



Christobel M. Saunders, MD, University of Western Australia

Bio:

Professor Christobel Saunders MB BS, FRCS, FRACS, FAAHMS is internationally recognised as one of Australia's most prominent research-orientated cancer surgeons. She has substantially contributed to many clinical aspects of breast cancer research including clinical trials of new treatments, psychosocial, translational and health services research and is active in several areas of surgical oncology cancer research, with a particular emphasis on breast cancer. She has performed research for >25 years evaluating the efficacy and utility of therapy for early breast cancer. In the past five years, Professor Saunders has published over 100 peer-reviewed journal articles (including 2 in *The Lancet*), six letters to the editor/editorials, two research reports, three book chapters and one book. She sits on boards of a number of cancer organisations including Cancer Australia, CCWA (past-President), and Breast Cancer Network Australia; and is closely involved in strategic planning and management of cancer services in Western Australia as author of the WA Health Cancer Services Framework and as first A/Director, WA Cancer and Palliative Care Network.



Presentation Title:

Surgery for breast cancer- can we improve accuracy and improve outcomes?

Abstract:

Up to 70% of women with breast cancer now undergo breast conserving treatment and this has similar survival to mastectomy but with obvious quality of life advantages. However it does carry a small increased risk of local recurrence or new ipsilateral breast cancer, and most patients will require radiotherapy and systemic adjuvant therapy. Ensuring all the cancer is removed is important, although increased reliance on other treatments is making this perhaps less so. Nevertheless up to a third of women having breast conservation will require further surgery to ensure clear surgical margins.

We have been developing a series of measures to try to improve this, from better imaging of cancer pre-operatively in particular with MRI, better surgical techniques (oncoplasty) to allow wider tissue excision with improved cosmesis, better localisation of impalpable tumours (the ROLLIS trial) and optical methods to allow intra-operative margin assessment using OCT and OCE.

How this fits into clinical cancer management will be explored in this talk and a "blueprint" for future surgical management of breast cancers outlined.