



One-Stop Clinic™ for Breast

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Breast cancer diagnosis is a challenging stage in the breast care pathway where time is one of the most influential considerations when it comes to addressing breast cancer treatment and optimized outcomes for patients. This is why the One-Stop Clinic™ model (OSC) delivers a significant advantage to breast care for healthcare providers and patients alike.

SURA, as an insurance company, was the first in the region to establish this multidisciplinary diagnostic model in Colombia in 2018, with 5 clinics nation-wide. With breast imaging, we have evaluated a total of 20,385 patients with suspicious lesions along with corresponding data collected prospectively.

In this group of patients, we biopsied 15,104 (74%) of the attendees and avoided 5,281 (26%), resulting in restaging the BIRADS to a lower classification and suggesting the appropriate follow up and medical healthcare in charge.

The main procedure performed was the ultrasonography-guided fine needle aspiration cytology (FNA) in 46% of patients, followed by the ultrasonography-guided true-core biopsy in 40%, and a stereotactic biopsy in the remaining 14% of cases, mainly in micro-calcifications or other non-mass lesions.

Of these 15,104 biopsies, 2,988 reported a breast cancer diagnosis (20% of biopsies), with most cases diagnosed in early stages (I-IIA) (66%). The rest of the results corresponds to benign lesions. (80%)

These diagnoses could be given for the vast majority of patients on the same day and, in the positive breast cancer cases, even getting staging images and laboratories done in the same time in the same place.

This strategy is highly rated by our insurance users with a general satisfaction of 96% and in addition, the treating physicians highly recommend the referral of their patients to the diagnostic route and appreciate the efficiency and agility of the diagnosis, highlighting that they have all the information they need to start treating patients in the time of their first clinical appointment reducing times to treatment as low as 14 days.

So, in our experience, the OSC model can provide a timely and highly recommended strategy to diagnose breast pathologies and serve as the ideal standard of care, with a multidisciplinary approach that improves diagnostic quality, being easily replicable even in low-income countries.

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