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Experience of the breast biopsy site marker HydroMARK during the neoadjuvant chemotherapy

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HydroMARK, a newly hydrogel-based breast biopsy site marker, is available for image-guided needle biopsies. The marker was usually placed in non-palpable breast lesions suspicious for breast cancer or lesions required for neoadjuvant chemotherapy for some specific intrinsic molecular subtypes such as Triple Negative Breast Cancer (TNBC) or HER2-enriched. These sub-types are still unknown at the time of biopsy, thus the biopsy marker could not be placed simultaneously. We directly placed this marker in the center of the tumor or tumor bed before tumor disappeared during neoadjuvant chemotherapy. The HydroMARK revealed an effective marker with low tendency of displacement compared to previous marker and it could indicate the location of the targeted lesion accurately with long-term sonographic detectability, at least 6 months. The ultrasound-guided excision using HydroMARK for breast conserving surgery is alternative to the traditional preoperative wire localized excision.

Biography

Yoshika Nagata has completed her PhD from the University of Occupational and Environmental Health, Japan. She has worked as a Research Associate and Assistant Professor in the Department of Surgery. She is currently a Chief Physician in the Department of Breast Surgery at Shonan Kamakura General Hospital, Kanagawa, Japan. She has published papers on tumor immunology. She is a Board Certified Member and Senior Fellow of the Japanese Surgical Society, Board Certified Member of the Japanese Breast Cancer Society, General Clinical Oncologist and Educational Physician of the Japanese Board of Cancer Therapy.

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