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Why it is essential to partner information with hope for breast cancer patients

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As providers we believe we are effectively educating breast cancer patients. Many patients do not agree. The Beauty After Breast Cancer (BABC) project examines and addresses two major problems: we need to present what both patients and practitioners consider to be essential information in a way that patients can process, we also need to provide hope as a partner to information so as not to overwhelm patients who are already in crisis. Addressing these two problems creates improved comprehension, higher patient engagement, better overall health, and more family/support involvement. In BABC, we interviewed oncologists, nurses, and surgeons then paired their information with the tips and information patients identified as most important. We also completely revised the standard photos used for education. Clinical photos can accidentally intimidate, and create confusion and unrealistic expectations of perfect outcomes every time. This results in decreased patient satisfaction with providers and with personal outcomes. BABC photos show varying results of all the most common breast cancer surgeries on a wide range of body types and ages. Most importantly we show people who are visibly present in “life beyond cancer”. These photos create a sense of hope for new patients that they too can reach a place where life becomes joyful again. The stories, portraits and words of these patients are worth sharing. They offer insight into how we are failing to meet the needs of these patients, and how we can fix that.

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Combining multi-parametric MRI (mpMRI), MR-ultrasound fusion biopsy, and high intensity focused ultrasound (HIFU): A winning team in the fight against organ confined prostate cancer

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HIFU, a minimally invasive ablative therapy, has been used as an effective tool against organ confined prostate cancer for over a decade around the globe with efficacy results comparable to radical prostatectomy and radiation therapy but with the benefit to patients of much lower rates of erectile dis-function and incontinence. Due to the precise nature of HIFU, real time ultrasound imaging and the ability to modulate power for each HIFU energy pulse, the structures controlling erections and urinary continence can be avoided affording the patient better outcomes than other treatment options. Initially, HIFU was used for total gland ablation, but recently has shifted to a more focal approach due to the convergence of mpMRI and HIFU technologies. The mpMRI has excellent sensitivity in identifying clinically significant cancer tissue in the prostate with the added benefit that it is more sensitive detecting aggressive cancer tissue than clinically insignificant cancers. Exporting the information generated from the mpMRI to an MR-Ultrasound fusion biopsy device, a precisely targeted fusion biopsy can be performed with pinpoint accuracy and repeatability to sample suspicious tissue greatly reducing false negative biopsies and providing more accurate cancer staging information than that obtained from traditional sextant biopsies. With the best possible diagnostic data, the MR information can again be exported, this time to the HIFU therapeutic device, for fusion with live ultrasound images during ablative therapy to precisely target and destroy only the cancerous tissues with even less impact to the surrounding structures, generating outstanding patient outcomes equating to better post treatment quality of life. Patients today are being diagnosed with prostate cancer at earlier ages and this winning team of technologies provides good efficacy, is truly minimally, and delivers the patient an exceptional quality of life.

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