



3rd National Workshop on Screening for Breast Cancer in the Czech Republic

18 November 2005, Brno

European Cancer Network Aims and Activities

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PATHOGENESIS & PREVENTION CLUSTER Head: Dr. Hiroko Ohgaki

- Pathology group Head: Dr. H. Ohgaki
- Screening group Head: Dr. R. Sankaranarayanan
- Screening Quality Control Group Head: Dr. L. von Karsa



PATHOGENESIS & PREVENTION CLUSTER Screening Quality Control Group Current projects

- European Cancer Network (ECN)* umbrella organisation for former and new EU cancer screening networks
 - Breast Cancer Network** Cervical Cancer Network** Colorectal Cancer Screening Network (new)*
 - Cooperation with: European Network of Cancer Registries (ENCR)** and EU Network for Information in Cancer Epidemiology (EUNICE)*
- Guidelines on Quality Assurance of Colorectal Cancer Screening
- Global Summit on Cervical Cancer Screening

*co-financed by EU Public Health Programme **previously co-financed by Europe Against Cancer Programme





European Cancer Network (ECN)

General Aims

- *integrate the new Member States* into the mainstream of European efforts toward continuous improvement of best practice in secondary cancer prevention
- assist the *new Member States in implementation* of the evidencebased screening tests for
 - breast
 - cervical and
 - colorectal cancer
- promote *pan-European exchange of information and expertise* on the development and implementation of best practice in secondary cancer prevention
- establish *framework for continuation and consolidation of best practice efforts of the cancer screening networks* of the previous European Public Health programmes





- Develop comprehensive strategy for improving best practice in cancer screening in Europe, taking new Member States into account (structured, pan-European workshops)
- Provide network framework for pan-European cooperation in implementing best practice in secondary cancer prevention and treatment
- Review programme performance and evidence of effectiveness and cost-effectiveness of cancer screening
- Reduce variation between Member States in achieving the recommended high standards





European Cancer Network (ECN) Annual Meeting 23-25 February 2006 in Budapest

- Discussion of new (4th) edition of Breast Screening and Diagnosis QA guidelines
- Workshop on certification of screening units and specialized breast units
- Discussion of new (2nd) edition of Cervical Cancer Screening Guidelines
- International exchange on QA of CRC screening & diagnosis
- Status quo of secondary cancer prevention in EU Member states
- Development of comprehensive strategy for improving best practice in secondary prevention of cancer





European Breast Cancer Network (EBCN)* Aims

• Cooperation and exchange of experience and expertise

by experts, scientists, advocates, programme managers, policy makers in all EU Member States, applicant countries and cooperating countries

to promote

- Implementation and quality assurance of and best practice in
 - population-based breast cancer screening programmes
 - diagnosis and clinical management of breast lesions

* cofinanced by the Europe Against Cancer Programme





European Breast Cancer Network (EBCN) Major Achievements

- Professional support provided for expansion of national and regional population-based mammography screening programmes across Europe
 - 1989: regional coverage in 6 current EU and EFTA countries
 - 2005 national and regional coverage in 12 and 9 countries, respectively
- Publication und updating of comprehensive Quality Assurance Guidelines covering the entire screening process
 - 1993, 1996, 2001, 2005
- Expansion of scope of QA in network and guidelines to cover:
 - Diagnostic breast services
 - Managment of breast lesions (e.g., specialist breast units)
 - Digital mammography
- Continuation of support for improvement of QA and best practice in secondary cancer prevention in EU public health programme (Model for ECN)





European Breast Cancer Network (EBCN) Current Priorities

- Guideline updating
- Certification protocols for screening, diagnostic and specialist breast units
- Breast cancer advocacy training (EUROPA DONNA)
- Integration of new Member States and Applicant Countries into the mainstream of efforts to implement and improve best practice
- Continuation of support for improvement of QA and best practice in secondary cancer prevention in EU public health programme (Model for ECN)



European Guidelines for



Quality Assurance of Mammography Screening

Maximise benefit and minimise harm of population-based screening through:

continuous quality improvement of the entire screening process (invitation to treatment)

4th edition:

- Communication*
- Radiography
- Radiology
- Diagnosis of breast disease*
- Pathology
- Surgery
- Specialist breast units*

- Epidemiology
- Data collection and monitoring
- Key performance indicators
- Physico-technical control
- Digital mammography*
- Training
- Certification Protocol*



EU Guidelines



Key general elements of QA and best practice - 1

- population-based invitation to screening
- training of all staff, particularly: radiographers, radiologists, pathologists and surgeons
- specialisation of personnel
- observance of volume levels
- multidisciplinary team working, including above staff as well as breast care nurses or psychologically professionally trained persons and medical oncologist/radiotherapist





EU Guidelines

Key general elements of QA and best practice – 2

- targets, performance indicators and regular audit
- organization of preoperative and post-operative multidisciplinary conferences
- avoidance of mixing of screening and symptomatic women
- complete and accurate recording of all relevant data for evaluation
- accreditation of units meeting quality standards





QA must be applied to all steps in the SCREENING PROCESS (not just to the screening test)

- invitation,
- performance of the screening test (mammography)
- reading of mammograms
- further diagnostic work-up of women with suspicious results
- treatment of women with screendetected lesions





More specific requirements for quality assurance of breast cancer screening

- adequate information presented in an appropriate and unbiased manner in order to allow a fully informed choice as to whether to attend.
- extensive quality assurance protocols for equipment and technical performance in conventional and digital mammography
- interpretation of screening mammograms by two independent readers
- standardization of pathology procedures and reporting
- standardization of data collection and monitoring
- comprehensive protocols for nontechnical quality assurance
- nomination of a given professional responsible for overall unit performance and with the authority to maintain standards and outcomes by suspending inadequate elements if necessary





Some key quality requirements for specialist breast units

- Breast surgery should be performed by specially trained surgeons in specialist units providing a minimum of 150 primary breast cancer operations annually.
- Each breast surgeon should perform a minimum of 50 primary breast cancer operations per year.
- Clinical, imaging and pathology findings of all women requiring breast surgery should be discussed and documented in regular pre-operative and post-operative meetings of the full multidisciplinary team (radiologist, radiographer, pathologist, surgeon, nurse counsellor and medical oncologist/radiotherapist).
- Patient support must be provided by specialist breast care nurses or appropriately psychologically professionally trained persons with expertise in breast cancer.
- Continuous monitoring of outcomes and regular audit are essential for maintaining high quality.

Brno, Czech Republic, 18 November 2005





Thank you for your attention

Brno, Czech Republic, 18 November 2005