

Indeterminate breast lesions found in high-risk patients should be evaluated aggressively to exclude malignancy

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Short-term follow-up is often used to evaluate indeterminate breast lesions found on breast magnetic resonance imaging (MRI). However, researchers have found that indeterminate lesions (found in women with a high risk of breast cancer) should be evaluated sooner to exclude a possible malignancy, according to a study to be presented at the ARRS 2010 Annual Meeting in San Diego, CA.

Breast lesions that cannot be definitively classified as suspicious for malignancy or benign are considered indeterminate. "A short-term follow-up MRI, ultrasound, and/or mammographic investigation is usually recommended for indeterminate lesions found in high-risk women," said Martin Korzeniowski, MD, lead author of the study. "However, that may not be soon enough," said Korzeniowski. High-risk women include those who have breast cancer, a history of [breast cancer](#), or a genetic predisposition.

The study, performed at McMaster University in Hamilton, Canada, included 59 lesions in 55 patients that were identified on breast MRI as indeterminate. "Of those indeterminate lesions, a significant number (22 percent) were proven positive for malignancy on follow-up and subsequent [biopsy](#)," he said.

"In our study, the cancer yield was substantial for indeterminate lesions identified on initial contrast-enhanced breast MRI which suggests that those lesions should be evaluated more aggressively to exclude [malignancy](#) and increase one's chances for survival," said Korzeniowski.

Provided by American College of Radiology

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