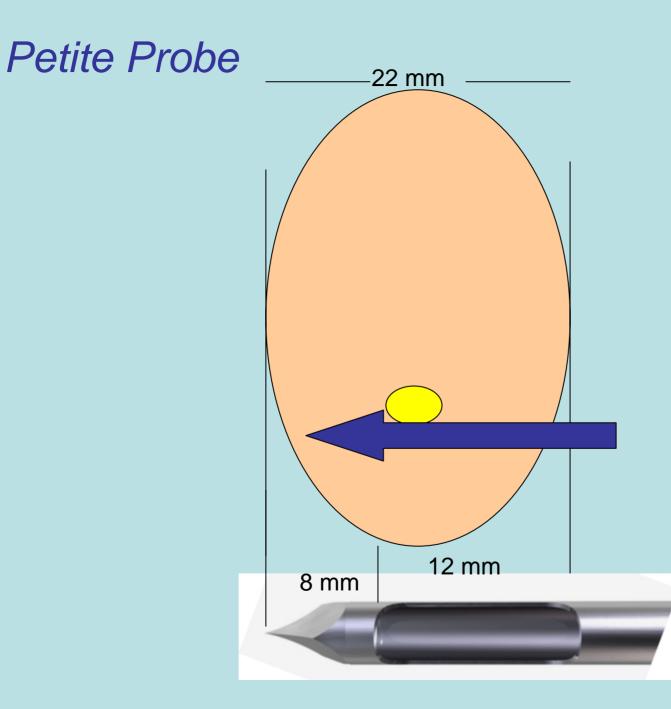


- Exclusion criteria
  - Patient weight > 300 lbs
  - Bleeding diathesis
  - Anticoagulation treatment that can not be temporarily stopped

Technical reasons for inability to perform stereo

Lesion inadequately seen

Breast less than 20mm thick in compression



Technical reasons for inability to perform stereo

Proximity to chest wall

Patient can't lie prone

LimitationsSampling underestimates

Histological underestimates

#### Sampling underestimates

Geometry of lesions

Heterogeneity of lesions

Sampling Underestimates

Calcifications must be seen in specimen

Specimen radiograph

# Larger volume of tissue

Vacuum assisted probes

Placement of clip with small lesions

Cancer misses by Stereo related to

 Biopsy experience of each MD doing procedure

Number of samples obtained

Histological Underestimates
 DCIS/ADH

#### LCIS/ALH

Radial scars

Missed Carcinomas

Histological Underestimates – ADH
 20-56% malignant at surgery

DCIS

16-30% will be invasive Ca at surgery

- Breast Biopsy utilization Jan/88 Dec/99
- All surgical and image guided core biopsies
- Total of 2940 breast biopsies
- Annual utilization rate of breast biopsies stayed stable at 62.6/10 000 women

 Rate of utilization did not change in 40-49 yr age group despite introduction of screening mammo in 1997

- Utilization rate of operative biopsies declined from 58.8 to 26/10 000
- Image guided biopsies increased from 0.2 to 27.7/10 000

At end of study 52% of biopsies were image guided and 48% were operative

Each year 44% were for palpable lesions, 3% for nipple lesions and 53% for imaging abnormality

Rate of benign lesions stayed stable (39.1/10000)

 Rate of malignant results ranged from a low of 14.6/10 000 in1989 to 21.9/10 000 in 1995

Benign-malignant ratio (2.2:1) remained stable

 Advent of MR guided biopsies for suspicious lesions could change utilization in the future *Ghosh et al; Arch Intern Med* 2005; 165:1593-1598



- Breast
- Imaging
- Reporting
- And
- Data





Standardized lexicon

Final assessment categories 0-6

 Final assessment categories related to recommendations for future action

# **BIRADS**

- 0 evaluation incomplete; needs further imaging
- I- Negative
- 2- Benign
- 3- Probably benign
- 4- Suspicious
- 5- Highly suspicious
- 6- Biopsy proven malignancy

CALCIFICATIONS TYPICALLY BENIGN I dermal

vascular

coarse or popcorn-like
large rod-like
round

lucent centered