

# Moderate link for automated, clinical breast density measures

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having dense breasts. Similar breast cancer associations were seen for clinical and automated measures: For extremely dense versus scattered fibroglandular densities, the odds ratios were 1.8, 1.9, and 2.3, for Volpara, Quantra, and BI-RADS classifications, respectively. Better discrimination of case status was seen for clinical BI-RADS assessment versus Volpara and Quantra BI-RADS classifications ( $C = 0.60$  versus 0.58 and 0.56, respectively).

"Automated and clinical assessments of [breast density](#) are similarly associated with [breast cancer risk](#) but differ up to 14 percent in the classification of women with [dense breasts](#)," the authors write.

One author disclosed financial ties to Gamma Medica.

**More information:** [Full Text \(subscription or payment may be required\)](#)

(HealthDay)—There is moderate correlation for automated and clinical assessments of breast density, according to a study published in the June issue of *Radiology*.

Kathleen R. Brandt, M.D., from the Mayo Clinic in Rochester, Minn., and colleagues evaluated 1,911 patients with [breast cancer](#) and 4,170 matched controls who underwent mammography. Digital mammograms were retrieved at a mean of 2.1 years before breast cancer diagnosis, and they generated the corresponding clinical Breast Imaging Reporting and Data System (BI-RADS) density classifications, as well as Volpara and Quantra density estimates.

The researchers observed moderate agreement between clinical BI-RADS [density](#) classifications and Volpara and Quantra BI-RADS estimates ( $\kappa = 0.57$  and 0.46, respectively). There were differences of up to 14 percent in dense tissue classification, with Volpara, Quantra, and BI-RADS classifying 51, 37, and 43 percent of women as

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