Materials and Methods: We will report retrospective data of 12 patients with metastatic breast cancer who developed BM during their lifetime. All patients were treated with the whole brain radiotherapy for their BM between 2008 and 2012 at our institution.

Results: All patients were under the age of 40 at diagnosis of breast cancer. We will present variables recorded, such as at diagnosis, immunohistochemical features, treatment before and after diagnosis of BM, survival data.

Conclusion: The development of brain metastasis predict short survival for majority of patients. This retrospective single centre study will present clinicopathological features and outcome of young breast cancer patients developing brain metastasis.

PO46
Unmet needs and biographic changes among young breast cancer survivors
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Young breast cancer patients may experience effects of their cancer both during and for years after their treatment. As the special life situation of young women differs considerably from that of older women (with regard to multiple aspects such as childbearing, sexuality, body image, partnership, work situation), any interdisciplinary therapy concept needs to take these differences into account. Thus, we are interested in analyzing unmet needs and most prevalent conflicts of our young patients in order to improve our support strategies. We included all patients treated at the LMU breast center between 2006 and 2013 who were ≤40 years at breast cancer diagnosis, excluding patients with less than 6 months after diagnosis. Standardized questionnaires of cancer-specific distress and self-developed questionnaires assessing work situation, partnership, family planning and specific needs were sent by mail. 88 of 160 contacted women participated. Mean time to return to work was 9.9 months. The most prevalent concerns were fear of cancer recurrence and psychosomatic problems, predominantly sexual dysfunction. In 71.6% of patients, no changes in partnership status were observed. Rates of new and separated partnerships were almost equal. More than 40% of patients who planned to have a baby prior their diagnosis had given up this plan, mostly for fear of a negative impact on their prognosis. Many patients stated that they had needed more support in addressing the disease with their children. Although the majority of our young patients reported no changes in their partnerships, sexual dysfunction was a major issue of cancer associated distress next to fear of cancer recurrence. They also have unmet needs regarding communication with their children about the disease as well as their unfulfilled desire of childbearing. New strategies are needed to better support young patients particularly taking into account these issues from the beginning and during the course of disease.

PO47
Breast cancer in young women during pregnancy and lactation
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Background: Nowadays, the incidence of breast cancer is 1 in 3,000 pregnant women. 25% of cases occur before the age of 45 years, in the active reproductive period. To determine the diagnostic methods, the best tactics of pregnancy and the postpartum period in pregnant or lactating young women with breast cancer.

Materials and Methods: We have studied 182 pregnant or lactating patients with breast cancer who received their treatment in national oncologic scientific center. The observation period was 5 years. The average age of the studied patients was 35. The youngest patient was aged 23. The main complaints of pregnant and lactating young patients were as follows: 89% defined the lump in the breast, 55% breast enlargement. Flushing of the skin was observed in 22%. 88% of patients found the tumor themselves, while 11% of them did not apply for further medical help. All patients were divided into stages: II stage of the disease was diagnosed 37%, III stage in 52%, 11% of patients have disease in IV stage on decay background. The highest percentage of patients was with stage III. Regional lymph nodes lesion was in 71% cases. The lesion of subclavian lymph nodes was found in the group of pregnant and lactating in 2% of patients. Edematous infiltrative form was frequent one within pregnant and lactating patients. In 89% the breast tumors were detected with ultrasound help. Verification of the diagnosis based on the core-biopsy in 96.7%. Ductal carcinoma was found in 23% cases infiltrating carcinoma was in 64% cases, 3% of patients had Paget cancer. One 23-year-old patient had multiple primary breast cancer and ovarian cancer complicated with ascites (synchronous cancer). When the breast cancer was diagnosed in the III trimester and the decision of early abortion starting with 32–34 weeks were made. 24% of pregnant patients in II and III trimester were observed before the planned delivery and treatment was initiated with regard to the stage. The treatment of tumor process included several cycles of neoadjuvant chemotheraphy, surgery radiotherapy and adjuvant chemotherapy. Subsequently, all patients were advised to undergo hormone therapy. Reconstructive plastic surgery with TDL and ITR was performed in 26% cases, radical mastectomy was in 62% cases. Conclusion: Pregnancy and lactation provoke more severe disease and contribute to poor prognosis. At the same frequency of local recurrence and metasteses in both groups localization and quantity of metasteses and their appearance significantly more often lead pregnant and lactating patients to death. Thus, the problem of breast cancer is currently complex, requiring the multidisciplinary approach, as well as the development of a unified program of phased survey of pregnant women to identify disease at the earliest stages.

PO48
Pregnancy-associated breast cancer (PABC): Czech Young Breast Cancer Study Group Project 35
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Background: Breast cancer (BC) is the second most common malignancy affecting pregnancy. Pregnancy-associated breast cancer (PABC) is defined as breast cancer diagnosed during pregnancy or in the first postpartum year. As more women delay childbearing, and as breast cancer rates continue to rise, more diagnoses of PABC are anticipated. In general PABC carried a worse prognosis than BC, PABC usually presents at a more advanced stage. This may be due to the difficulty of detecting BC in pregnant and lactating women.

Methods: There are about 130 young women being diagnosed each year with BC in the Czech Republic under 35 years. Clinical registry, called “Project 35”, was launched in 2005 with the aim to collect data on epidemiology of the disease in young women. The standardization of the multidisciplinary medical treatment, genetic counselling and psychosocial support should result in better clinical outcomes and improve the quality of life.

Results: In our department were referred 58 women with PABC, 18 patients with the diagnosis of breast cancer during the pregnancy, 40 patients within one year after the delivery. 4 patients underwent termination of the pregnancy (first trimester) before treatment, in all patients anthracycline-based chemotherapy was administered (in second and third trimester), 1x taxane based and in 9 patients were induced preterm delivery (third trimester). After delivery we followed standard therapeutic guidelines. 8 women are dead,
3 live with metastatic disease, 47 are in remission. All women have delivered healthy children. 17 women are BRCA1/2 carriers. 10 women after the successful treatment have delivered healthy children and are in a complete remission.

Conclusions: With the increasing rates of breast cancer and later ages of childbearing, we will likely be faced with more cases of PABC. These patients should be treated under the supervision of the Comprehensive Centres. Project 35 is useful platform for the PABC counselling.

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PR49

Secretory carcinoma of the breast – case report

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Introduction: The secretory carcinoma of the breast (SC) is a rare entity comprising less than 0.15% of all breast cancers. The first cases were reported in children and adolescents, subsequently being described cases in adults of both sexes. The SC has an indolent course and late recurrence. The major treatment is surgery, however the role of breast conserving surgery and adjuvant radiotherapy (RT) have not been defined. We describe the case of a 41-year old woman, who has undergone a breast conservative surgery following by RT.

Clinical case: The patient presented with a suspect nodule in the upper inner quadrant/transition of the upper quadrants of the left breast measuring 15 mm in diameter. The ultrasound-guided biopsy of the nodule revealed invasive cribriform carcinoma. A left partial mastectomy and a sentinel node biopsy were performed. The pathological evaluation revealed an invasive SC, grade 2, triple negative, expression of Ki-67 ≤15%, free resection margins and negative sentinel nodes. The tumor was classified as pT1N0M0. She underwent adjuvant external-beam RT to the left breast in a total dose of 50 Gy/25 fractions, 1 fraction/day, with three-dimensional conformal RT. A boost to the tumor bed of 15 Gy was delivered using pulsed dose rate brachytherapy. The acute toxicity of RT was grade 1 radiodermatitis (CTCAE v4). Currently, the patient has no evidence of disease.

Discussion: The SC is a rare subtype of breast cancer and the optimal treatment, including the type of surgery (mastectomy or breast conserving surgery) and adjuvant treatment (with or without RT), is not defined, especially in SC classified as grade 2. The role of chemotherapy is uncertain, since distant metastases are rare. According to the literature, the SC has a good prognosis and thus a more conservative approach may be considered. However, further studies with a larger number of cases and longer follow-up are needed to define the best treatment strategy.

PR51

‘Befriend Your Boobs’ (BYB): an educational intervention in breast cancer risk modification and cancer prevention in Barnet’s Schools, North-West London

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Objectives: Breast cancer incidence is highest in the UK in Barnet (NW London) and Oxford, across all age groups. There is a 1.5 fold increased incidence in pre- and post-menopausal Ashkenazi Jews, and increased risk to immigrant populations within 2 generations. If we could demonstrate the known complex risk factors for breast cancer and outline how one might reduce individual risk prior to the establishment of fixed lifestyle, would this impact on long-term lifestyle, and potential breast cancer risk?

Design: BYB is a one-hour education programme that provides information on complex risk factors for breast cancer, and an interactive demonstration of breast examination using synthetic teaching models. Focus groups with up to 12 girls each, who participated in BYB in the previous week, and had completed a short questionnaire, were set up to evaluate the feasibility and acceptability of BYB. A cohort of 500 girls who had received BYB in previous years at one school was sent an online questionnaire to assess longer-term effects.

Participants: This was offered to cohorts of girls in their final year at school, in 7 NW London schools with high Jewish and immigrant populations.

Setting: This was a schools-based programme.

Results: Participation in BYB was seen as appropriate and important. Changes, such as greater focus on treatment options, were needed and incorporated in an iterative fashion. Behavioural risk factors among participants, such as alcohol consumption, were low, given the girls’ age. Regular breast self-examination was the most frequently reported behaviour change intention. Response rates amongst 7 old cohorts were low, but the use of BYB information had most effect on current frequency of breast examination and the technique used.