



# Breast MRI

*at INVISION / Sally Jobe*

INVISION / Sally Jobe has been leading breast MRI for more than 10 years after one of our radiologists was the first to initiate breast MRIs in Denver in 1995. This has allowed our sites to develop expert technologists to ensure the best image acquisitions. In addition, specialty trained radiologists not only interpret the results but also direct patient treatment as part of our renowned network of Sally Jobe Breast Centres.

**A new study by The American College of Radiology Imaging Network (ACRIN), supported by the National Cancer Institute (NCI), appears in the March 29, 2007 issue of the *New England Journal of Medicine*.** “The goal of this study included determining whether the use of MRI could improve upon clinical breast exams and mammography in detecting breast cancer in the opposite breast at the time of the initial breast cancer diagnosis.”

The study recruited 1,007 women who had a recent diagnosis of cancer in one breast from 25 institutions – including INVISION / Sally Jobe in Denver.

## The Study Concluded:

- Given the established rates of mammography and clinical breast exams for detecting cancer in the opposite, or contralateral breast, adding an MRI scan to the diagnostic evaluation effectively doubled the number of cancers immediately found in these women.
- The MRI found a variety breast cancers. In general, those cancers were at an earlier stage than those found by other types of exam. In this study, 60 percent of the cancers were invasive, and 40 percent were *ductal carcinoma in situ* (DCIS) – an early form of cancer that has not affected surrounding tissue. None of the cancers discovered in the study had spread to the lymph nodes.

Researchers hope that with breast MRI's strong ability to predict the absence of a tumor, they can avoid some unnecessary mastectomies and provide women with more reassurance that the breast is disease-free.

## Changes in Practice Management NEW ACS GUIDELINES: Breast MRIs Recommended for High-Risk Women

**Screening MRI is now recommended for women with 20% or greater lifetime risk of breast cancer.\***

### Women at High-Risk Include:

- 2+ relatives with breast or ovarian cancer or 1+ relative with two cancers
- Early onset of breast cancer (before age 50) in a family member
- Breast cancer in a male relative
- Ashkenazi Jewish heritage with family history of breast or ovarian cancer
- Previous diagnosis of breast or ovarian cancer
- BRCA1 or BRCA2 carrier or 1st degree relative with BRCA1/BRCA2 mutations

\*The American Cancer Society published Guidelines for Breast Screening with MRI as an Adjunct to Mammography on March 28, 2007.

[www.invisionimaging.com](http://www.invisionimaging.com)

*Sally Jobe*  
BREAST CENTRE

at INVISION

## Patient Expectations

Breast MRIs require unique imaging software, a special coil to appropriately focus the magnetic field and an experienced technologist that can direct a specific sequence necessary for breast MRIs.

A woman can expect the actual MRI to take about 30 minutes. She will lie on her stomach, feet first into the machine, with her hands reaching out above her head. An IV is placed before the MRI begins and sedation is available for those concerned about small spaces. A support person may be in the room to help alleviate anxiety during the MRI. At INVISION / Sally Jobe, both breasts are always imaged as part of a breast MRI to improve the chance of catching cancer nodules in either breast. For women in a high-risk category, breast MRIs are often covered by insurance.



Breast MRIs are a more sensitive imaging tool to detect early breast cancer, but do not replace routine mammograms. Mammograms are still the primary screening tool to protect against breast cancer. Breast MRIs are recommended for women newly diagnosed with breast cancer and for women with risk factors that place them at a higher likelihood of getting breast cancer.

## Several programs are available to calculate a woman's breast cancer risk.

- Gail Model at <http://www.cancer.gov/bcrisktool/>
- Claus model (BreastCa for Palm, version 1.0, copyright 2001) <http://www.palmgear.com/index.cfm?fuseaction=software.showsoftware&prodID=29820>
- BRCAPRO Version 4.3, <http://www4.utsouthwestern.edu/breasthealth/cagene/default.asp>

## Why INVISION / Sally Jobe?

Sally Jobe Breast Centres at INVISION have built a foundation of trust with hundreds of thousands of women along the Front Range of Colorado. In addition to mammography, INVISION / Sally Jobe provides a comprehensive program of care, including breast MRI, multiple methods of breast biopsy, and ultrasound- and MRI-guided breast procedures, performed by radiologists who specialize in breast care.

The experts at INVISION / Sally Jobe typically find unsuspected breast cancers in the opposite breast during a breast MRI in 6-7% of women newly diagnosed with breast cancer. Lesions as small as 3-5 millimeters can be detected through breast MRI.

Breast MRI is recommended in women with newly diagnosed breast cancer and women at high risk. It is a very sensitive test which can occasionally produce false positive findings. This is considered reasonable in the above mentioned patients but is the reason it is not recommended for the general screening population.

Physicians may direct questions to Dr. Terese Kaske, medical director of the Sally Jobe Comprehensive Breast Centre, or arrange for further education via INVISION marketing representatives. Breast MRIs can be scheduled by calling 720-493-3700.

More information is also available at [www.InvisionImaging.com](http://www.InvisionImaging.com).



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