Silver Tsunami

- TURNING THE SILVER TSUNAMI INTO A SILVER LINING, A. LOURENÇO
- MANAGING THE WHOLE HEALTH OF THE AGEING POPULATION, C. BUCKLEY
- OPPORTUNITIES AND RISKS OF DIGITAL HEALTH: OLDER PEOPLE’S PERSPECTIVE, E. HUCHET
- ANTI-AGEING THERAPIES: FROM BASIC SCIENCE TO HUMAN APPLICATION, M. ABDELLATIF & S. SEDEJ
- AGEISM IN HEALTHCARE: WHY IT HAS TO STOP, L. AYALON
- SECRETS OF LONGEVITY - THE IKARIA STUDY, P. PIETRI
- FRAILSAFE SYSTEM: AN INNOVATIVE APPROACH ON FRAILTY, S. MOZA ET AL.

SINGAPORE: TRANSFORMATIVE SHIFTS IN HEALTHCARE MANAGEMENT, E. F. SOH
EUSOBI 2019, G. FORRAI

VENDOR-DRIVEN STANDARDS FOR INTEROPERABILITY, D. HANCOCK

BREXIT: WREAKING HAVOC IN HEALTHCARE?, M. DAYAN ET AL.

LEADING CHANGE AS A PHYSICIAN, X. CORBELLA & E. O’ SULLIVAN

INNOVATION AND INSPIRATION FOR HEALTHCARE - HOW TO CHANGE FERTILITY CARE WITH VALUE-BASED HEALTHCARE, M. CURFS

INNOVATIVE HEALTHCARE STRATEGIES, P. FACON

GAME-CHANGING MEETING OF MINDS: RADIOLOGY AND IMAGING INFORMATICS, E. RANSCHAERT

IMAGE INFORMATION DELIVERY IN THE AI ERA: TWO LIKELY SCENARIOS, S. R. BAKER.

THE SEX AND GENDER INFLUENCE ON HYPERTENSION, S. SHAH PARESH ET AL.

HOW THE BRAIN WORKS: LOOKING INSIDE TO TARGET TREATMENTS, S. MULDOON

NEW MANAGEMENT PATHWAYS IN CARDIOVASCULAR RISK FACTORS, R. VIDAL PEREZ

TACKLING THE FIVE ESSENTIAL LEVERS OF THEATRE EFFICIENCY, D. THORPE
What are some of the key challenges in the field of breast imaging and how will these be addressed at the EUSOBI Annual Scientific Meeting being held in Budapest in October?

There is always the challenge of tomosynthesis. Since its inception around 2011, it has become a major method but there are always fresh studies coming out. At the EUSOBI congress, we will focus on contrast-enhanced (spectral) mammography (CESM), a methodology which is much more recent than tomosynthesis. No method replaces another one outright; it’s like we’re working on a puzzle with more and more pieces helping us to improve diagnostics.

We also have at least four sessions about clinical-related issues such axilla, multidisciplinary teams, follow-up and staging. Of course, there will be a lot of lectures and workshops and the keynote lecture is about AI – an area which is having a huge impact on imaging.

As this year’s meeting organiser, can you detail the highlights of the event? In the 12 months since the Athens congress, have you noticed any new trends or concerns emerging in breast imaging?

A theme that is increasingly taking centre stage in breast imaging is risk-based screening or personalised screening. This means that the screening details concern the given patient’s risk factors like the personal breast density and such factors. I anticipate this will continue to be a hot topic for breast radiologists.

Fortunately, our society and perspective is always multidisciplinary so we cannot speak about risk and risk-based issues without clinicians. We have oncologists and epidemiologists, working close together with us and these are problems that we have to solve in cooperation with them.

Additionally, there have also been multiple studies coming out about nipple discharge, which is a symptom of a possible underlying cancer. The role of MRI was emphasised by a recent publication. This issue won’t be in the spotlight during the Budapest congress but it’s worth noting that it represents a new trend as does Automated Breast Ultrasound (ABUS).

As far as other new developments towards better care are concerned, this year is bigger and more about the relation of imaging and therapy. For example, there is a session called ‘Imaging in the Role of Breast Cancer Treatment’ and in this session, we will speak about reduced therapy based around imaging — for example, omission of radiotherapy based on MRI findings. Also, we will speak about minimally-invasive treatments or interventional therapies, meaning vacuum excision and so on. Small circumscribed lesions can already be excised with a big needle without the need of surgical exploration and general anaesthesia. We are performing more such interventional therapies, so breast radiology is no more only a diagnostic method but also a therapeutic method. There are also some experimental studies for cryotherapy that means freezing the lesions for malignant lesions. This is all very interesting as this is one of the trends that radiologists would carry out themselves without the need for a surgical intervention. This would mean no general anaesthesia and no lengthy hospital stays.

What can delegates expect from the Multi-disciplinary Team (MDT) sessions? Are there any new developments towards better care?

I will moderate the ever-popular MDT sessions where we will discuss some very interesting and challenging cases - especially those that arise during...
routine daily work.

We have collected and will discuss significant cases covering pathological, oncological and surgical interests and specialities. Some cases have never been seen before which we will discuss in a live discussion. This is as it would be in a good team meeting in a good hospital. People observe how discussion should, ideally, be carried out when cases are interesting and where MDT members are motivated and have a high knowledge. It’s a good example for the participants because, of course, they are not all working in huge university institutes where MDT work can be seen. This really is a challenge.

Regarding the ‘Novel Developments’ session, what is exciting you the most?
We will have a lot of interesting presentations in this session, probably featuring some machines which very few people would have, only very high university departments. It will take a while until these Mammi-PET and PET MRI will go into the daily practice. But one among them, AI, is in daily practice or is about to go to daily practice quite soon – that’s my belief – so this is the most exciting issue - AI.

EUSOBI is growing and forging new partnerships. What are the benefits of being part of a breast imaging network?
We founded the national societies network that encompasses the national breast imaging/breast radiological societies from each country in Europe and a little bit beyond. We meet regularly every year during the annual meetings where we discuss different trends and specialities from different member countries. It’s incredible how breast imaging in different nations can differ so widely, even in Europe. We study protocol, knowledge, where training is needed and where there is a shortage of equipment. There are EU countries where some MRI-guided biopsies are never performed because there is no equipment and no knowledge for them. There are some others where there is not enough equipment or personnel. There are countries where there is no shortage and there are countries where it is difficult to find breast imaging services. We discuss these issues and try to exchange productive information.

EUSOBI organises courses for different countries according to local demand and need. For example, in Romania we have been running special courses tailored to their requirements. There is the concept that we are a European society, but we have to keep in touch and build good relations with national societies beyond our shores.

What is the thinking behind the new EUSOBI Young Club Symposium?
The EUSOBI Young Club is a great success story. We have a lot of young radiologists (up to 40 years of age) who are very active in research and publishing, daily work and in networking. The Young Club chair is part of the EUSOBI board and they undertake special tasks such as the social network and website issues since, generationally, they are more accustomed to this work than more experienced breast radiologists.

This year’s Young Club symposium focuses on the theme “Being a breast radiologist: Beyond the clinical work.” One day we will be replacing the board with these young people because they are growing, learning and producing more and more interesting material. It’s a good idea to build a younger generation with close connection to the actual board.

Finally, what developments do you hope to see in breast imaging before the 2020 congress?
I don’t know whether we will see this in the 2020 Congress, but I personally would like to see the prototype of a machine that combines mammography and automated ultrasound because it would bear the advantage of both screening methods and diagnostics plus the opportunity to fuse the images.

I’d also like to see more MRI breast screenings and diagnostics in the world. We have observed that in a rising number of cases, we need breast MRI and pre-operative breast MRI. For example, there is a huge study going on called the MIPA study which we are participating in alongside a large number of professionals connected with EUSOBI. I hope that one day the protocols say that we must do a breast MRI before treatment because such a practice is ideal for pre-operative exploration.

How will delegates be able to relax in Budapest?
We will have a beautiful EUSOBI evening event. We have a boat trip on the Danube during dusk which will give people the opportunity to meet and chat. This is also one of the goals of a congress; it’s not all science but also scientific and personal connection.

KEY POINTS

- Trends in tomosynthesis, AI and Imaging and multidisciplinary teams will be in focus during EUSOBI 2019.
- ‘Being a Breast Radiologist: Beyond the Clinical Work’ is the theme for the EUSOBI Young Club.
- Cross-border networking amongst breast radiologists is beneficial for insights into colleagues’ challenges and solutions.