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Digital breast tomosynthesis in the practice clinic of radiology: A retrospective study

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Aim: Assess the position of DBT in preventive examinations of the breast, incorporate into the algorithm of breast examination methods. In a retrospective study, the aim is to assess the indications for DBT examination in women under the age of 50 and over 50 years of age.

Material and Methods: Retrospectively we processed DBT performed in 1291 women from January 2015 to April 2019. We evaluated the age of patients, numbers and types of projections, indications for the realization of tomosynthesis. The output was also the number of indicated biopsies, the number of realized biopsies. From the number of histologically verified carcinomas we divided these on the basis of histopathology and compared the representation of women under and over 50 years of age.

Results: The most common projection was a one-sided double-projection (626/1291). The most frequent indications were examination after mammography and sonography (585/1291), followed by differential diagnosis of lesions (519/2291). Biopsy was indicated in 460 cases. Of the 460 biopsies, 78 were positive. In the age group up to 40 years, 6 positives out of 23 indicated biopsies, in women between 41 and 49 years 15 were positive out of 174 and in women over 50 years of age 57 were positive out of 255 indicated biopsies. Invasive carcinomas were the largest group (57/78), then lobular (10/78) at least was DCIS (2/78).

Conclusion: DBT is not a screening method. In our department it serves as a complementary method to mammography, sonography and to solve the findings. The yield is higher in young women with dense breast, but there were more biopsies in women over 50 years of age. The greatest benefit of DBT was in the elimination of suspicion and termination of diagnosis. Patients returned to the screening/prevention algorithm.

Biography

Jana Slobodnikova from Faculty of the Health Care, Alexander Dubcek University in Trencin, Slovak Republic.