



BREAST SURGERY INTERNATIONAL

Newsletter November 2005

News from the BSI:

The BSI meeting at ISW-05, Durban South Africa

The four day program of the **Breast Surgery International** at the ISW 05 at Durban, South Africa was a resounding success. The BSI council and members are indebted to the local organizers under the leadership of Dr Sats Pillay for hosting a flawless meeting. As part of the scientific program, the BSI offered six symposia, two educational/ training sessions and three lunch time sessions, besides the Umberto Veronesi lecture, free paper, video and poster sessions. The scientific program kicked off with the BSI postgraduate course on Sunday, where a wide range of contentious topics were deliberated upon. The near capacity audiences and the lively & meaningful discussion were testimony to the high quality of the course and its success. The Umberto Veronesi Lecture was delivered by BSI president Raimund Jakesz, who provided an overview of the organisation of the Austrian Breast Cancer Study Group that have a long standing tradition of multi-centre studies with an extremely high accrual rate despite participation from numerous small units. The results from various studies on chemo hormonal chemotherapy from this group are currently in clinical practice.

Since its inception, the BSI has had an emphasis on "Developing quality breast cancer care in the Developing countries". Numerous issues pertinent to this theme came up for discussion in the symposia and main sessions. The panel on "Improving breast cancer detection and care in developing countries" focused on

presenting management programs and defining the options and barriers. Presenters from developing countries provided perspectives of breast cancer management in their countries, and shared the reasons for continuing late detection, poor acceptance for breast conservation, availability of affordable adjuvant treatment and lack of uniform protocols and standards of treatment in the developing countries. In India the standards of care- as Gaurav Agarwal put it- are not uniform, varying from world class to pathetic from centre to centre. The Malaysian scenario, as presented by C-H Yip, is still dominated by stage 3 tumors, and breast cancer in old age is a common cause of death amongst women. Justus Apffelstaed provided the South African perspective, where there is a shortage of manpower, expertise and technical equipment, and the costs of adjuvant treatment and access to high quality treatment centres limits success of treatment- some problems shared by all developing countries. Numerous African surgeons participated in the Postgraduate course, and in rest of the BSI scientific program over four days and contributed in different ways as moderators, panellists, presenters and shared thoughtful comments about breast surgery in Africa.

Main sessions and symposia on breast conservation; lymphatic mapping and sentinel lymph nodes studies; training of breast surgeons; and breast cancer in young and pregnant provided high quality presentations and discussions on these contemporary and important issues of breast cancer management. Hiram Cody failed to find any evidence for not performing breast conservation when feasible. By reshaping the breast larger

volumes can be excised thus maintaining symmetry and cosmesis after a breast conservational surgery for breast cancer. Neoadjuvant chemotherapy can improve the chances of breast conservation in patients with large operable breast cancers and is gaining wider acceptance by surgeons and patients. The **sentinel node studies** are widely accepted and practiced now, and hold the potential of avoidance of extensive axillary surgery for early breast cancer. The sentinel lymph node detection and biopsy demands a team approach, and needs to be perfected by all components of the team before being implemented in the clinical practice. The contentious nature of this issue was also exemplified in number of free papers and posters presented on this. Symposium on **Breast cancer in pregnancy and in young women** was addressed by panellists from four continents, who provided more or less similar management recommendations, emphasising on need to tailor treatment in this patient group as per the disease stage and biological markers. **Training of breast surgeons** challenged dogmas of what a surgeon should do. For the surgical trainee who wants to become a dedicated breast surgeon acute abdominal surgery is of less importance than to master reconstructive techniques and be knowledgeable in oncologic surgery. There is however some reluctance among trainees to specialize early in their careers. Programs for breast surgical specialists exist and are attractive when combined with training in reconstructive surgery.

The **free papers and posters** sessions saw number of high quality original papers presented. The highlight of these was the **BSI best paper prize** session, where Gaurav Agarwal's presentation was adjudged the best amongst the seven papers presented all of which were of equally high quality. BSI social program at Durban included a relaxed and informal dinner, in company of menacing sharks and other colourful fish. Credit goes to Justus Apflestaedt for once again organising an outstanding venue and menu for an extremely enjoyable evening.

BSI Office Bearers and Council:

The Durban meeting saw many a new friendships fostering and renewal of many old ones. Besides, the society conducted its business in a friendly, jovial and cordial atmosphere. The minutes of the BSI council and general assembly meetings can be viewed on the BSI web-site. The council as well as the general assembly elected a new council and office bearers. The officers and members of the society thank Dr. Bruce Barraclough (Australia) and Dr. Carlos Sanchez Basurto (Mexico) - the out-going councillors who completed their terms, for all their efforts and contributions to the BSI's activities over the past years. Raimund Jakesz continues to be the president of the society, while Kerstin Sandelin was elected the President elect. Gaurav Agarwal from Lucknow, India takes on the mantle of Secretary, and Marco Margaritoni from Croatia takes on the role of Treasurer of the BSI for four year terms. The council of the BSI elected in August 2005 during the Durban meeting has the following eminent breast surgeons with distinguished and extensive clinical experience in the field as its members:

Dr. Esther Ajuluchuku, Nigeria
Dr. Justus Apflestaedt, South Africa
Dr. Krishna Clough, France
Dr. Hiram Cody III, USA
Dr. Polly Cheung, Hong Kong/ P.R. of China
Dr. Jay Harness, USA
Dr. Stanley Leong USA
Dr. Omgo Nieweg, The Netherlands

BSI Activities in recent past:

The society has been growing from strength to strength since its inception in 1999 at Vienna. The membership of BSI has grown steadily over the years, and now stands at more than 128 members from 44 countries. We would like to take this opportunity to request you to urge your peers, colleagues and friends who have major interests in breast surgery to become members as well, so that the society is further strengthened. Over the past few years, the BSI has supported with participation of its representative members, councilors and

officers in various educational programs and symposia- some of which are the Croatian Senology Society meeting at Dubrovnic (2003); Asian Breast Cancer Conference, Taipeh (2004), European Breast Cancer Conference, Hamburg (2004); Global Summit of Global Breast Health Initiative, Bethesda USA (2004), and SGPGI Breast Course, Lucknow, India (2005). The society stands committed to support CME and training programs in breast surgery and oncology by participation of its representatives in the future also. The information of such programs would be published on the BSI web-site.

A home page for BSI is available to access via www.iss-sic.ch, and is being updated and revamped, to include more useful information and features. You may visit the official web-sites of our society frequently for periodic updates and notices. Any suggestions for making better use of our web-site and any submissions for publication on the web-site are welcome and should be directed to Dr Gaurav Agarwal, Web-master and Secretary, BSI. You can find on the find a link to a panel of "*International Guest Faculty*"- these are eminent breast surgeons who have volunteered to receive visitors and to travel to overseas institutions to share knowledge in the field of breast surgery. Any BSI member willing to act as an international guest faculty are requested to write to the secretary with their information. It is planned to provide information and links to other training/fellowship opportunities in breast surgery on the BSI home page. The members, and their associates and colleagues are invited to avail of these training opportunities.

Future BSI activities:

ISW-07, Montreal Canada:

The next major meeting of BSI would take place in conjunction with the 42nd International Surgical Week to be held at Montreal, Canada in August 2007. The program committee is working hard to make the 2007 BSI sectional program an informative and interesting one. The

program would include symposia on contentious issues of breast surgery, pre-congress postgraduate course, luncheon panels, all deliberated by distinguished faculty of surgeons and invited experts. Your suggestions for making the program useful would be very welcome. Kindly mark the dates in your calendar and make it a point to attend. Also, we would urge you to start working on sending your best breast surgery related clinical and research work for presentation in the free paper session. The deadline for the submission of Abstracts would be in early January 2007, which would give you enough time to be ready with your best abstracts. BSI members are encouraged to submit a manuscript of their presentations for publication in the World Journal of Surgery, the official journal of our society.

BSI Post-graduate Courses:

The huge interest generated by the pre-congress BSI post-graduate course has encouraged the society to plan more such courses in near and distant future, besides making it a regular feature at the ISW's. These courses would emphasize the societies commitment to take continuing medical and surgical education opportunities to developing countries around the world. The society would encourage any of the members from developing countries to chalk out appropriate programs keeping the local participants in mind, and the society would try and arrange for a few international guest speakers participation, besides extending all possible assistance. Any interested members may kindly contact the Secretary, BSI for the details.

We have no doubt about bright and exciting future of the society, and we share the enthusiasm of the membership for an even more active and productive time ahead. We look forward to meeting you, if not earlier, at Montreal in August 2007.

With the very best wishes, on behalf of the BSI council

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