

Welcome!

In this issue, we shine a spotlight on breast health – if you missed our recent CME Webinar on breast health, you can watch it [here](#). We also provide some pearls on evaluating breast cancer in young women, plus we hope the summary of collaborative services that we've put together will be useful. Thank you!

❖ Foreword by Assistant Professor Sabrina Ngaserin, Head and Consultant, SKH Breast Service, Sengkang General Hospital



Recently, SKH Breast Service hosted a webinar discussing the crucial role of general practitioners in safeguarding optimal breast health. We covered a wide range of topics from individualised breast screening and common yet misunderstood conditions to advances in breast surgical oncology as well as best surveillance guidelines for probably benign 'BIRADS3 lesions'. If you had missed it, do catch it [here](#).

We also addressed the perplexing rise of breast cancer amongst young women, and how we can work together to achieve collaborative survivorship. Our ongoing goal is to empower quality breast care in the primary care setting, and we are ever grateful for the support of primary care physicians who play a key role in raising awareness, early detection, and referral of breast cancer in young women.

In this issue, we share tips about the GP's role in detection and care. We hope you will enjoy this summary of our collaborative services that may benefit you and your patients.

❖ SKH CME Webinar | Crucial Role of GPs in Safeguarding Optimal Breast Health

SKH held a GP CME webinar on 22 September 2023 featuring interactive discussions on the practical considerations in approaching management of breast health. This webinar was led by a panel comprising SKH Breast Surgeons and Plastic Surgeons, as well as a Primary Care Physician.

Missed the webinar or need a refresher? Access the webinar by clicking [this link](#).

- 1 CME point will be awarded to eligible GPs.
- Doctors who attended the actual webinar will have points submitted by SKH on your behalf.
- Doctors who watch the recorded webinar in your own time can submit self-claims via SMC portal (Cat 3A). Please contact [Ms Julian Ang](#) (Julian.ang.x.l@skh.com.sg) to obtain the SMC-accredited and approved event ID for your Cat 3A self-claim.
- This webinar is part of a series of GP webinars. Details of the next webinar will be shared soon. Stay tuned!

❖ Pearls of Wisdom

Breast Cancer in Young Women

Special Considerations for Young Women with Breast Complaints



Dr Faith Leong
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- Early onset, or young breast cancer, is defined as patients diagnosed under 45 years old.
- Locally, more women are getting breast cancer, with 1 in 6 diagnosed found to be aged below 45 years, while 1 in 10 is aged under 40 years.

Check out SKH's young breast cancer survivor stories here:



<https://the.sg/obb-1-stop-issue-11-su-ivised-breast-cancer>



<https://the.sg/row-1-stop-in-article-1-stop-cancer-prep-re-chemo>

BREAST CANCER IN YOUNG WOMEN

Recognition and diagnosis is often delayed. This means we invariably catch these cancers at a later stage. Reasons:

- **More aggressive cancer:** Subtypes, such as triple negative or HER2 positive disease, are associated with poorer prognosis in general.
- **Limitations of screening:** Young women do not fall into the appropriate age group for mammogram screening, so they need to be encouraged to perform monthly breast self-examinations. It is more common for younger women to first present with symptoms like a palpable lump.
- **Delayed diagnosis or misdiagnosis:** Breast lumps are often attributed to non-cancerous conditions, such as simple cysts and benign disease. Lack of further evaluation (imaging/biopsy) may lead to misdiagnosis too. This is not meant to 'scare' young ladies into thinking they are at high risk of suffering and dying from breast cancer, but we like to emphasise that all new breast lesions should be thoroughly evaluated before confirming detected breast changes in a woman (of any age) is benign, and not high-risk or cancerous.

IMPORTANT POINTS:

- All breast lumps, even in young women, should be thoroughly evaluated with complete 'triple assessment' by a breast specialist or experienced healthcare professional.
- Patients with significant family history of breast and/or ovarian cancer – especially if multiple family members are affected or have had cancers at a young age – should consider consultation for genetic counselling and testing at a specialist centre like NCCS.
- **SKH's 1-Stop BrEAST Service** (more info below) provides timely evaluation, diagnosis, and counselling.

If you are interested to know more, please contact Dr Faith Leong (faith.leong.q.h@singhealth.com.sg)

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❖ Highlights

Minimally Invasive Breast Surgery (MIBS) for Breast Preservation and Scar Minimisation

BREAST PRESERVATION AND SCAR MINIMISATION: ONCOPLASTIC AND MINIMALLY INVASIVE BREAST SURGERY



Asst Prof Sabrina Ngaserin
Head and Consultant
SKH Breast Service, Sengkang General Hospital



Read more about
SKH Breast Service



Good surgical management is the cornerstone of breast cancer treatment and the restoration of self for patients. With surgical advancements in oncoplastic breast surgery, minimally invasive breast surgery and breast reconstruction, patients can now look forward to better cosmetic outcomes and quality of life.

Oncological surgical resection, safety, function and aesthetics are now viewed as integral components of comprehensive breast surgical care. As the field of breast surgical oncology has evolved, surgeons have largely abandoned extensive disfiguring resections as standard therapy. In its stead, modernised techniques now favour:

- Breast preservation
- De-escalation of axillary surgery
- Whole and partial breast reconstructions
- Mindful prophylactic measures to avoid long-term complications

This means respecting the value of **scar minimisation**, **cosmetic optimisation**, and **function preservation** in our surgical planning at SKH.

Minimally invasive breast surgery (MIBS) evolved in tandem with Oncoplastic Breast Surgery (oBCS) to push conventional boundaries of aesthetic outcomes. oBCS is a tumour-specific, partial and immediate breast reconstruction method that applies aesthetically derived volume displacement, volume replacement or volume reduction techniques to the field of breast cancer surgery, to allow for higher volume excision with minimal aesthetic compromise'. MIBS utilises endoscopic-laparoscopic instruments or robotic surgical platforms.

Breast cancer is a complex disease that is multifactorial in aetiology and threatens life, function and identity. While therapy is ultimately multidisciplinary, good surgical management remains the cornerstone of locoregional management and restoration of self.



If you are interested to know more, please contact Asst Prof Sabrina Ngaserin (sabrina.ngaserin@singhealth.com.sg)

❖ Collaborative Services

1-Stop BrEAST Service – One-Stop Breast Evaluation, Accelerated Screening and Treatment

By Dr Faith Leong (faith.leong.q.h@singhealth.com.sg), Associate Consultant, SKH Breast Service

As an integrated breast unit, patients can expect a **1-Stop BrEAST service – One Stop Breast Evaluation, Accelerated Screening and Treatment**. This means early access to clinical evaluation by a breast specialist, direct-to-imaging (including mammography, breast ultrasound, and breast MRI when required), and direct-to-biopsy when lesions are suspicious or indeterminate.

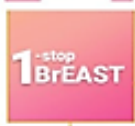

All sampled indeterminate breast lesions are discussed weekly by our multidisciplinary team following image-guided needle sampling or vacuum assisted biopsy. Every case is discussed at our Breast Tumour Board meeting, on both diagnosis and after surgical management to ensure patients are offered the best evidence-based treatment.

Conventional Patient Journey



1-stop BrEAST @ SKH

Breast Evaluation, Accelerated Screening and Treatment Centre

 Visit 1	<ul style="list-style-type: none"> • Consultation with breast surgeon • Same-day imaging • Consultation with breast radiologist and counselling for biopsy if indicated • Same-day biopsy 	<ul style="list-style-type: none"> ✓ SKH Breast Centre saw a total of 601 patients in 2022 who required at least one biopsy ✓ Average cost savings of \$61 502 over 1 year <small>Based on specialist consultation cost range of \$87 to \$118</small> ✓ 1202 fewer visits over 1 year <small>Since each patient makes 3 fewer SOC visits</small> ✓ Time to cancer counselling 1-2 weeks 	 Visit 2	<ul style="list-style-type: none"> • Consultation with breast surgeon to review results • Plan for surgery if necessary
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Rapid Management of “Breast Emergencies” in Outpatient Setting

By Dr Lee Chee Meng (lee.chee.meng@skh.com.sg), Associate Consultant, SKH Breast Service

“Breast emergencies” are probably a misnomer, however, there exist patients who require quick specialist review for issues such as breast abscesses that require timely intervention. Should these patients present at our Emergency Department, SKH Breast Service will be able to provide **same- or next-day one-stop outpatient access for suitable patients** to an expedited:

- Breast specialist consultation,
- Breast imaging service,
- Appropriate intervention in a day surgery setting for patients who require it, not limited to image-guided aspirations or surgical drainage.

Of note, septic or unwell patients may still benefit from inpatient services. However, for all other generally well patients with simple infections, our breast services may be directly engaged for you and your patient’s convenience.

Healthier SG - Screen for Life (BreastScreen Singapore)

By Assoc Prof Benita Tan (benita.tan.k.t@singhealth.com.sg), Chairman, Division of Surgery, and Senior Consultant, SKH Breast Service

You may be familiar with BreastScreen Singapore (BSS), the national breast cancer screening programme available set up in 2002 under Screen for Life, which is subsidised by the Ministry of Health (MOH) and recommended for women aged 40. Currently, bookings for mammograms under BSS are easily done via SingHealth Health Buddy app, HealthHub app, and screening hotlines at the healthcare clusters. Mammograms are performed at polyclinics and sites islandwide. Findings that require further assessment will be followed up on at public hospitals, including Sengkang General Hospital.

MOH announced last year that citizens who enrol under Healthier SG will benefit from subsidised recommended health screenings, which include screening for breast cancer. As a community, let us work together to encourage women to take charge of their breast health. Coupled with continued public education efforts, we hope to encourage more to take proactive steps in safeguarding personal health. Delaying a diagnosis hurts no one more than ourselves.

For more information on Screen for Life / BreastScreen Singapore:

<https://www.singhealth.com.sg/news/medical-news/landscape-breast-cancer-screening-treatment-singapore>

<https://www.channelnewsasia.com/commentary/breast-cancer-free-screening-healthier-sg-mammogram-340794>

SKH Breast Cancer Collaborative Survivorship (BCCS) Programme

By Asst Prof Sabrina Ngaserin (sabrina.ngaserin@singhealth.com.sg), Head and Consultant, SKH Breast Service

Most breast cancer patients complete initial breast cancer treatment in under a year, involving various combinations of surgery, chemotherapy, radiotherapy, and targeted therapy. Hormonal therapy, when required, is advised for five to 10 years. Upon completion of treatment, most survivors can be monitored in a primary care setting for potential local, regional, or systemic recurrence.

On annual review, they would generally require only clinical evaluation and a mammogram thereafter. Clinical review includes comprehensive history and physical evaluation. The main concern is enquiring after breast and systemic symptoms, and performing a breast examination, axilla, supraclavicular region, abdomen for organomegaly and bones for localised pain. Annual mammography can be done with Screen for Life / BreastScreen Singapore for patients who were diagnosed within the BSS system or with any other trusted provider.

Alongside Healthier SG, let's continue managing breast cancer survivors together. **If you are keen to collaborate with us and help in the continual care of survivors, please contact Ms Julian Ang (julian.ang.x.l@skh.com.sg)!**

❖ Updates – GP Referrals to SKH Specialist Outpatient Clinic (SOC)

Get Onboard Partners Buddy (PB) with us **NOW!**

Benefits



Directly book SOC appointments for your patients across various specialty clinics in SKH*



View and track patients' SOC appointments and specialists' referral replies



Strengthen collaboration between Hospital and Primary Care Setting

***Please see attached PDF for the latest specialty and sub-specialty clinics at SKH Medical Centre.**

What's in it for me as a GP?

- ✓ Directly secure appointments on the spot anytime[^]
- ✓ No need to handle multiple emails anymore
- ✓ Round-the-clock access to your patients' care plan through one platform
- ✓ Be kept updated by our specialists on patients' conditions and recommended treatment plans
- ✓ Your patients will be right-sited back to you

[^]For urgent referrals or new SingHealth patients, SKH will conduct the necessary verifications before booking the appointment.

Partners Buddy sharing and demo sessions are available if you are keen to get onboarded to this platform!

For more information, you may reach out to our SingHealth Partners Buddy Team (partnersbuddy@singhealth.com.sg).

Note: For GPs who are not onboarded with PB, we accept GP referrals through the following email: gp@skh.com.sg. Request can take up to 3 working days or more to fulfil from the date of email received should there be more clarifications required.

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