

BREAST CANCER:DIAGNOSIS WITHOUT SURGERY

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This Breast Unit is eighteen years old and works in a geographic area with a high incidence of breast cancer.

Every year it manages about one hundred and fifty new cases.

A strong attention to the scientific and technological up to date is considered necessary.

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Background: for a long time Surgery has been used to make both diagnosis and therapy.

- The technical and scientific improvements allow to reduce the role of Surgery during the diagnostic phase.
- This is very important in particular in presence of mammographic screening program.

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Material Method: since 2005 we have added the sistem VAB to the traditional diagnostic tools in the case of

- cluster of microcalcifications,
- asimmetric opacity,
- heterogeneous lesions identified by
B-RAD3/U3 B-RAD3/U4

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RESULTS: in 2012

315 surgical procedures were performed

18 cases (5.7%) need surgery because of discrepancies between instrumental tests

- in 2011, 302 surgical procedures
- 29 cases (10%) need surgery because of discrepancies between instrumental tests

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Surgical treatment is performed for

- breast cancer,
- lesions at risk of degeneration (LIN2 – DIN1b),
- papillary lesions,
- the fast-growing fibroadenomas,
- the galattophoritis

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CONCLUSION: the traditional diagnosis procedures accompanied by the VAB system allow in our experience to achieve two main objectives

- 1) proper diagnosis of benign diseases)
- 2) diagnosis of cancer at the earliest stage

With this multidisciplinary approach also the cost effectiveness is adequate