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Eearly detection and prevention of breast cancer among women at Reproductive age in Beni Suef city

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B reast cancer is the most common type of cancer among women worldwide. The chance of a woman having breast cancer during her life is one in eight. Early detection is key in the treatment of breast cancer. Early detection practices (EDP) consist of clinical breast examination (CBE) and mammography. Breast self-examination (BSE) is no longer generally recommended, but many women still perform it. Aim of this study was to screen women at reproductive age in Beni Suef city for early detection and prevention of breast cancer. An intervention study and purposive sample was used. Women in reproductive age raised women awareness regarding methods of early tumors detection, preparation, implementation and evaluation of the outreach program provided, referral of suspected cases and guide to places of early diagnosis and treatment in accordance with each case.

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Role of contrast enhanced spectral digital mammography in follow up of breast cancer patients after the conservative surgery and its impact on management

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Objective: To evaluate the diagnostic accuracy of adding contrast enhanced spectral digital mammography to the conventional sonomammography in detection of recurrent breast cancer after conservation surgery

Patients & Methods: This study included 40 female patients presenting with indeterminate/suspicious breast lump after breast conservative surgery. Their age varied from 34 to 60 years (mean age: 50.3 years). All of the cases (40/40 cases) were subjected to digital mammography and B-mode ultrasonography followed by dual energy contrast enhanced spectral mammography (CESM) within 2 weeks. Results of histo-pathological examinations of surgical or biopsy specimens were obtained and served as the gold standard.

Results: The surgical and pathological results of our patients revealed 12/40 (30.0%) benign lesions and 28/40 (70.0%) malignant lesions. The sonomammography results were 18/40 (45.0%) benign lesions (BIRADS 3) and 22/40 (55.0%) malignant lesions (BIRADS 4 and 5). 20 lesions were true positives, 2 lesions were false positive, 8 lesions were false negatives and 10 lesions were true negatives with sensitivity of 71.4% with specificity of 71.4%. The CESM results were 14/40 (35%) benign lesions (BIRADS 3) and 26/40 (65%) malignant lesions (BIRADS 4 and 5). 24 lesions were true positives, 2 lesions were false positive, 3 lesions were false positive, 10 were true negatives and 4 lesions were false negatives with sensitivity of 85.7% and specificity of 71.4%.

Conclusion: CESM is a promising tool for increasing the sensitivity and the diagnostic accuracy of ultrasound and mammography in follow up of patients with breast conservative surgery.

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