

Magnetic resonance imaging

Magnetic resonance imaging

MRI of the breast (Figure 58.9) is useful in a number of settings: - /uni25CF women with dense breasts or discordant or equivocal findings on mammogram/ultrasonography; /uni25CF to distinguish scar from recurrence in women who have had previous breast conservation therapy for cancer; /uni25CF to assess multifocality and multicentricity and, in lobular cancer, high-grade ductal carcinoma in situ (DCIS); /uni25CF women with breast cancer (BRCA) gene or other genetic mutations or a strong family history; /uni25CF women with breast implants. MRI-guided biopsy may be performed for lesions not visible on ultrasonography or mammogram.

Category Assessment Probability of malignancy Follow-up recommendation
0 Assessment is incomplete Not applicable
1 Negative Essentially 0%
2 Benign /f_i nding(s) Essentially 0%
3 Probably benign /f_i nding

“ 0% but \leq 2%
4 Suspicious abnormality: 4a: Findings needing intervention with a 2 to \leq 10% low suspicion for malignancy 4b: Intermediate suspicion of malignancy 10% to \leq 50% 4c: Findings of moderate concern, with 50% to <95% high suspicion for malignancy 5 Highly suggestive of malignancy \geq 95%
6 Known biopsy-proven malignancy Not applicable (a) (b) Figure 58.7 Features of a normal mammogram. (a) Mediolateral oblique view; (b) craniocaudal view. (a) Figure 58.8 Imaging features of breast cancer on mammography (Category BI-RADS 5). (a) Irregular, spiculated mass; (b) /f_i ne pleomorphic microcalcifications; (c) /uni00A0 architectural distortion. Need for additional imaging evaluation and/or prior mammograms for comparison
Routine annual screening mammography (for women over age 40)
Routine annual screening mammography (for women over age 40)
Initial short-term follow-up (usually 6 months) examination
Biopsy should be considered
Requires biopsy or surgical treatment
Category reserved for lesions identified on imaging study with biopsy proof of malignancy prior to definitive therapy

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