



Breast MRI
*for a clearer picture
of your health.*



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BREAST MRI

A VALUABLE SCREENING TEST FOR HIGH RISK WOMEN.

The average woman has a 13% risk of breast cancer over her lifetime. A woman considered “high risk” has a 20% or greater lifetime risk. According to the American Cancer Society guidelines, high risk women should undergo both mammography and breast MRI screenings annually starting at age 30, and continuing as long as she is in good health.

While not recommended as a routine screening tool for all women, screening breast MRI is more sensitive than mammography, but can also miss some cancers—like DCIS—that are generally detected by mammography. As a result, breast MRI is recommended in combination with mammography or ultrasound.

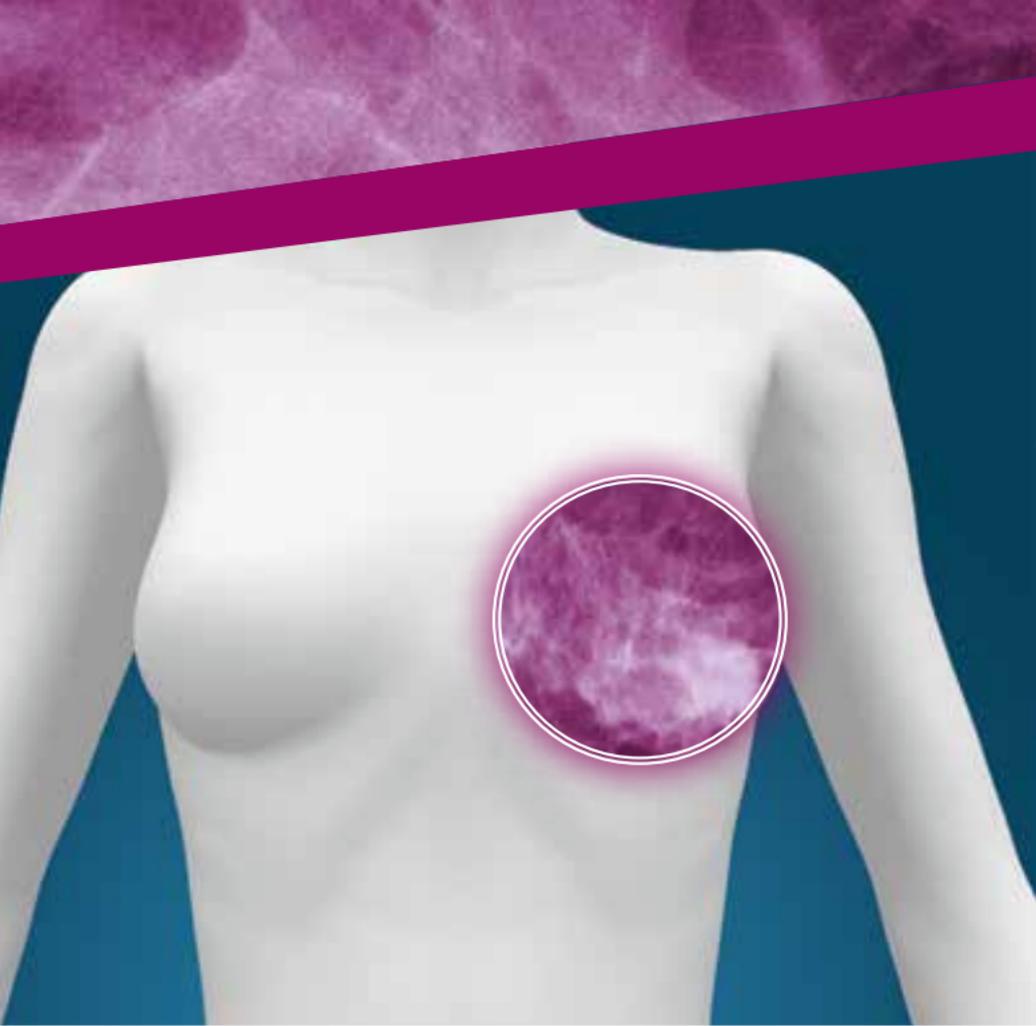


WHAT IS BREAST MRI?

Magnetic Resonance Imaging (MRI) of the breast has been used for years in evaluating mammogram abnormalities and identifying early breast cancer, especially in high-risk women. This painless, radiation-free procedure uses highly sophisticated magnet, electrical impulses and a computer to create detailed images of the breast which, just like a digital mammogram, can be studied from different angles.

Breast MRI (magnetic resonance imaging) is the most sensitive test to detect early breast cancer in high risk women. It can show abnormalities in dense breast tissue that may be missed with mammography. It is also useful for determining the extent of cancer if there is more than one lesion.





“A recently published study¹ breast MRI detected 60 additional breast cancers that were not detected on mammography, which included 40 invasive cancers. This is important, because it demonstrates MRI’s ability to detect cancers that are more aggressive.”

Dr. Angela Sroufe,
Radiology & Imaging Specialists

¹ Christiane K. Kuhl, Kevin Strobel, Heribert Bieling, Claudia Leutner, Hans H. Schild, Simone Schrading. Supplemental Breast MR Imaging Screening of Women with Average Risk of Breast Cancer. Radiology, 2017; 161444 DOI: 10.1148/radiol.2016161444

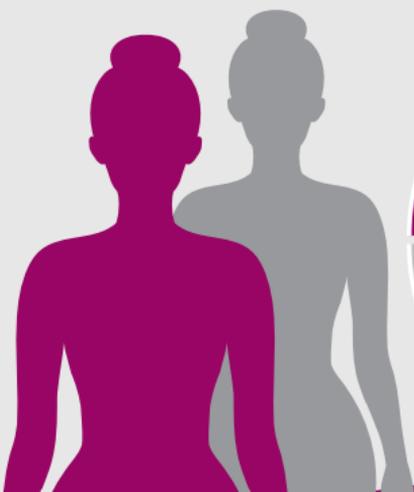
HOW DO I KNOW IF I'M HIGH RISK?

Your doctor has determined your risk. If you have a primary care doctor, he or she may be using one or more tools to evaluate your risk. These may include an analysis of family history, age at childbirth, personal history of breast or ovarian cancer, previous breast biopsy, high bone density, exposure to radiation from other cancer treatments and other factors.

You have undergone a risk assessment questionnaire. There are several software-based models for calculating risk, and while these are usually administered by a healthcare professional, some women choose to take them on their own. For a more comprehensive assessment, we recommend the Tyrer-Cuzick model as it is the most sensitive software-based risk assessment model for identifying breast cancer risk.

You have had genetic testing. Certain inherited mutations in either the BRCA-1 and BRCA-2 genes put a woman at higher risk for breast and ovarian cancer. Genetic testing helps identify these women, who have between a 40-85% chance of developing breast cancer in their lifetime, and are more likely to develop it at a younger age.

You have dense breast tissue. While the reasons are not yet fully understood, women with denser breasts are at an increased risk for breast cancer. Furthermore, the ability to detect breast cancer on a standard mammogram is more challenging in women with dense breasts, as the fibrous tissue of a dense breast can easily conceal smaller breast cancers.



A woman considered
"high risk" has a

20% or greater
lifetime risk
of breast cancer.



IS BREAST MRI RIGHT FOR ME?

According to the guidelines, annual breast MRI is recommended for women who have:

- Greater than 20% lifetime risk (women at 15% and higher are encouraged to talk with their doctors about the possibility of adding breast MRI to their annual screening)
- Have a known BRCA1 or BRCA2 gene mutation
- Have a first-degree relative with BRCA1 or BRCA2 gene mutation and have not had genetic testing themselves
- Have had radiation therapy to the chest for another type of cancer when between the ages of 10 and 30 years
- Have a genetic disease such as Li-Fraumeni syndrome, Cowden syndrome, or Bannayan-Riley-Ruvalcaba syndrome, or have one of these syndromes in first-degree relatives.

The American Cancer Society also notes that women with dense breast tissue (as measured by a mammogram) have an increased risk for developing breast cancer.

***For more information,
talk to your doctor or call
(863) 688-2334.***

www.womens-imaging.com





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