



INSTITUTE OF
BREAST DISEASE
KOLKATA
I B D K

*Focused Research. Scalable Solutions.
Equitable Cancer Care for All.*



INSTITUTE
of Breast Diseases Kolkata

OUR MISSION

At the Institute of Breast Disease, Kolkata, our mission is to help in the fight against breast cancer in India by empowering the next generation through awareness, early detection and proactive health practices. We are dedicated to educating young minds in high schools and colleges about breast health- conducting widespread screening camps, facilitating vaccinations, and driving cancer research.

Guided by the principles of Early Detection – Appropriate Treatment – Necessary Palliation, we strive to ensure that every individual receives the right care at the right time. Through community engagement, scientific excellence, and compassionate care, we aim to encourage early detection, in order to save lives and help people make informed choices for healthier futures.

To become
a global leader
in LMIC-focused
cancer research
and care — that
advances
innovation,
equity, and
positive outcomes
for vulnerable
populations
through science,
education, and
community
partnership.

VISION



FROM

THE DIRECTOR'S

DESK



Cancer should never be a verdict written by one's poverty or postcode. Yet, for millions in low- and middle-income countries, the barriers of cost and access remain as lethal as the disease itself. Every individual — regardless of geography, income, or social standing — deserves the dignity of timely, quality care.

The Institute of Breast Disease, Kolkata (IBDK) was born from this conviction. We exist to challenge the systemic disparities that define cancer care in LMICs and to develop solutions forged in the crucible of resource constraints. History has shown that innovation emerging from scarcity often sets the standard for progress. We hope the answers we discover here can change the trajectory of cancer care everywhere.



A portrait of Dr. Soumen Das, a middle-aged man with dark hair and glasses, wearing a dark blue suit, white shirt, and a patterned tie. He is sitting at a desk with his hands clasped. The background is white with a pink rectangular area on the left side containing his name and title.

**DR.
SOUMEN DAS**
DIRECTOR, IBDK

WHY

IBDK

Breast cancer is now the most common cancer among Indian women. Yet, the system designed to detect and treat it still fails most of them.

While high-income countries like the US have achieved over 95% 5-year survival, India's rate lingers around 65%—and plummets to less than 50% in rural areas. The reasons are painfully familiar:



**LATE
DIAGNOSIS**



**FRAGMENTED
CARE**



**ABSENCE OF
STANDARDISED
PROTOCOLS**



**INACCESSIBLE OR
UNAFFORDABLE
TREATMENT**

Over 60% of breast cancer cases in India are detected at Stage 3 or 4, when treatment is harder and costlier and often too late

IBDK, A NON-PROFIT BASED OUT OF KOLKATA, WAS FOUNDED TO CHANGE THIS REALITY



We operate not with charity or philanthropy, but with rigorous research, purpose-built solutions, and a deep commitment to health equity across low and middle-income countries (LMICs).

OUR APPROACH

Research-Driven, People-Focused

At the core of IBDK's model is a guiding principle: **no system can be transformed until it is fully understood in all its dimensions.**

We began by interrogating the system itself, tracing how women engage with it and where those engagements collapse. This rigorous inquiry exposed, with empirical clarity, the critical voids that continue to undermine breast cancer care in India.

1 SOP BREAST 1 STUDY

Study on the presence and use of standardised treatment protocols.

Finding: SOPs are often missing, even in medical colleges. MDT-based care is rarely implemented.

2 SOP BREAST 2 STUDY

Study of actual Multidisciplinary Team (MDT) practice.

Finding: In 67 of 92 cases reviewed, no MDT discussion took place and treatment decisions were made without collective input.



3 NAVIGATION STUDY

Explored why many patients discontinue treatment midway.

Finding: Lack of guidance, fear, and system complexity contribute more than cost alone.

4 TREATMENT COMPLETION STUDY

Investigated barriers to finishing prescribed treatments.

Finding: Poor treatment completion was linked to inaccessibility, high cost, adherence to non-modern practitioners and lack of follow-up.

5 SURGICAL TECHNIQUE RESEARCH

Developed a cavity-sparing approach to reduce margin positivity in breast-conserving surgery.

Finding: Safe, effective, and cost-saving alternative

WE DON'T JUST FIND PROBLEMS WE BUILD SOLUTIONS

Grounded in rigorous research, IBDK operates at the intersection of science and implementation. Our approach converts evidence into scalable interventions. We build tools, protocols, and capacity-building training models designed to bridge the gap between medical science and equitable care.

EARLY DETECTION THROUGH PRACTICAL, SCALABLE TRAINING

To improve early detection, IBDK trains those who are already the first point of contact: general practitioners, rural medical practitioners, and frontline health workers.

CLINICAL BREAST EXAMINATION COURSE

A structured module that teaches:

- HOW TO LOCATE BREAST LUMPS
- HOW TO CHARACTERISE THEM (BENIGN VS MALIGNANT)
- ASSESSMENT OF AXILLARY LYMPH NODES AND RELATED ABNORMALITIES

We've developed a low-cost breast model to simulate examinations, reducing cost to just ₹5,000 per model as opposed to ₹25,000–₹50,000 in conventional models.

CORE BIOPSY TRAINING

A practical, protocol-driven programme to improve early and accurate diagnosis. Tailored for use in district hospitals and resource-limited settings.

TRAINS



Pathologists



Radiology
Technicians



Surgeons



Gynaecologists



SCALE & DELIVERY

Over **3,000 rural healthcare practitioners** are already trained

Teaching camps and modules designed for replication

Developed app for rural healthcare providers in collaboration with the **Indian Statistical Institute**

TOOLS THAT EMPOWER PATIENTS AND PRACTITIONERS

IBDK develops simple, evidence-based tools that fit real-world Indian conditions.



KOLKATA MASTALGIA CHART

A validated diagnostic tool that helps triage patients with breast pain, reducing unnecessary imaging.



ME APP

Promotes regular self-examination through:

- Alert-based reminders
- Step-by-step guidance
- Symptom tracking



CHEMOCARE APP

A digital companion that helps patients:

- Track chemotherapy side effects
- Monitor symptoms
- Stay adherent to treatment schedules



DAS'S CLASSIFICATION OF LANGER'S ARCH

An anatomical framework developed by IBDK to guide safe axillary surgery and improve surgical outcomes.



MOLECULAR MDT

A virtual multidisciplinary platform that integrates molecular profiling into treatment decisions, making personalised care possible, even outside large hospitals.

BCRADS

BREAST CLINICAL REPORTING AND DATA SYSTEM

BCRADS is a clinician-led innovation developed by the Institute of Breast Disease, Kolkata. It standardises clinical breast assessment in low-resource, high-burden settings.

BCRADS is a structured scoring and reporting system. It is based on patient history and focused clinical examination. These inputs generate a clear clinical score that supports consistent risk assessment and clinical decision-making.



HOW BCRADS WORKS

Clinical findings are assessed using defined parameters. These include age, family history, prior radiation, breast asymmetry, skin or nipple changes, lump characteristics, and nodal findings.

Each assessment produces a score mapped to a BCRADS category from 1 to 5. Every category is linked to a specific clinical action, ranging from routine follow-up to fast-track referral to a breast clinic.



WHY BCRADS MATTERS

- 1 Standardises clinical breast examination
- 2 Reduces subjectivity and variation in assessment
- 3 Enables early risk stratification without reliance on imaging
- 4 Supports timely referral and continuity of care



GLOBAL RECOGNITION AND ADOPTION

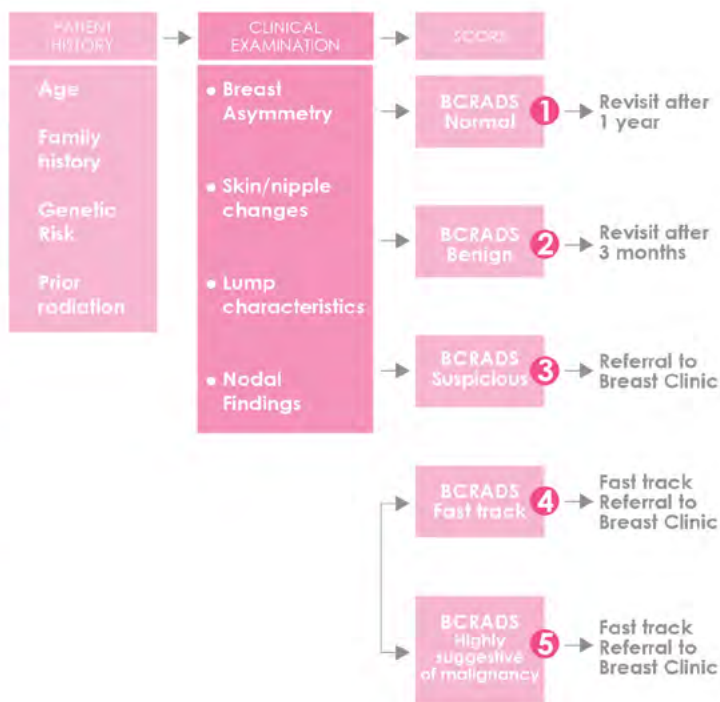
BCRADS received the Vanessa Moss Award at the London Global Cancer Week 2025 in recognition of its clinical relevance and impact. The system has since been adopted across diverse healthcare settings including Nigeria, Peru, and other countries.

By bridging the gap between clinical examination and early diagnosis, BCRADS offers a scalable, globally relevant approach to improving breast cancer detection and outcomes across health systems.

BCRADS SCORING SYSTEM

BCRADS Category	Score	Interpretation
1	0-2	NORMAL
2	3-4	BENIGN
3	5-6	PROBABLY BENIGN
4	7-9	SUSPICIOUS
5	≥ 10	HIGHLY SUGGESTIVE OF MALIGNANCY

BCRADS SCORING FLOW



COMMUNITY OUTREACH

Toward More Timely Awareness



PROJECT PINK ALERT

India's largest breast health awareness campaign for school and college students.



1

CONDUCTED ACROSS
**URBAN AND RURAL
SCHOOLS**

2

OVER 1.8 LAKH
SCHOOL STUDENTS
REACHED

3

FOCUS ON **SELF-AWARENESS,**
EARLY SIGNS AND
STIGMA REDUCTION

4

EXPANDED TO PREMIER HIGHER
EDUCATION INSTITUTIONS
ACROSS BENGAL



JIBONER SATHI

A Companion Through the Journey

Born from the findings of our Navigation Study, **Jiboner Sathi** is India's first survivor-led breast cancer navigation programme.



**PATIENTS ARE PAIRED WITH
TRAINED SURVIVORS
WHO GUIDE THEM
THROUGH DIAGNOSIS,
TREATMENT AND RECOVERY**



**NAVIGATORS OFFER
EMOTIONAL SUPPORT,
EXPLAIN PROCEDURES
AND HELP AVOID
DROP-OFF**



**BUILDS TRUST,
ESPECIALLY FOR FIRST-
TIME HOSPITAL USERS
OR THOSE FROM
REMOTE AREAS**

AFTERCARE AND REHABILITATION

Dignity After Treatment

Recovery from breast cancer goes beyond the hospital. IBDK supports survivors through prosthetics, income generation among family members, and long-term care. Put together, all of this boosts treatment completion and survival rates.

PROJECT SAMPURNA

A soft, low-cost external
mastectomy pad

A DESIGNED BY BREAST
CANCER SURVIVORS

B SOLD DIRECTLY WITH
MINIMAL MARGIN

C BOOSTS COMFORT AND
SELF-CONFIDENCE

D SOON TO BE MADE
AVAILABLE ONLINE

ECONOMIC SUPPORT

During treatment

Family members are
linked to jobs around
hospital settings via
NGO/MSME
collaborations

After treatment

Survivors are supported
through production of
HOPE products or
become trained
navigators in the
Jiboner Sathi
programme

SETTING NEW STANDARDS IN BREAST CANCER CARE

IBDK's work has been recognised by leading institutions across the globe for technical merit and also for transforming how breast cancer is understood, diagnosed, and treated in low-resource settings.

NOTABLE ACHIEVEMENTS



NAMED AMONG TOP 20 GLOBAL SURGICAL INNOVATIONS IN 2025

Recognised by the American College of Surgeons, for developing a breast examination training model that reduces cost manifold—making hands-on training widely accessible.



SHOWCASED AT UICC 2024

Our early detection training model was featured at the Union for International Cancer Control (UICC), positioning India as a leader in affordable, scalable cancer care.



INTERNATIONAL ACCEPTANCE OF SOP BREAST 1 STUDY

Our research revealing gaps in protocol and MDT usage was accepted at UICC—informing reforms in breast cancer training and care pathways.



LAUNCH OF THE DAS-MANDAL INDEX

A first-of-its-kind scorecard to benchmark cancer care across centres, using indicators like chemotherapy access, delays, stock-outs, and out-of-pocket costs.



CONTRIBUTED TO WHO SURGICAL SAFETY CHECKLIST

As a member of the NCCN International Review Board, IBDK helped introduce a new global checkpoint: "Is MDT done?" — a simple prompt that can improve cancer surgery outcomes worldwide.

GLOBAL RECOGNITION VANESSA MOSS AWARD FOR CANCER HEALTH DISPARITY



At London Global Cancer Week 2025, the Institute of Breast Disease, Kolkata received the prestigious Vanessa Moss Award for Cancer Health Disparity.

The award was conferred upon IBDK's founder and director, Dr Soumen Das. It recognises our sustained work in building equitable and affordable cancer care in low-resource settings.

This recognition matters. It acknowledges care models shaped by real constraints. High patient load. Limited resources. Delayed diagnosis. Interrupted treatment.

IBDK was recognised for responding to these stark realities by linking early detection, standardised clinical assessment, and affordable treatment pathways to support treatment completion.

The award places IBDK's work in a global context. It affirms that solutions developed in resource-constrained settings are not exceptions. They are essential.

More than a milestone, this recognition reflects a shared direction. Cancer care must be evidence-driven. It must be patient-centred. And, most importantly, it must be accessible.

The Vanessa Moss Award strengthens IBDK's resolve to keep working towards its mission. To reduce disparity and ensure that quality cancer care is not defined by geography or income.



NETWORKS & COLLABORATIONS

MEMBERSHIPS

IBDK is an active member of key international platforms that shape cancer policy, research, and care:



BREAST CENTRES
NETWORK (BCN)



NCD
ALLIANCE



UNION FOR INTERNATIONAL
CANCER CONTROL
(UICC)



ABC GLOBAL
ALLIANCE

Supported by



BIG Breast
International
Group

BIEI- BREAST INTERGROUP
EASTERN INDIA

a proud member of
Breast International
Group, finding cures
through global breast
cancer research

COLLABORATIVE PARTNER INSTITUTIONS



NATIONAL BREAST
IMAGING ACADEMY (UK)

Partnership to enhance
breast imaging and
diagnostics education



INDIAN STATISTICAL
INSTITUTE (KOLKATA)

Co-development of digital tools
for self-exams and clinical reporting,
including the BC-RADS system

BRAND AMBASSADOR

At IBDK, we are honoured to be represented by a voice whose life's work embodies courage, advocacy, and transformative leadership. As our Brand Ambassador, Prof. Rangina Hamidi brings powerful global insight and a deep commitment to education and equity—resonating with IBDK's mission to humanise cancer care across communities and borders.





PROF.

RANGINA HAMIDI

Rangina Hamidi is a prominent Afghan educator, women's rights advocate, and former Minister of Education of Afghanistan—the first woman to hold the post in over 30 years. She is the founder of Kandahar Treasure, the first women-owned social enterprise in southern Afghanistan, empowering women through economic independence and cultural preservation. With a degree in religious studies and gender from the University of Virginia, she has spent over two decades working at the intersection of education, development, and gender equity. A published author and global speaker, Hamidi continues to advise international organizations on education policy and women's empowerment in conflict-affected regions.

RANGINA

HAMIDI

BHRAMAR

MUKHERJEE



PROF.
BHRAMAR MUKHERJEE

Professor Bhramar Mukherjee is the Anna M.R. Lauder Professor of Biostatistics and Professor of Chronic Disease Epidemiology at the Yale School of Public Health (YSPH). She serves as the inaugural Senior Associate Dean for Public Health Data Science and Data Equity at YSPH. In addition, she holds a secondary appointment in the Department of Statistics and Data Science and is affiliated with the MacMillan Center and the Institute for the Foundations of Data Science. Professor Mukherjee also serves on the Yale Cancer Center Director's Cabinet. Beyond academia, she is an avid theatre enthusiast with deep ties to literature and culture.

SCIENTIFIC ADVISOR

As our Scientific Advisor, Professor Bhramar Mukherjee brings unmatched expertise at the intersection of data science, public health, and cancer epidemiology. Her leadership guides IBDK's scientific direction, ensuring our work remains grounded in rigour, equity, and a vision for accessible, data-driven healthcare.



OUR PUBLICATIONS



"Reverse Bay of Bengal" Modification of Grisotti Flap for Reconstruction of Central Quadrant Tumors

Original Article | Published: 28 February 2025
(2025) [Cite this article](#)



Indian Journal of Surgical Oncology

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Soumen Das **Anwar Ali Mallick**, ... **Diptendra K. Sarkar** [Show authors](#)

Proposed classification of Langer's arch and its clinical implication in regard to axillary dissection

Soumen Das , **Sidhartha Misra** , **Kamalesh Rakshit** , **Sandipan Purkait** , **Rahul Agarwal**

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Kolkata Breast Pain Chart: A Novel Chart to Record Mastalgia

Soumen Das · **Anwar Ali Mallick** · **Sayantan Mukhopadhyay** · **Rahul Agarwal** · **Kamalesh Rakshit** · **Rajib Lochan Jena** · **Diptendra Kumar Sarkar**

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Abstract

Abstract Mastalgia is a frequent and distressing symptom for many women, typically classified into cyclical and non-cyclical types. The Cardiff Breast Pain Chart offers a means to record daily mastalgia severity but does not account for variations during menstruation. The modified AIIMS chart, while including a visual analogue scale, uses multiple charts and lacks graphical integration. Here, we introduce the Kolkata Breast Pain Chart, a comprehensive tool combining a visual analogue scale, menstrual tracking, pain site identification, and bilateral recording. Integrating elements from previous models, it provides a unified approach for mastalgia documentation. A pilot study with 56 patients demonstrated an 80.35% compliance rate, showcasing its practical applicability.

Keywords Mastalgia · Breast pain chart

LOOKING AHEAD

Building the Future
of Cancer Care



1 **PROMIS STUDY**

Patient Reported Outcome
Measurement in Cancer Surgery

Tracks and analyses patient
experience across government
and private care settings

2 **IMPACT STUDY**

Implementing Models for Premium-Assisted
Community Treatment

Designs community-based insurance
models to support universal health
coverage in cancer care

3 **STATE-OF-THE-ART LMIC CANCER RESEARCH FACILITY**

A dedicated centre under development,
focused on scalable cancer care
innovations for low-resource settings

BE PART OF THE CHANGE

Every worthwhile project needs supporters. Whether you're a doctor, a policymaker, a student, a survivor, or a concerned citizen — you can help reshape the future of breast cancer care.

DONATE

IBDK is a non-profit, sustained entirely through the generosity of individuals like you. Every contribution directly supports training programmes, prosthetic services, awareness initiatives, and patient care. Your support makes this work possible.



COLLABORATE

Partner with us through your institution, clinic, or research centre to advance equitable, evidence-based breast cancer care.

PARTICIPATE

Join our outreach, research, or training initiatives and be part of a growing movement working to make quality breast health accessible to all.

At IBDK, we don't just treat the disease. We strengthen the system — with people's support, for people's health.

OUR TEAM

The Institute of Breast Disease, Kolkata is steered by a committed, multidisciplinary team of experts in breast surgery, oncology, imaging, pathology, radiation therapy, digital innovation, palliative care, and public health. Together, they bring depth, diversity, and dedication to every aspect of patient care, research, and education.

Led by **Dr. Soumen Das**, surgical oncologist and Director of IBDK, whose vision has shaped the institute into a hub of innovation and community-responsive care.

IBDK's strength lies in its collective—united by the shared goal of delivering equitable, cutting-edge breast health solutions.





DR. SOUMEN DAS

Director, Institute of Breast Disease, Kolkata
Netaji Subhas Chandra Bose Cancer Hospital

Dr. Soumen Das is a breast and cancer surgeon with over two decades of clinical experience. A graduate of Calcutta Medical College, he completed his MBBS and MS in Surgery with multiple Gold Medals and Honours. He trained in surgical oncology at Tata Memorial Hospital, Mumbai, and in robotic cancer surgery at City of Hope Hospital, Los Angeles. His qualifications include European Breast Surgical Oncologist Certification (first Indian to get BRESO certification), FRCS (Glasgow), and FACS (USA). As Director of IBDK, he leads an evidence-driven, equitable model of breast cancer care.

DR. TANMOY K. MONDAL

Director, Institute of Breast Disease, Kolkata
Medical Oncologist, Manipal Hospital

Dr. Tanmoy Mondal is a senior medical oncologist with extensive experience in comprehensive cancer care. He completed his MBBS at N.R.S. Medical College, Kolkata, followed by an MD in General Medicine from Calcutta National Medical College and a DM in Medical Oncology from Tata Memorial Hospital, Mumbai. His qualifications include MRCP, ESMO certification, and DrNB in Medical Oncology. His practice spans solid tumours and haematological malignancies with chemotherapy, immunotherapy and CAR T cell therapy. As Director at IBDK, he contributes to evidence-based, patient-centred oncology care grounded in equity and access.



KANAD BASU, PH.D

AI Leader and Business School Professor
Director – International Partnership
Institute of Breast Disease, Kolkata

Dr. Kanad Basu is an AI scientist and educator with nearly two decades of experience in data science and artificial intelligence. He holds a PhD in Computational and Applied Mathematics from the University of South Carolina, with postgraduate training at IIST Shibpur and the University of Texas–Pan American, and an undergraduate degree from Presidency University, Kolkata. He is Professor of Practice in Data Sciences and Operations at the USC Marshall School of Business. At IBDK, he advances international partnerships and AI-enabled approaches to equitable cancer care.



CORE GROUP

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Consultant Anaesthesiologist and
Palliative Care Specialist
Trustee, IBDK

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Consultant Gastroenterologist
Trustee, IBDK

DR. SUKHAMOY BARIK

Consultant Gynaecologist
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Member

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Member

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Consultant Surgical Oncologist
Member

DR. R. R. MANDAL

Consultant Surgical Oncologist
Member

DR. RITAM JOARDAR

Consultant Medical Oncologist
Member



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Donate to Us

Your support keeps IBDK's mission alive,
we rely on individuals like you to
make lasting change possible.

