



New method : Radioguided Occult Lesion Localisation for infraclinical Breast Lesions

- ➤ <u>Simple, quick</u> and <u>efficient</u> method to detect and treat infraclinical breast lesions.
- Can replace a classical localisation with a wire or a color method.
- Enable to identify the Sentinel Node without a new injection of nanocolloids.



The ratio of infraclinical breast lesions has been raising over the past 20 years due to breast screening and represents 15 to 25% of the cancers diagnosis.

These lesions are non palpable and very difficult to locate by the surgeon without a print. The classical way to locate the lesion: color method or metallic wire are frequently used.

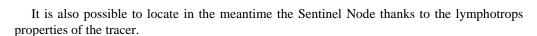
But this classical technic has side effects.

- Painful for the patient when setting up the wire;
- Can be a source of bacterial contaminations;
- Side effects such as: discomfort, bleeding, infections during stereotactic location;
- Risk to move the wire
- The wire trajectory in the Breast does not indicate the shortest way between the lesion and the skin and the incision is not oriented;
 - The dissection around the metallic wire increases the volume of removed tissue.

Location of Lesions:

In the middle of the lesion, radiolabelled colloids are injected under stereotactic or ultrasound.

Then, the lesion can be detected with a Gamma detection probe, Gamma-Sup by CLERAD, equiped with an additional high resolution collimator.



The Tracer used in the ROLL Technic is a rhenium sulfur nanacolloid labelled with 99mTc. The particle size of this tracer enables to locate in the meantime Sentinel Node

* Radioguided Occult Lesion Localization

