

Report BDIAP bursary

My name is Titia Meijer and I am a fourth year pathology resident from the Erasmus Medical Center in The Netherlands. I am honored to have received a BDIAP bursary to attend the Joint BDIAP - ABP Symposium on Breast Pathology. I have a particular interest in breast cancer and the underlying molecular biological aspects of the disease. During my PhD I focused on improving the selection of breast cancer patients for PARP-inhibitor therapies using functional and whole genome sequencing based homologous recombination deficiency assays.

I wanted to attend this symposium to increase my knowledge of breast pathology and to be informed about new developments in the field. I enjoyed that there was a mix of presentations focusing on practical dilemmas encountered in daily clinical practice as well as talks highlighting exciting new advances in the fields of artificial intelligence (AI), digital pathology and molecular pathology.

Dr Elena Provenzano discussed the findings of the Sloane atypia project. It was very interesting to hear that more atypia was found over the last couple of years, but there was less progression to cancer. Also, flat epithelial atypia is a diagnosis that was first introduced in 2010, which also led to an increase in the diagnoses of atypia.

Mr Ashu Gandhi gave an outline of the evidence that is available on what surgical margins should be pursued in surgical breast cancer specimens. Both long term overall survival and breast cancer specific survival were significantly better when the minimal margin was a >2 mm. It is quite interesting that this guideline differs from the standard in The Netherlands, where smaller margins are accepted. I find it very important to realize that guidelines and standard practices differ among countries and sometimes even hospitals within the same county. This also highlights the importance of international meetings and engaging in discussions with each other on these differences.

Professor Abeer Shaaban stated that “we are the next generation of pathologists” in her talk discussing the impact and difficulties of HER2 low assessment. I was not yet aware of the existence of the HER2 ultra-low group and the fact that these patients will also benefit from treatment with trastuzumab deruxtecan conjugate, according to the results of the Destiny-breast06 trial. However, the reproducibility of HER2 low assessment using IHC was discussed several times during the meeting. I am looking forward to hear about the new advances that will be made to improve HER2 low and ultralow assessment in the upcoming years.

Ian Ellis took us on a trip down memory lane. His historical overview of the pathology of breast cancer and how the grading system evolved over time was very enjoyable. This only makes me wonder what new developments will change our practice during the next decades and how my historical review of pathology would look like once it is my time to retire. I believe that there are big changes ahead of us.

The talks of professor Richard Levenson, Dr Clinton Boyd, professor Anita Grigoriadis and professor Louise Jones focused on the developments in slide free imaging techniques, digital breast pathology, image analysis, AI and molecular pathology. Professor Richard Levenson managed to stress how pathology is lagging behind other disciplines like surgery and radiology in terms of implementing new technologies. I believe that the advances in digital pathology, AI and molecular pathology will drastically change our standard routines in the near future.

In conclusion, during the Joint BDIAP - ABP Symposium on Breast Pathology I have gained new insights in several aspects of breast pathology and I got the chance to meet multiple experts in the field of breast pathology.