hospital team of nursing and radiology staff provided invaluable support in coordinating appointments, liaising with those women being recalled, and providing both technical and practical support during both the initial screening and the extraordinarily busy assessment fortnight.

Due to the unprecedented number of women attending, and the limitations of working with an ageing CR mammogram system, our visiting radiographers worked long hours to complete all the screens. A total of 16 women underwent biopsy (2 x FNAB, 14 x core biopsy). One woman had aspiration of a symptomatic cyst, and one had an abscess drained. Thirteen women were diagnosed with breast cancer (one multifocal). One woman was found to have ADH (atypical ductal hyperplasia) and two had papillomas. Two women were thought to require vacuum-assisted biopsy (in New Zealand).

The Cook Islanders are warm and welcoming people, and it was a joy to meet so many of them. Although there was not much spare time to enjoy all the delights of this beautiful tropical paradise, we did manage to do some snorkeling, see a whale, and sample some delicious local food.

Overall, the experience was hugely rewarding and enjoyable. If invited again I will jump at the chance!



End of the runway at Cook Islands



Landing close to the water!



# **MERRY CHRISTMAS**

**Best wishes for a happy and  
healthy holiday season**

**The ASBD office will close on  
Tuesday 20th December 2022 and  
reopen on Monday 16th January 2023**



SAVE THE DATE

# Breast 360



Australasian Society for Breast Disease  
**13th Scientific Meeting**

14-16 September 2023

Adelaide Convention Centre, South Australia

**Interdisciplinary  
perspectives and  
breakthroughs**

[asbd.org.au](http://asbd.org.au)



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for Breast Disease