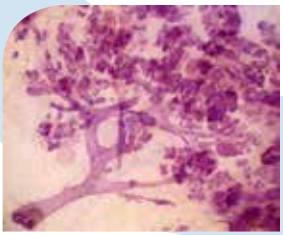
HELLENIC BREAST IMAGING SOCIETY

Active Member of Senologic International Society

The Hellenic Breast Imaging Society



3D image of the breast tissue

<10 mm invasive breast cancer

Sea urchin

2019 BREAST SEMINAR SERIES

Faculty

LÁSZLÓ TABÁR, MD, FACR

(Hon) Course Director

Professor emeritus of Radiology

Detection and Diagnosis of Breast Diseases Using the Multimodality Approach

AN INTERACTIVE, UNIQUE LEARNING EXPERIENCE

Oct 31-Nov 2, 2019

THESSALONIKI, Greece

Grand Hotel Palace

NEW course design

FINAL PROGRAM

Designed for:

Radiologists • Surgeons • Pathologists

Gynecologists • Radiology Technologists

This course provides extensive knowledge about diagnostic breast imaging, differential diagnosis of breast diseases, implications for management and newest diagnostic technologies

Congress Secretariat

PRAXICON

101, Ethnikis Antistaseos Str, 55 134
Kalamaria, Thessaloniki, Greece
Tel.: +30 2310 460 682, +30 2310 460 652 - Fax: +30 2310 435 064
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- **Υπερηχογραφική απεικόνιση**
- **Σήμανση λεμφαδένα**

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Contents

Welcome Address

Dear Colleagues and friends,

On behalf of the Hellenic Breast Imaging Society, as part of our educational activities, it is a great pleasure and privilege this year to host the worldfamous Breast Imaging Professor Emeritus of Falun University, Sweden LASZLO TABAR in a three-days intensive course.

The course is entitled «**Detection and Diagnosis of Breast Diseases Using the Multimodality Approach**» and Professor LASZLO TABAR will be lecturing during the entire course. This course is a new course design and is addressed to all health professionals specialized in breast diseases (radiologists, pathologists, surgeons, gynecologists).

Participants will be given the opportunity to improve their interpretative expertise and improve their skills in the detection of early breast cancer as well as increasing their confidence in the usefulness of different modalities.

Wishing you all a fruitful and successful three-days course.

The President

Spyros Iazarou PhD

Founding President of the H.B.I.S.
General Secretary

Athina Vourtsis MD, PhD

Welcome Letter

Dear Colleagues,

It gives me great pleasure to travel to Greece in order to provide an advanced teaching course to my old-time friends and for colleagues who have not yet attended our course.

When the Hellenic Breast Imaging Society approached me with the plans of a **"Multimodality Approach to the Detection and Diagnosis of Breast Diseases",** I felt honored and did not hesitate to accept their invitation. I am familiar with the organizational skills of the Hellenic Breast Imaging Society and trust that we are going to provide a high-quality educational event. The use of new teaching tools will make the learning process more efficient. Immediate feedback and discussion will be practiced in every case, using complete imaging workup.

The didactic lectures of each major subject will be followed by self-testing reading sessions consisting of a mixture of normal and early breast cancer cases. The use of a polling system will help to follow the improvement of the skills of the entire class. Throughout the course emphasis will be placed on classifying breast cancers according to their site of origin correlated to several decades' long patient outcome.

The newest scientific evidence supporting the value of early detection and its major role in the significant decrease in breast cancer death in the population will be presented as well. We intend to make this advanced teaching course a memorable event for all attendees.

With best personal regards

Sincerely

Laszlo Tabar, MD, FACR (Hon)

Organizing Committee

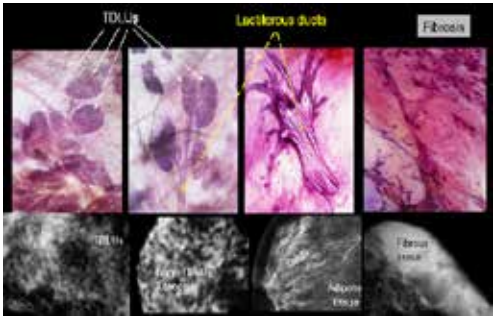
President: S. Lazarou

Members:
K. Koufopoulos
A. Vourtsis
I. Chrysogonidis
N. Patsinakidis
A. Rousakis
A. Athanasiou
E. Georgiou
K. Kantzavelos

FACULTY

László Tabár, MD, FACR (Hon).
Lecturer
Professor emeritus of Radiology,
Department of Mammography
Falun, Sweden

For Resume details:
https://www.dropbox.com/s/ta1p0e07k6hnf78/Bios-ketch%20MOST%20recent%2010%20pages.docx?dl=0



The breast, unlike any other organ, has five structurally different mammographic parenchymal patterns.

These images show the basic building blocks of the normal breast structure.

NEW COURSE DESIGN

• The lectures on each major subject will be followed by **interactive screening sessions** consisting of a mixture of normal and early cancer cases presented on the large screen exactly as they appear on a viewing station at screening. Using a specially provided polling program downloaded to each participant's smartphone or tablet, the attendees will be asked to vote anonymously on each case. The aggreate results will appear instantly for discussion and evaluation. This new course design gives immediate feedback demonstrating the effectiveness of various screening methods.

• During the course the attendees will progressively **improve their interpretive expertise**, as they learn the full spectrum of normal breast images, with all important findings explained with the help of 3-dimensional histology images.

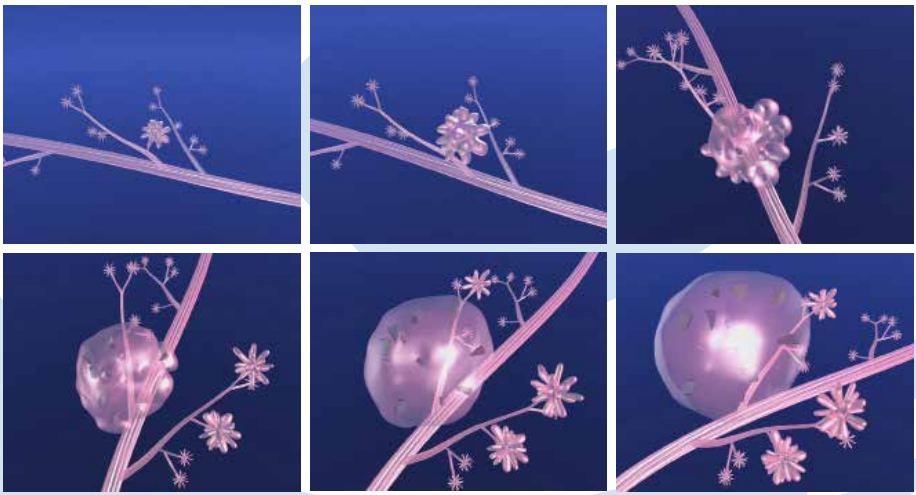
• These skills will lead to **fewer call-backs** and greater confidence in reading a large number of mammograms.

• **Immediate feedback** and discussion of every case throughout every reading session.

• Special emphasis will be placed on **finding early phase breast cancers.**

• All abnormal cases are fully worked up and the **complete imaging workup will be presented in detail, including hand-held and automated breast ultrasound (ABUS), MRI and large section histopathology.**

• **Emphasis will be placed on classifying breast cancers according to their site of origin correlated to several decades long patient outcome.**



Computer simulation images of the development of Grade 2 in situ carcinoma within the TDLU. as **crushed stone-like calcifications** are formed.

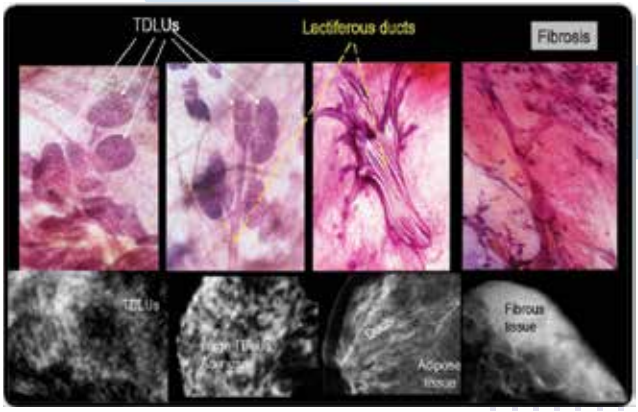
SCIENTIFIC PROGRAM

Day 1

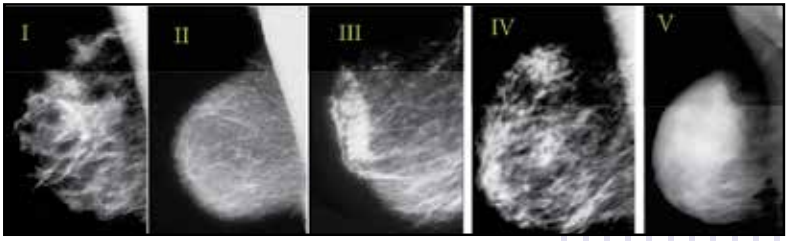
Morning lectures between 8:30 AM and 12:00 PM.
Break: 10:30 AM

9:00 AM INTRODUCTION FOLLOWED BY DIDACTIC LECTURES COVERING:

- A NEW ERA in the DIAGNOSIS and TREATMENT of BREAST CANCER. A SHORT HISTORY.
- HOW TO READ A MAMMOGRAM. THE BASIS FOR SKILLFUL AND AND EFFICIENT INTERPRETATION OF THE MAMMOGRAPHIC IMAGE.
- **Correlating 3 - dimensional, subgross anatomy with mammography of the normal breast results in increased confidence in reading a mammogram and finding small abnormalities. Special training in large format thin and thick section (3D) histopathologic correlation enables the radiologist to account for every linear and nodular density on the mammogram.**



The breast, unlike any other organ, has five structurally different mammographic parenchymal patterns. These images show the basic building blocks of the normal breast structure.



12:00 PM - 1:00 PM Lunch

Day 1

Afternoon lectures: 1:00 PM and 5:00 PM.
Breaks at 2:30 and 3:30 PM

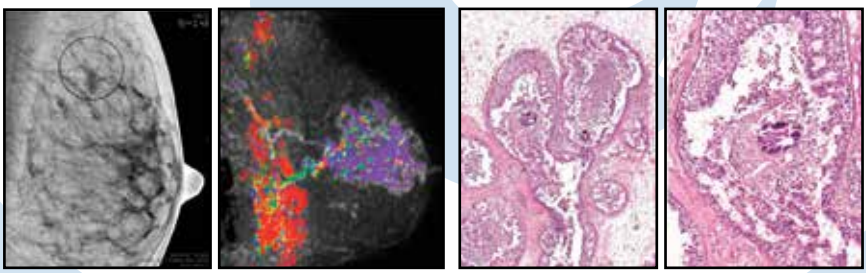
1:00 PM **ALGORITHM FOR CLASSIFYING BREAST DISEASES ACCORDING TO THEIR SITE OF ORIGIN**

HOW TO FIND THE INVASIVE BREAST CANCER WHEN IT IS STILL SMALL.
*Malignant stellate and circular/oval-shaped lesions originating from the TDLUs (***AAB***):* Clinical presentation, histology, mammographic - MRI-ultrasound appearance and outcome.

- A systematic method for viewing ammograms. **Areas on the mammogram where most breast cancers will be found. Viewing dense breasts. Viewing relatively easy - to - read breasts.**
- **The role of hand - held ultrasound / 3D automated ultrasound/ MRI in the detection and workup of the findings.** The multimodality approach.

- Interactive screening session. **Using what has just been taught, each participant will assess a mixture of normal and early cancer cases, and vote anonymously using a smartphone or tablet. The combined results will appear instantly for discussion and evaluation.**

* All abnormal cases are fully worked up and the complete imaging workup will be presented in detail, including ultrasound, MRI and large section histopathology.



Example: *Multifocal invasive AAB and DAB (neoductgenesis) case, where the extensive micropapillary cancer originating from the major ducts was well demonstrated* ***on breast MRI.***

5:00 PM End of Day 1

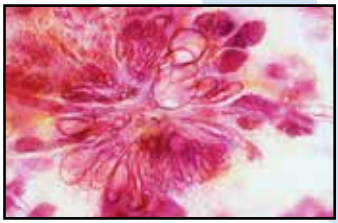
Day 2

Morning lectures between 8:30 AM and 12:00 PM.
Breaks: 10:00 AM, 11:00 AM

8:30 AM **ASYMMETRIC DENSITIES ON THE MAMMOGRAM**

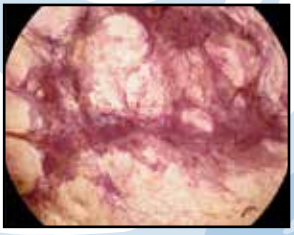
- *Didactic workup of non-specific asymmetric densities without architectural distortion*
- *Didactic workup of non-specific asymmetric densities with architectural distortion*

- A suggested algorithm for the workup of lesions with architectural distortion.



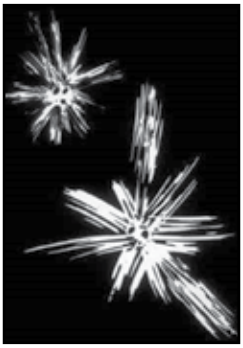
Radial scar

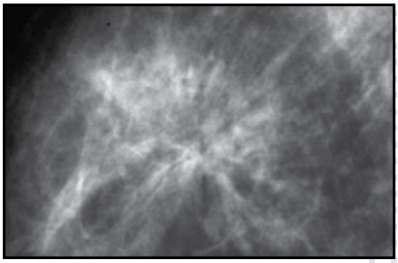
Neoductgenesis (DAB)

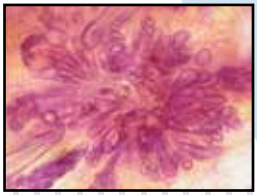


Diffusely infiltrating cancer of mesenchymal origin

ANALYSIS of BENIGN RADIATING STRUCTURES on the mammogram, originating in the ducts: Radial scar / sclerosing ductal hyperplasia







12:00 PM - 1:00 PM Lunch

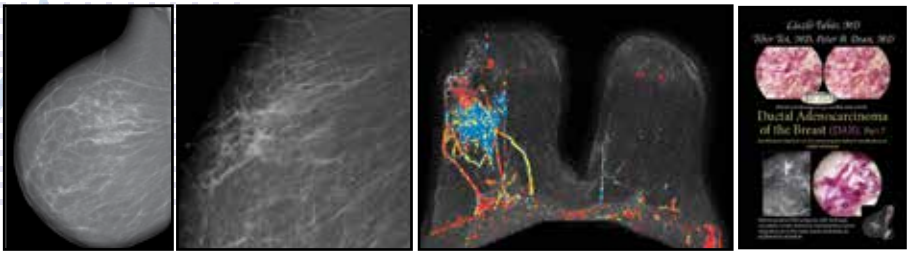
Day 2

Afternoon lectures: 1:00 PM - 4:30 PM.
Breaks: 2:30 PM and 3:30 PM

1:00 PM ANALYSIS OF MALIGNANT LESIONS PRESENTED as non-calcified RADIATING STRUCTURES on the mammogram. Clinical presentation, mammographic appearance and outcome.

1) Duct forming invasive carcinoma / Neoductgenesis cases presenting on the mammogram as architectural distortion. The role of MRI in diagnosing diffuse breast cancer.

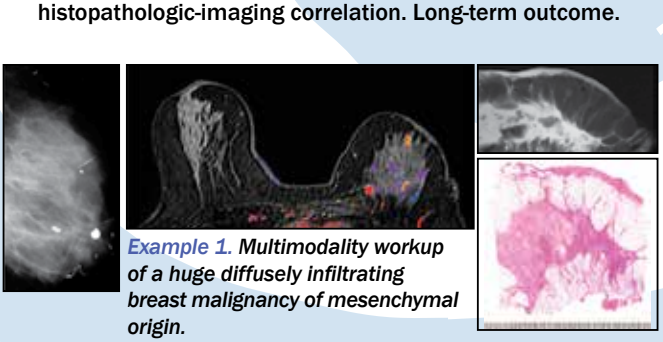
Interactive session for detecting architectural distortion on the mammogram.



Non-calcified architectural distortion: extensive duct forming invasive cancer

2) ANALYSIS of MALIGNANT LESIONS PRESENTING as RADIATING STRUCTURES on the mammogram. Clinical presentation, mammographic appearance and outcome, cont.

Diffusely infiltrating breast cancer of mesenchymal origin: the most deceptive and frequently missed cancer of the breast. The value of ultrasound and MRI in finding and diagnosing this spider's web-like malignancy. Case demonstrations, large section histopathologic-imaging correlation. Long-term outcome.



Example 1. Multimodality workup of a huge diffusely infiltrating breast malignancy of mesenchymal origin.

4:30 PM End of Day 2

Day 3

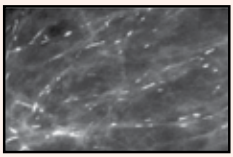
Morning lectures: 8:30 AM and 12:00 PM.
Breaks at 10:00 and 11:00 AM

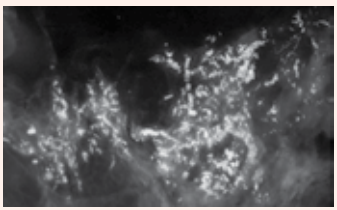
8:30 AM INTERACTIVE LECTURE SERIES WILL COVER THE FOLLOWING TOPICS.

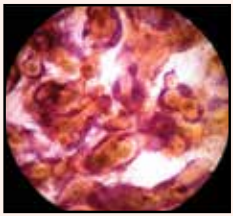
ALGORITHM FOR CLASSIFYING BREAST DISEASES ACCORDING TO THEIR SITE OF ORIGIN

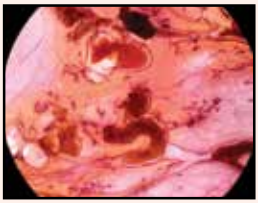
Breast diseases originating in the major ducts

- **Benign type calcifications** originating in the major ducts
  a) Secretory disease type calcifications
- **Malignant type calcifications** originating in the major ducts
- **Interactive calcification analysis.**

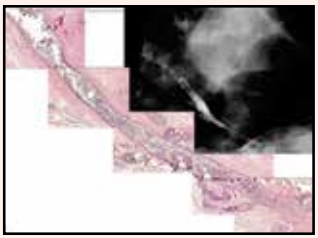






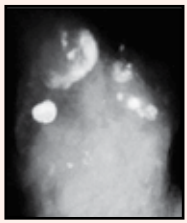


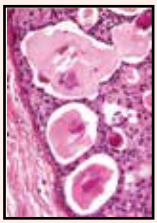
a) Fragmented casting type calcifications.



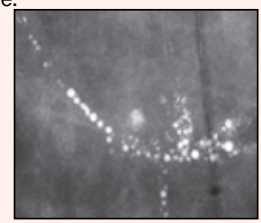
b) Dotted casting type calcification

* **Four different malignant type calcifications** developing in the major ducts: **a)** fragmented casting type **b)** dotted casting type **c)** skipping stone-like **d)** pearl necklace-like.
* The concept of neoductgenesis. Long-term follow up results. New aspects, correct terminology.
* The role of breast MRI examination in demonstarting the extent of Gr 3 is situ carcinoma.
* Mammographic/3D histologic correlation helping to explain the underlying pathophysiology and outcome.





c) Skipping stone-like calcifications



d) Pearl necklace-like calcifications

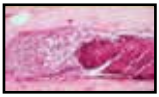
12:00 PM - 1:00 PM Lunch

Day 3

Morning lectures continuation.

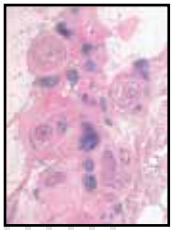
MALIGNANT:
No necrosis, no fluid

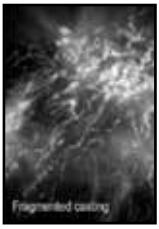
Ductal Origin
Ca ++ on the mammogram



Ca ++ in necrosis

Type 1
"FRAGMENTED CASTING"
(solid bars)
- Diffuse, lobar disease
- Grade III
solid cell proliferation



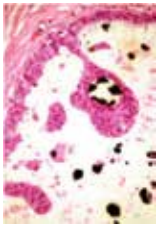


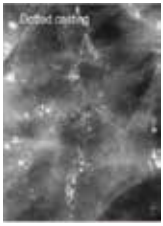
MALIGNANT:
No necrosis, no fluid

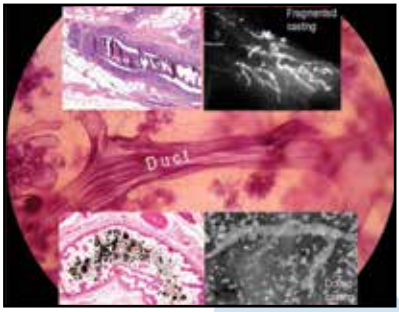
Ductal Origin
Ca ++ on the mammogram

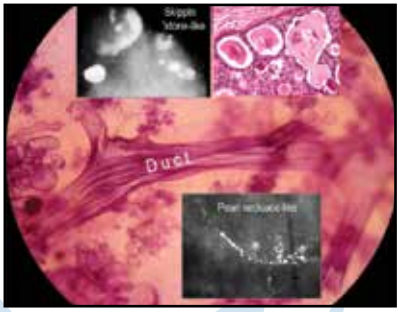
Ca ++ in necrosis

Type 2
DOTTED CASTING-TYPE
(snakeskin-like)
- Diffuse, lobar disease
- Grade III
- Micropapillary cell proliferation









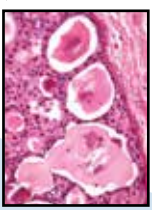
- **Interactive calcification analysis.**

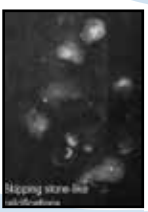
MALIGNANT:
No necrosis, no fluid

Ductal Origin
Ca ++ on the mammogram

Ca ++ in proteinaceous fluid

Type 3
"DISCOID"
(skipping stone-like)
- Diffuse lobar disease
- Grade II
- Micropapillary or/and cribriform





MALIGNANT:
No necrosis, no fluid

Ductal Origin
Ca ++ on the mammogram

Ca ++ in proteinaceous fluid

Type 4
"PEARL NECKLACE"
- large psammoma body-like calcifications within ducts
- Grade I or/and 2
- Micropapillary, cribriform

Day 3

Afternoon lectures: 1:00 PM - 4:30 PM.
Break at 3:30 PM

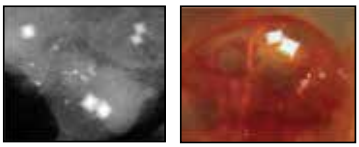
1:00 PM ALGORITHM FOR CLASSIFYING BREAST DISEASES ACCORDING TO THEIR SITE OF ORIGIN

- **Benign breast diseases originating in the TDLU** and associated with calcifications on the mammogram
  - **Fibrocystic change. Fibroadenoma. Different types of adenosis.** Understanding pathophysiology leading to calcified and non-calcified hyperplastic breast changes.

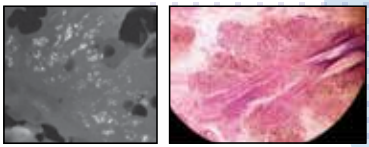
Conventional and 3D histology images of small breast cysts containing sediment of psammoma body - like calcifications, seen as "teacup-like" calcifications on the mammogram.

Detailed analysis of calcifications associated with hyperplastic breast changes: Weddellites (A), powdery calcifications (B), cluster skipping stone-like calcifications on the mammogram.

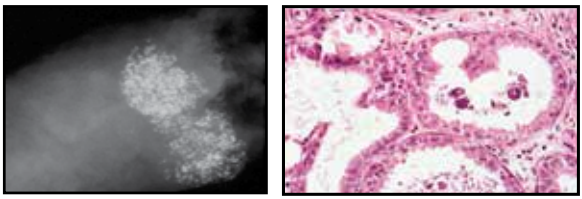
A



B



The morphologic analysis of calcifications representing a less aggressive carcinoma: **Grade 1 / well differentiated CIS**

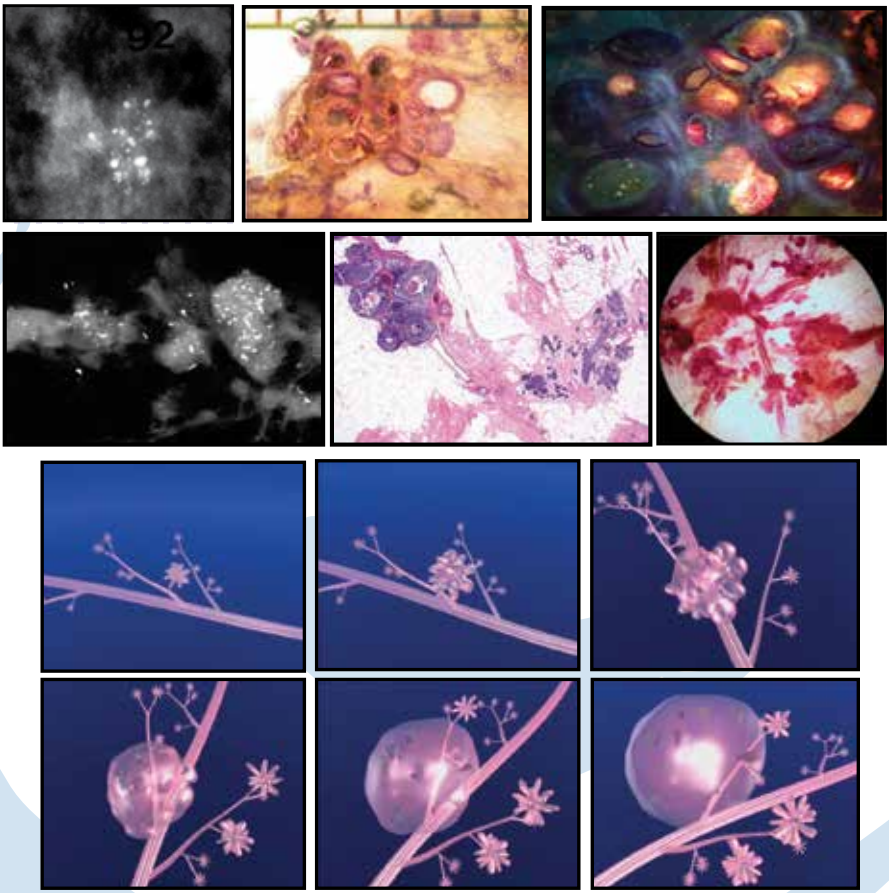


Grade 1 in situ carcinoma: *Mammographic / 3D histologic / MRI correlation of cases with powdery calcifications on the mammogram.*

Day 3

Afternoon lectures: 1:00 PM - 4:30 PM.
Break at 3:30 PM

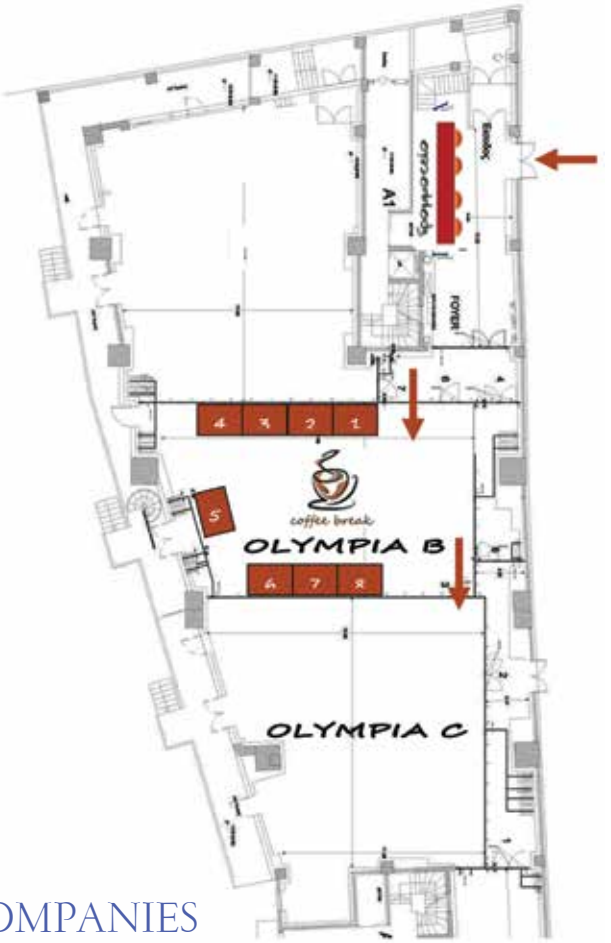
Mammographic / histopathologic correlation of pleomorphic calcifications representing Gr2 CIS within the TDLU



Computer simulation images of the development of Grade 2 in situ carcinoma within the TDLU. The lobule becomes gradually distended and deformed. Calcifications are formed within the necrotic debris and are seen on the mammogram as ***crushed stone-like calcifications.***

4:30 End of the course

Exhibition Area



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General Information

Organized by:

HELLENIC BREAST IMAGING SOCIETY

Kifisias 362, Xalandri, Zip Code: 15233
Tel: 210 68 98 780, Fax: 210 68 98 796
e-mail: info@hbis.gr • Website: www.hbis.gr

Course Location:

Grand Hotel Palace
Monastiriou 305, Thessaloniki, Greece, 54628

Dates

31 October – 2 November, 2019

Registration Cost: 300€

Registration cost includes:

- Admission to all sessions
- Congress proceedings – material, certificate of attendance
- Coffee breaks, light lunches during the course

Language

The official language of the Course is English.
Simultaneous translation will be provided.

Certificate of Attendance

Based on the last circular of National Organization of Medicines, there will be a barcode system of attendance. At the end of the Course a certificate will be given to those who have attended at least 60% of total scientific time. The number of Credits of Continuing Medical Education (CME -CPD) that will be granted to the Participants will be calculated based on the time of attendance. **21 CME-CPD Credits will be provided.**

Course website:

www.praxicon.gr

Course Secretariat

PRAXICON

PRAXICON, Congress Secretariat
Dimitra Voulgaropoulou
PRAXICON, Congress Secretariat

101, Ethnikis Antistaseos Str, 55 134
Kalamaria, Thessaloniki, Greece
Tel.: +30 2310 460 682, +30 2310 460 652 - Fax: +30 2310 435 064
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101, Ethnikis Antistaseos Str, 55 134 - Kalamaria, Thessaloniki, Greece
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