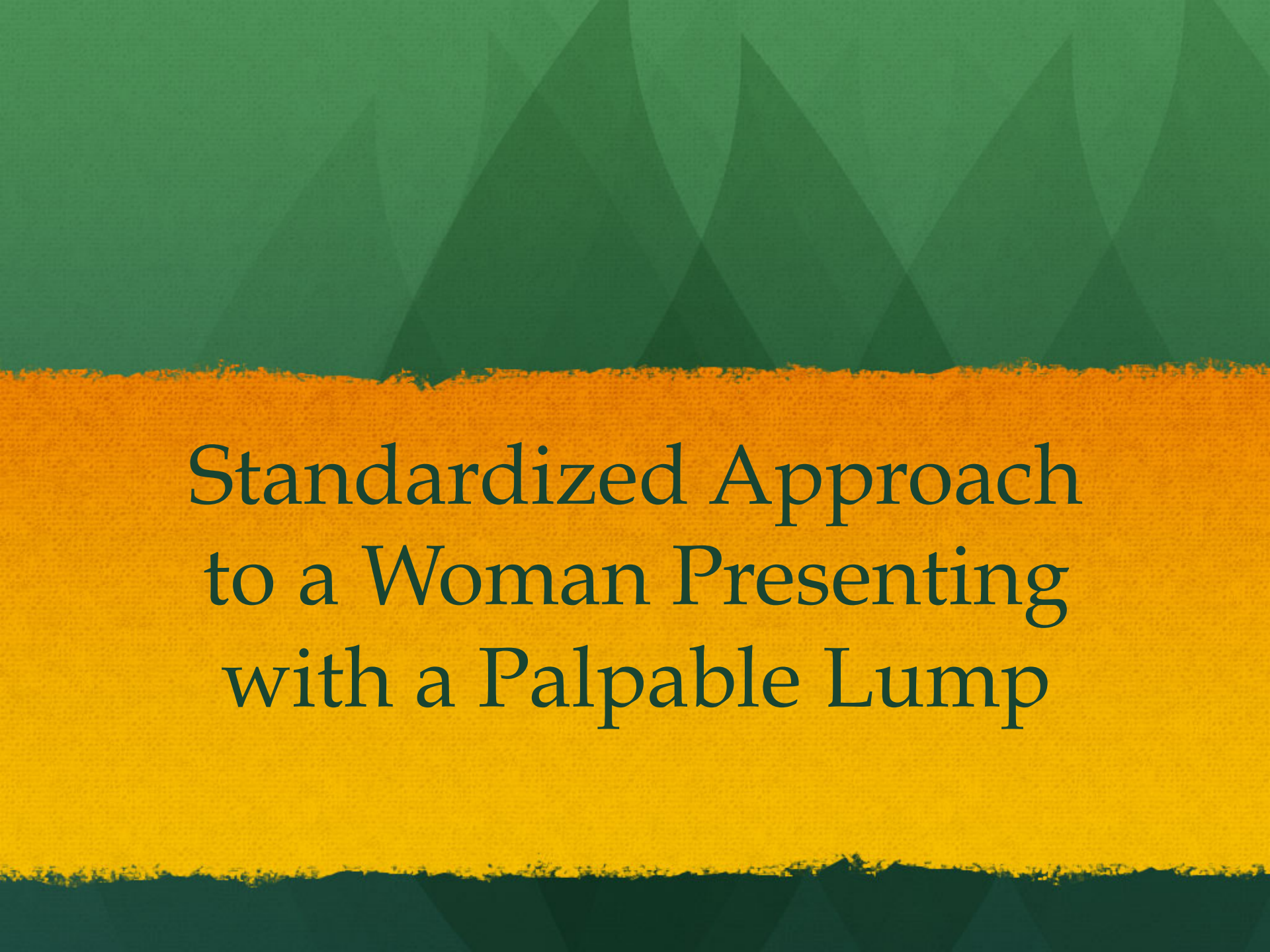




Standardized Approach to a Woman Presenting with a Palpable Lump

Downstaging

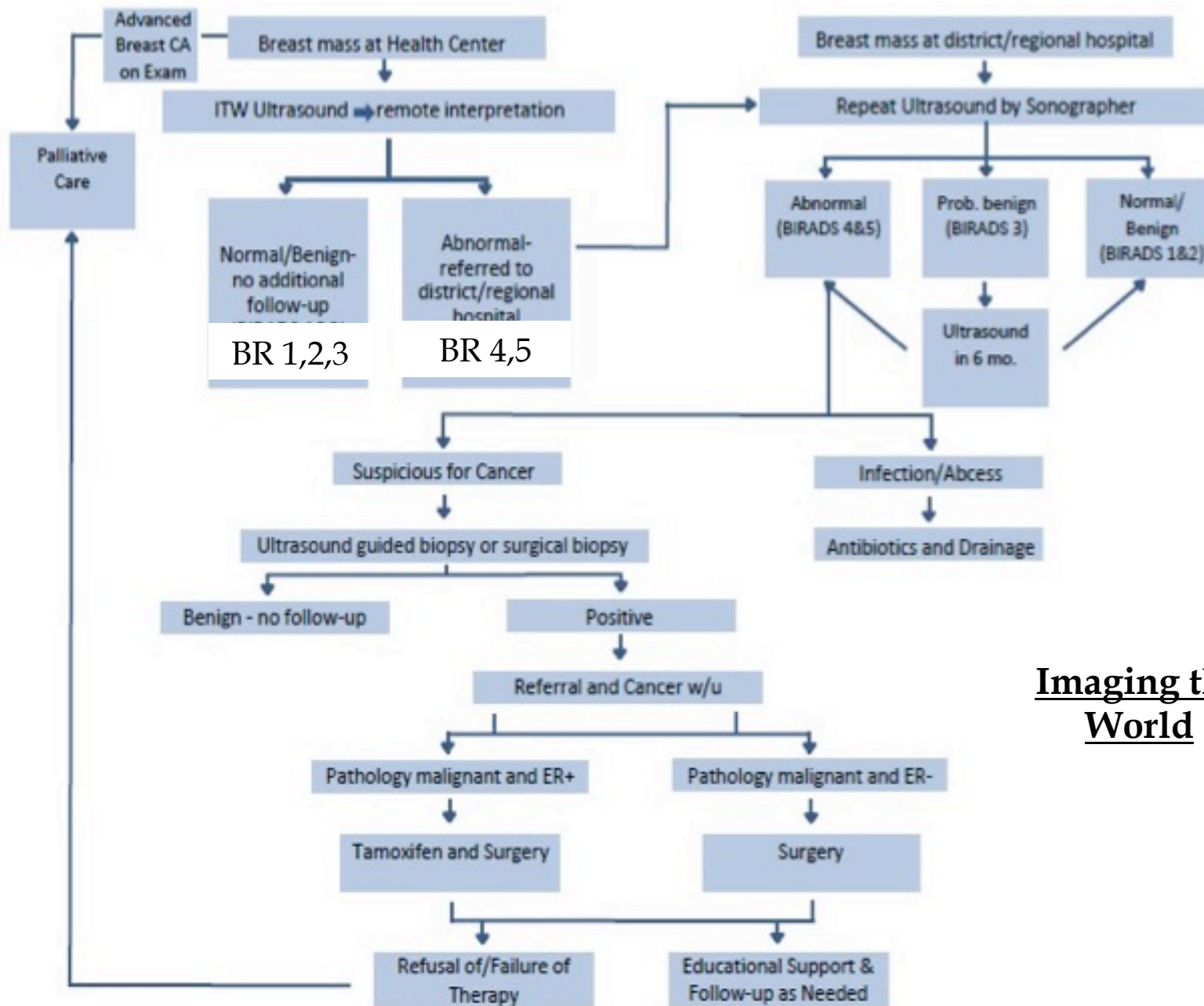
- Where early detection and treatment are available and accessible:
 - 5-year survival rates exceed 80%
- Breast cancer can be detected early through early diagnosis and screening
 - **Early diagnosis:** based on awareness of signs and symptoms of cancer; entails recognizing warning signs and taking prompt action
 - **Screening:** systematic use of testing, such as mammography, across an asymptomatic population to detect and treat cancer or pre-cancers

Triple Test

1. Clinical Breast Examination
2. Diagnostic mammography
3. Ultrasound
 - Biopsy

Clinical Breast Examination

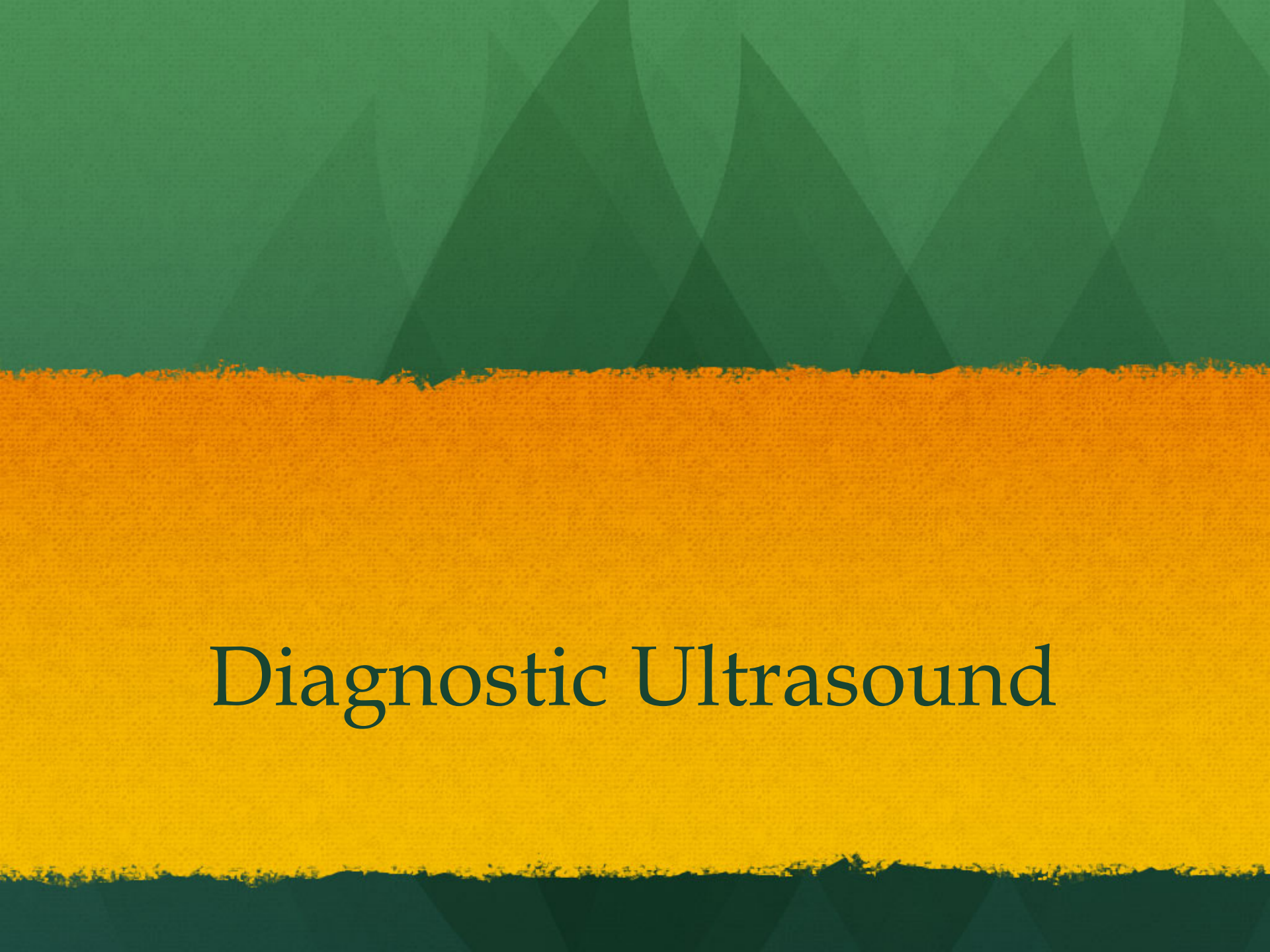
- Potential for high false positives (up to 80%)
- Patient factors
- Examiner factors
- Currently positive CBEs need referral and evaluation
 - Barriers for >85% living in rural communities in Africa



Imaging the
World

Rural Ugandan Experience

- Community outreach and education
- 212 women with self-detected lump screened with CBE at community health center
- 44 (21%) had palpable lump
- 11 (28%) examined by ultrasound at a community health center had a suspicious mass
- Only four underwent biopsy and all diagnosed with breast cancer (2 with early stage)
- 75% with palpable lumps on CBE did not need a biopsy or referral

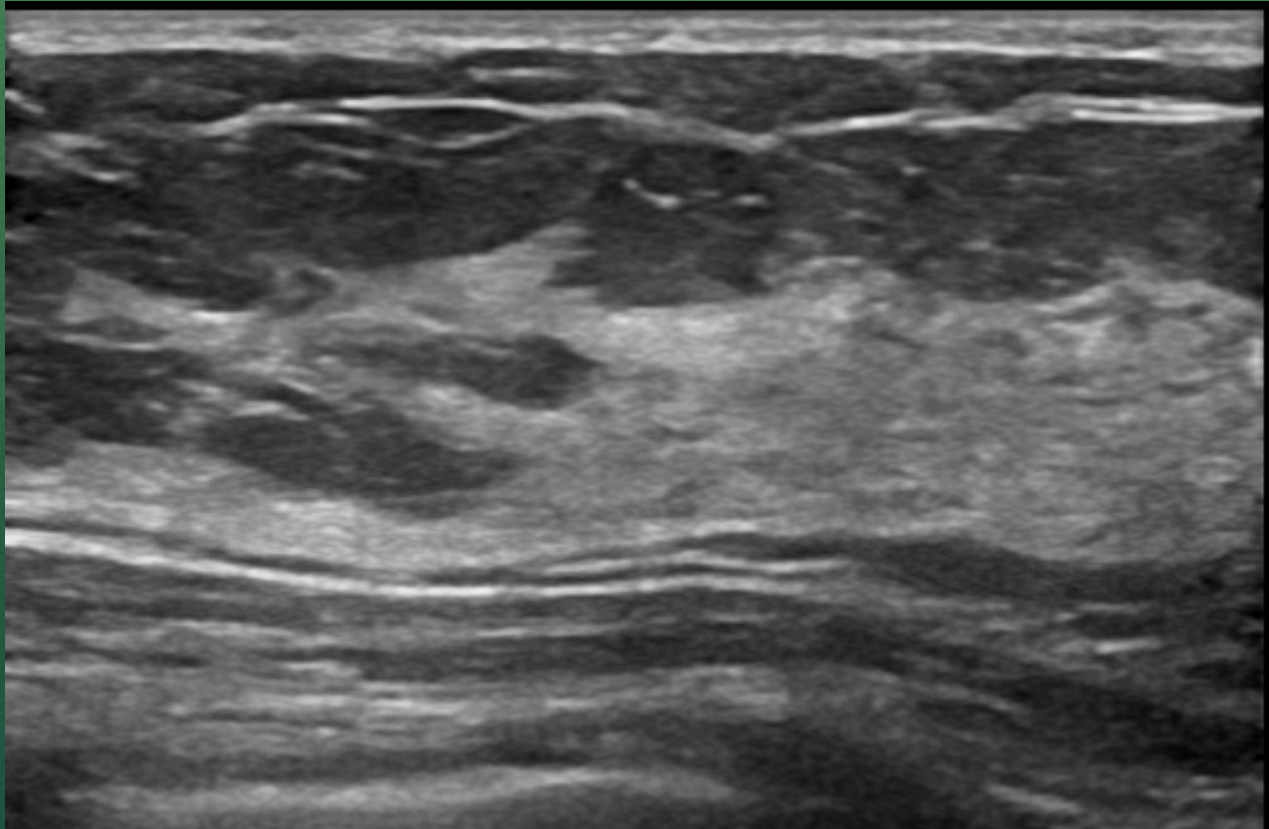


Diagnostic Ultrasound

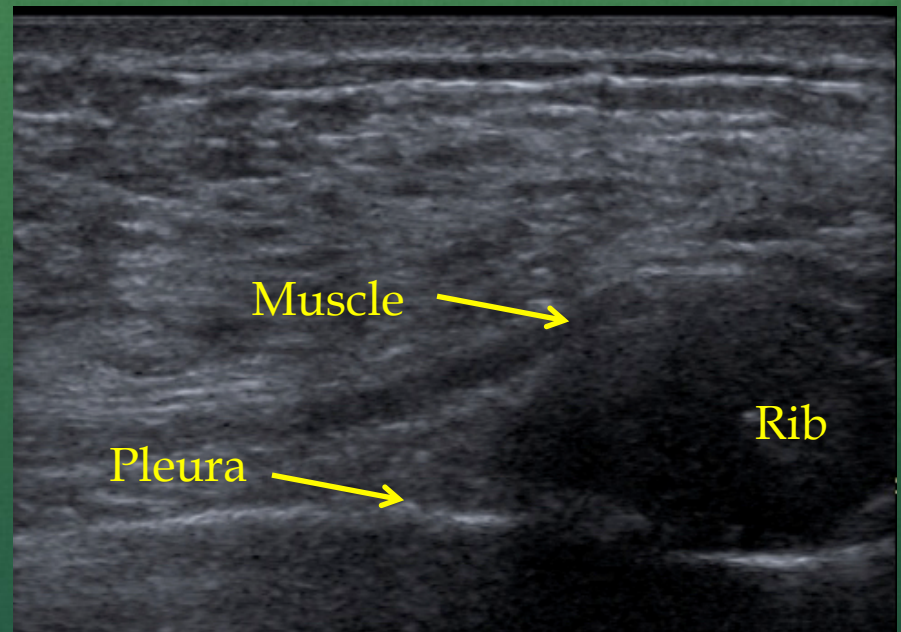
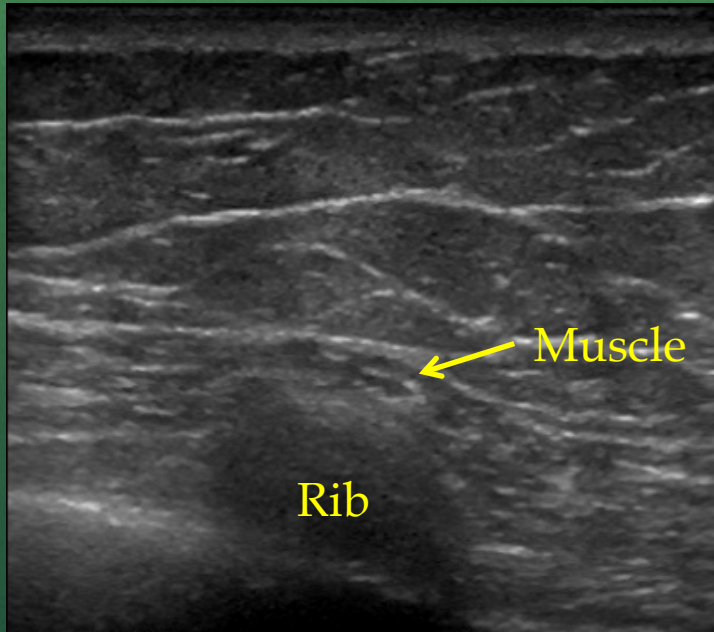
Causes of Palpable Lumps

- Normal breast tissue
- Rib
- Cyst
- Mass

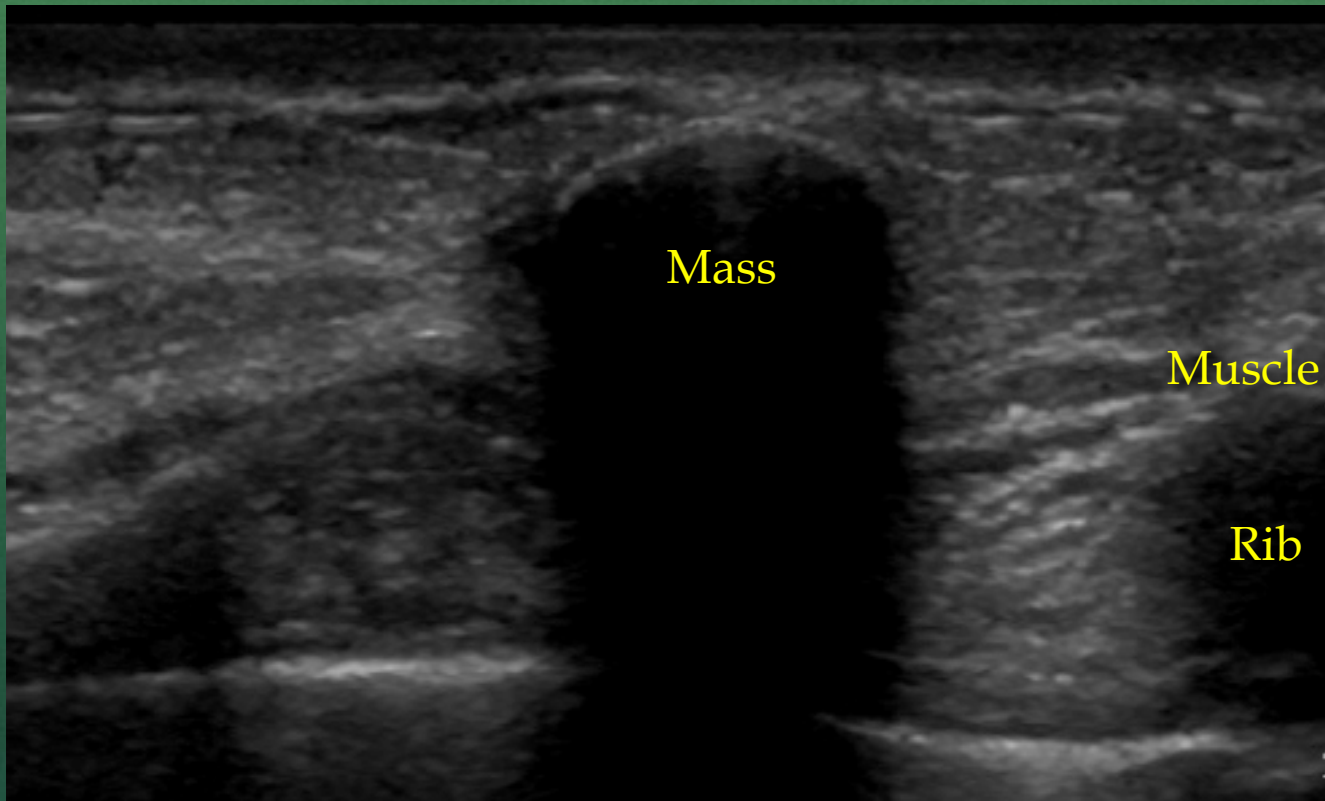
Normal Breast Tissue

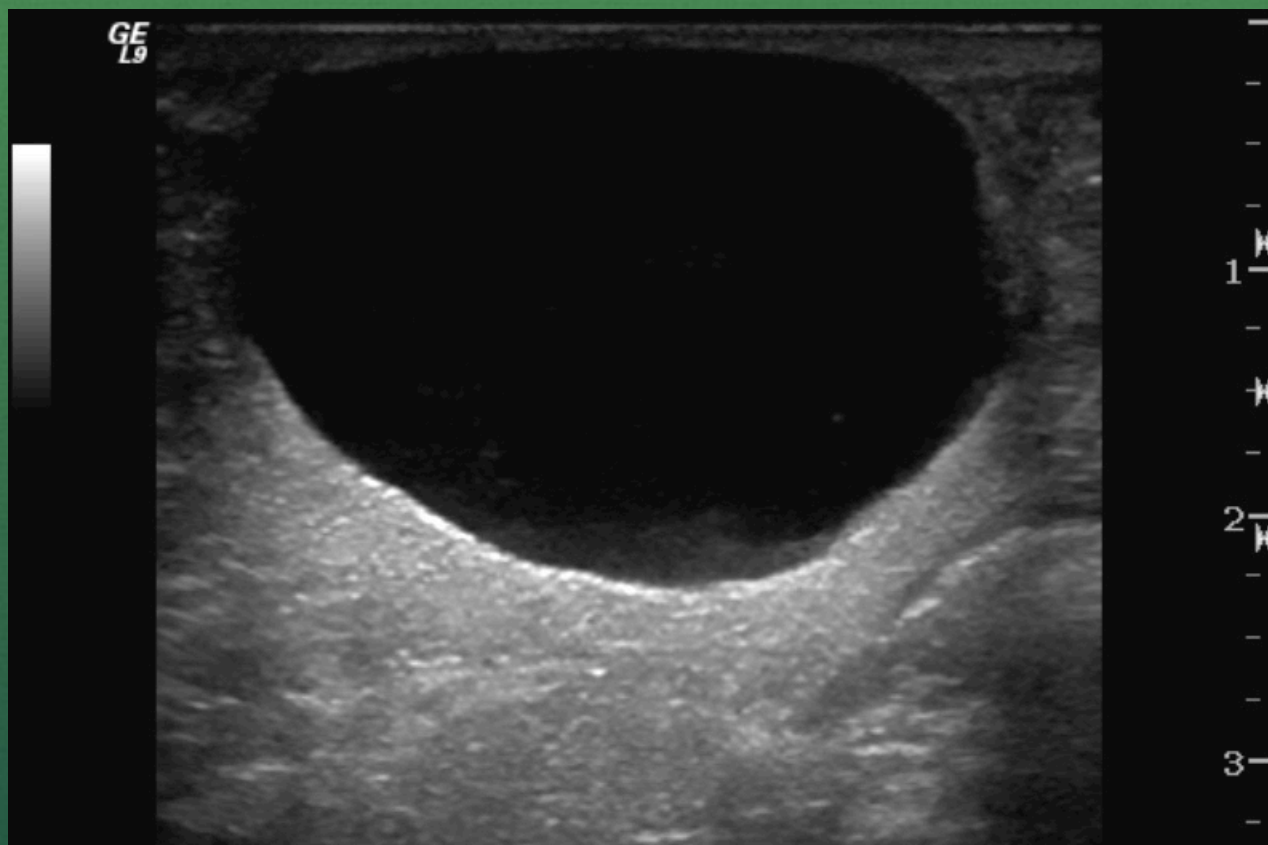


Rib



Palpable Lump



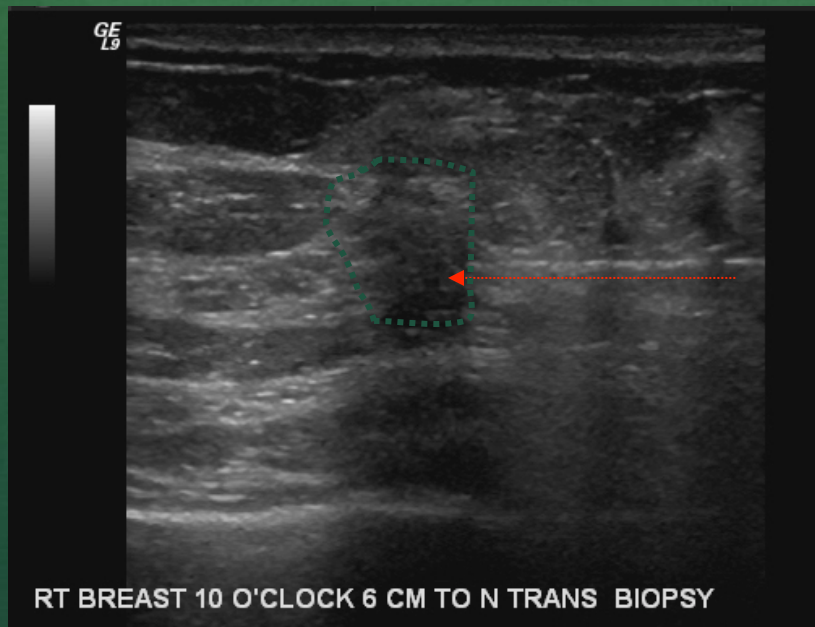


GE
L9

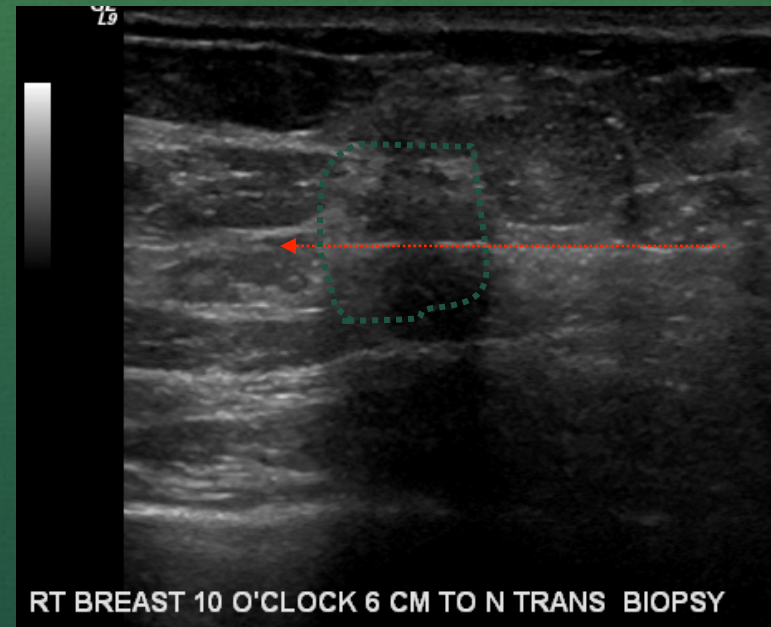


LT BREAST LONG 1 CM TO N 9 O'CLOCK

Biopsy Sampling Technique

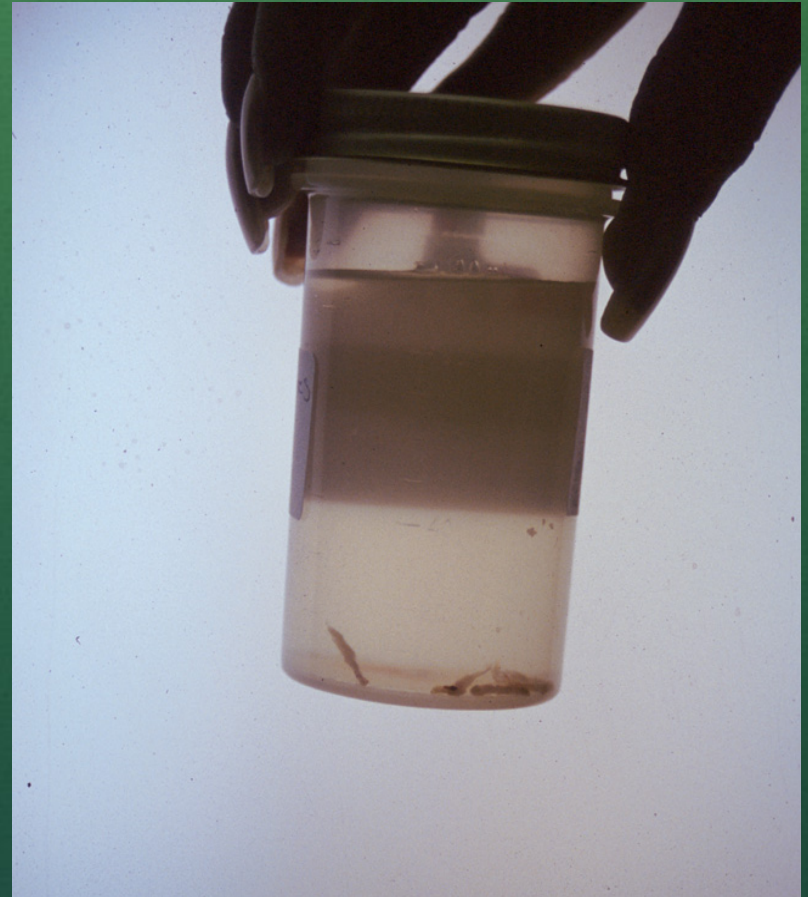


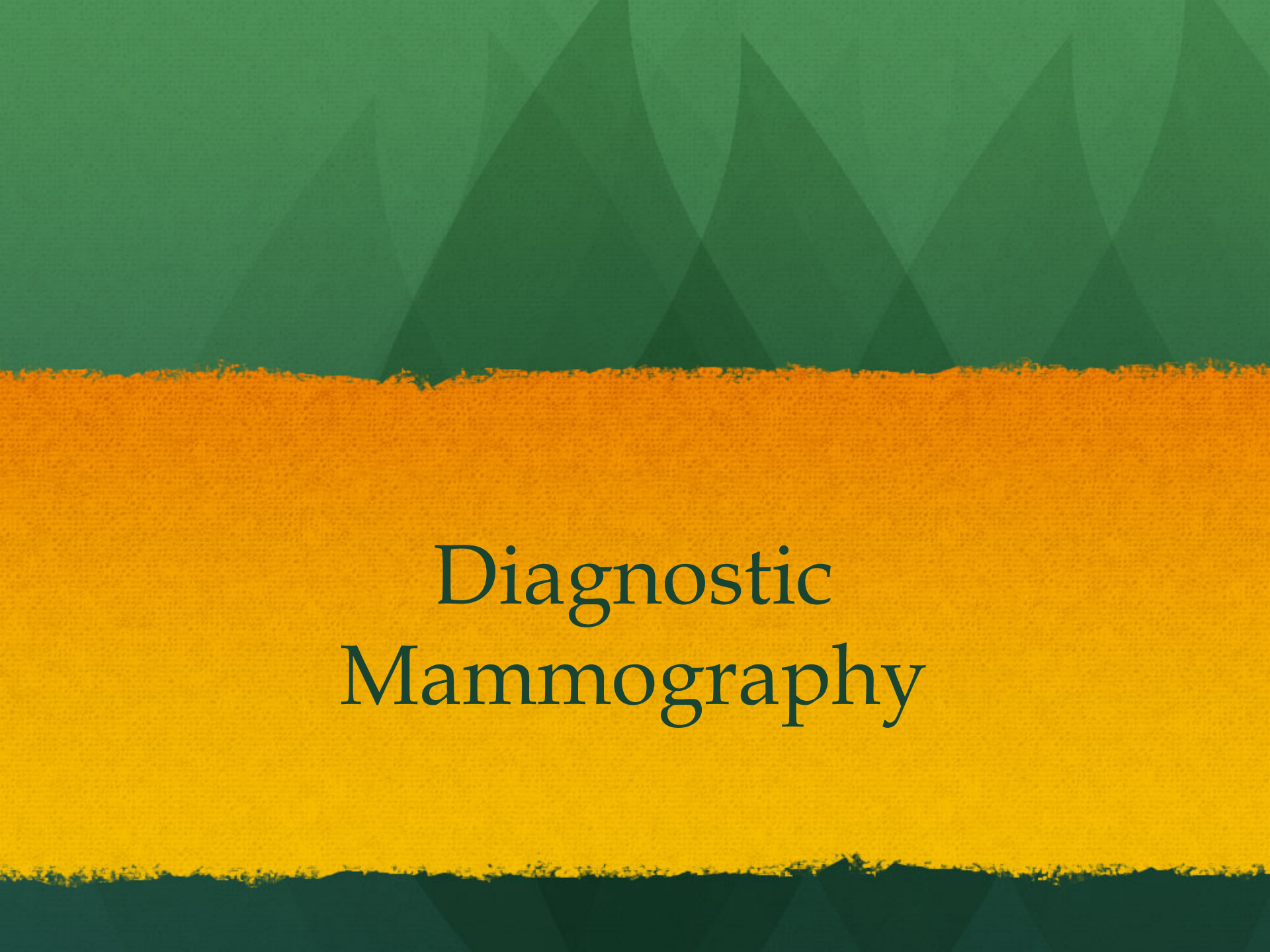
Pre Biopsy Image



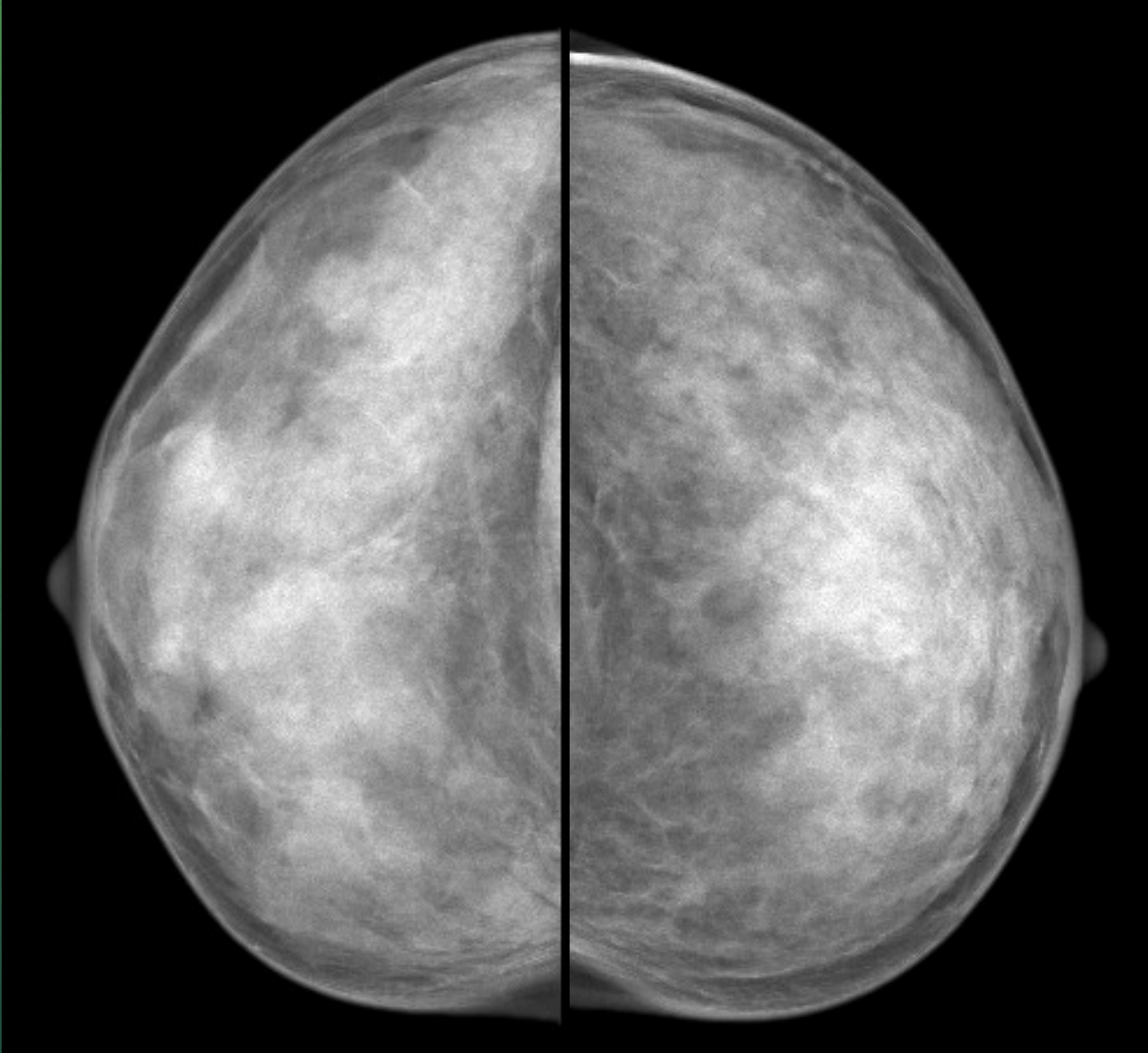
Post Biopsy Image

Specimen Collection



The background features a stylized mountain range in shades of green at the top and bottom. A wide, textured yellow band runs horizontally across the middle, resembling a torn paper effect. The title is centered within this yellow band.

Diagnostic Mammography



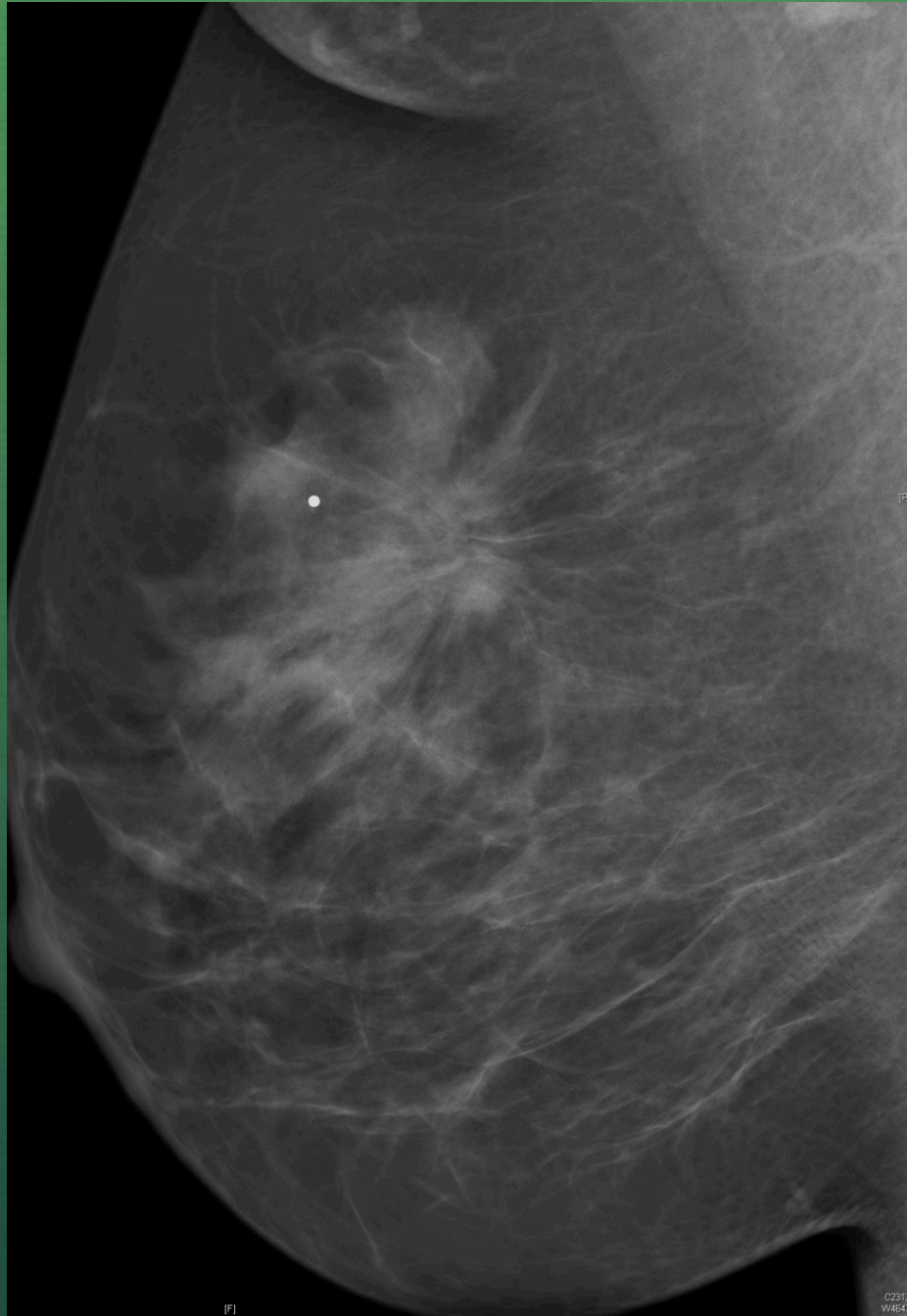
CC



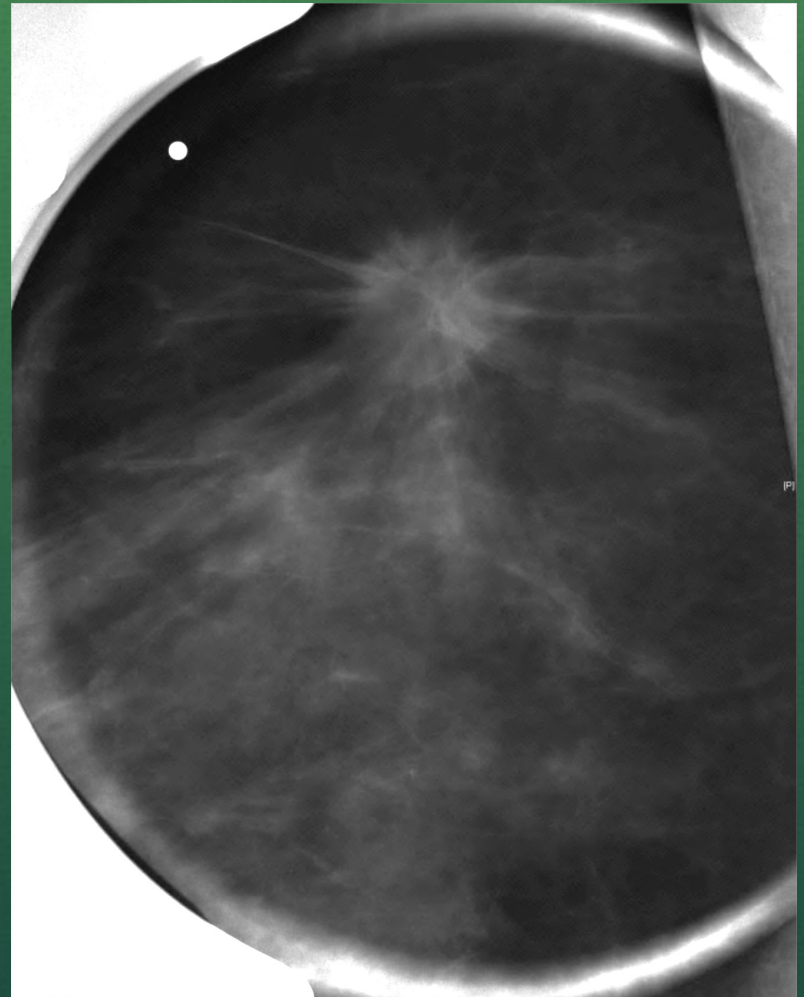
MLO



Diagnostic Mammography

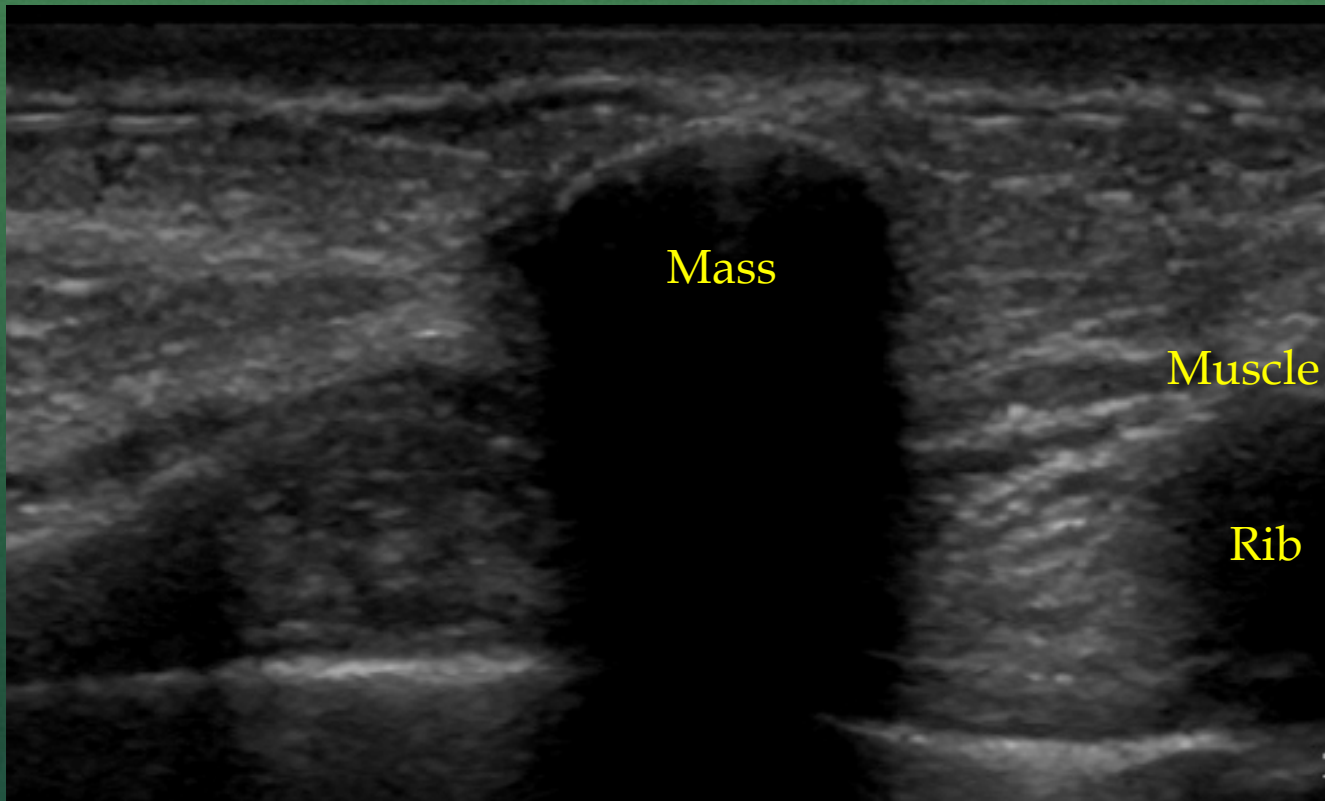


ML



ML SPOT MAG

Palpable Lump



Quality Control

- Communicating and Reporting
 - Breast Imaging Reporting and Data System (BI-RADS)
- Optimal reading environment
- Equipment
- Technical staff
- Access
- Minimize risk
 - Following patient outcomes
 - Minimize false positives and negatives

BI-RADS

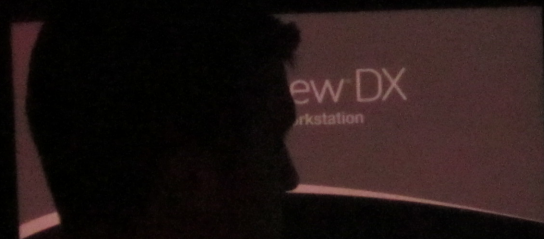
- ACR Breast Imaging Reporting and Data System (BI-RADS)
- Using BIRADS lexicon allows for more consistent, more accurate assessments and recommendations and supports tracking/medical audit of program

Key BI-RADS Components

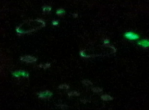
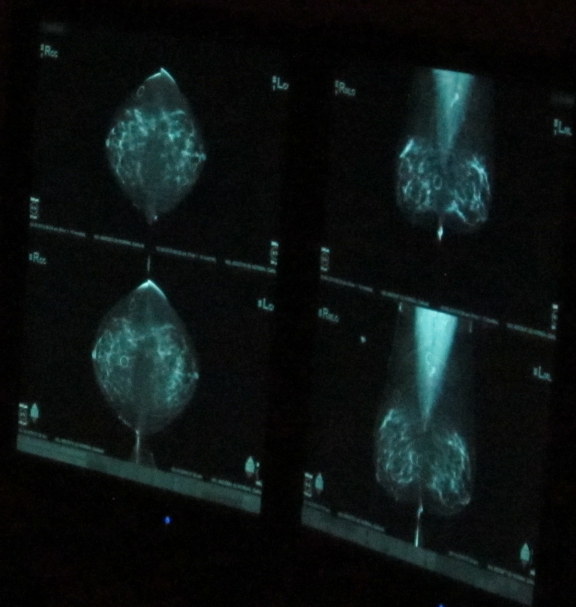
- Terms to describe lesions (lexicon)
- Terms for assessments and associated recommendations
- Guidelines for follow-up and outcome monitoring
 - Definitions for medical audit
 - Desirable goals in practice

Simplified BIRADS Report

<u>1. Finding</u>	Shape	Margin	Echogenicity	3. BI-RADS and Recommendation
<u>Mass</u>	Round/Oval	Circumscribed	Hyperechoic	0- Needs additional images
	Irregular	Not Circumscribed	Not Hyperechoic	1 – Negative-Clinical follow-up
<u>Normal Finding</u>	<u>2. Location:</u> Right Left Axilla Subareola _____o’clock _____cmfn Size:_____cm			2 – Benign – Clinical follow-up
<u>Special Cases:</u>				3 – Probably Benign – Short interval follow-up
Cyst				4 – Suspicious - FNA
Fat Necrosis				5 – Highly Suspicious - FNA
	Infection			
	Lymph Node			
	Galactoceles			



HOLOGIC



The background features a central horizontal band of bright yellow with a fine, grainy texture. Above and below this band are green, mountain-like shapes created from overlapping triangles of varying shades, ranging from a light sage green to a dark forest green. The edges between the yellow band and the green areas are irregular and torn, resembling the edges of a piece of paper.

The End