

TRA Imaging News

Printed For the Referring Providers of TRA Medical Imaging

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Evaluating Breast Disease in the Younger Patient



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The comprehensive work up of women under 35, who have a strong family history and/or are symptomatic of breast disease, can be somewhat confusing at best. Due to the dense nature of breast tissue in these women, and no nationally standardized guidelines regarding the use of mammography, questions commonly arise when younger patients present with symptoms.

The most common symptoms occurring in this younger population include:

- Breast pain
- Palpable lump(s)
- Nipple discharge

Additionally, patients with one or more symptoms who are pregnant, have a strong

familial history, or both, need to be evaluated with extra care.

Breast Pain

The most common symptom seen in younger women is atypical breast pain—pain not associated with hormonal cycles. Breast pain ranges from low-level to severe, and fortunately, is often due to a wide range of benign causes, which can be treated and observed clinically. Occasionally, it

is important to rule out more serious indications, beginning with a diagnostic mammogram, followed by an ultrasound at the radiologist's discretion. However,

the great majority of these evaluations are negative.

Breast pain can be associated with cysts. Although not as common in women under 30, they are best diagnosed with mammography or ultrasound. Cyst

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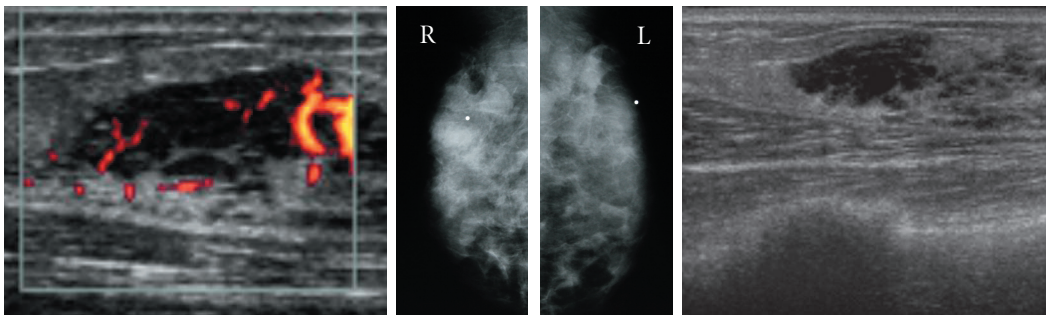
TRA Breast Ultrasound Receives Highest Accreditation Award

TRA Medical Imaging has achieved the highest level of accreditation in breast ultrasound and ultrasound-guided biopsy from the American College of Radiology (ACR).

The ACR awards accreditation to facilities for the achievement of high practice standards after peer-review evaluation of the practice. Evaluations are conducted by board-certified physicians and medical physicists who are experts in the field. They assess the qualifications of the personnel and the adequacy of the facility equipment. The surveyors report their findings to the ACR's Committee on Accreditation, which subsequently provides the practice with a comprehensive report.

Happy Thanksgiving

We will be closed November 24-25 so that our employees may spend time with family over the Thanksgiving holiday.



Case Study

Thirty-one year-old female presents with breast lumps. Bilateral ultrasound shows unusual pattern with what appears to be multiple areas of hypoechogenicity, possibly made up of numerous tiny cysts, the largest at 12 o'clock position of the right breast (left). Mammography images were obtained (middle) and patient was referred for bilateral ultrasound-guided core biopsies (right). Pathology reports positive lymphocytic infiltrate.



aspiration can also be a fast, easy way to both diagnose and remove the discomfort associated with a cyst.

Palpable Lumps

Due to the denseness of the breasts in this patient population, radiologists often prefer to study a palpable lump with breast ultrasound instead of mammography. *It is very important to avoid radiation to the young breast whenever possible.* Because the focus of the ultrasound is on the actual lump, the lesion can be better studied than with mammography, where surrounding dense breast tissue frequently obscures the lesions.

Nipple Discharge

One of the most alarming symptoms to patients is nipple discharge, which can result from a variety of medical conditions. Discharges can be unilateral, bilateral, from a single duct or multiple ducts and range in color from clear to yellow/brown to green or bloody. A primary breast cancer is rarely the cause of bilateral discharge and a benign large duct papilloma is often the source of unilateral discharge. Blood can be associated with early ductal cancer and should be addressed quickly.

Historically, galactography, or ductography, was the standard method for evaluating nipple discharge, however its etiology

usually remained indeterminate. Current standard of practice is to begin with diagnostic mammography followed by ultrasound when discharge is present. Now, galactography is utilized only occasionally if required by a breast surgeon to direct surgical resection.

Pregnancy and Breast Cancer

Pregnancy brings additional challenges to the work up of the young female presenting with a palpable mass. The hormonally-induced increase in breast density makes mammography often uninterpretable, paired with the added risk of radiation, making ultrasound an appropriate tool to begin your work up. Because it is somewhat complex, we will address pregnancy and breast symptoms in a future issue of this newsletter.

If you have a questionable patient

At TRA Medical Imaging, our mammographers are happy to discuss complex cases with you to help you best meet your patients' needs. Breast cancer occurs in only 0.3 percent of women in their early 20s and teens. However, it does exist and symptoms should always be addressed. For more information about working up your patients, or for Scheduling, please call (253) 761-4200, or toll-free (866) 761-4200.

TRA Imaging News

TRA Imaging News is produced bimonthly for referring providers of TRA Medical Imaging. It is designed to aid in the understanding of TRA and its services.

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TRA Medical Imaging is a local partnership of radiologists formed in 1943. The radiologists of TRA Medical Imaging serve Mary Bridge Children's Hospital, St. Francis Hospital, St. Joseph Medical Center and Tacoma General Hospital and its outpatient imaging centers.

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