COMPARING SONOGRAPHIC MEASUREMENTS OF MALIGNANT UNIFOCAL TUMOURS WITH PENUMBRA FEATURES AGAINST HISTOLOGY

BY SAMANTHA WEST

East Lancashire Hospitals NHS Trust A University Teaching Trust

INTRODUCTION AND BACKGROUND

Pictorial review to determine if measurement of the echogenic penumbra is more accurate when compared to measuring the nidus of the tumour against the gold standard histology.

The accurate measurement and assessment of breast cancers pre-operatively is essential, as it is used to determine the surgical management of patients with breast cancer.

AIMS AND OBJECTIVES

Review and compare the accuracy of the sonographic breast tumour with the nidus and echogenic penumbra and compare against the gold standard histological tumour size.

Compare results with current literature. Determine if any significant differences in accuracy, Impact on surgical pathway & Potential to change practice.

Currently measure:

Hypoechoic BLACK area =Nidus = pale green line for nidus Measurement

PURPLE area indicates = Hyperechoic Penumbra = emerald green line for penumbra measurement

Method

Retrospective study - 7 months data collection 3 readers

Data set - NBSS crystal report

Compare the ultrasound measurement against histology

Tumour to be unifocal with obvious echogenic penumbra **Exclusions:**

Multi-focal, DCIS, B3 lesions and asymmetries

Results

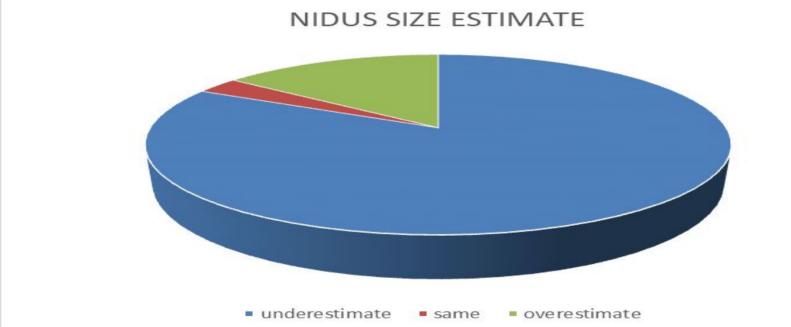
Nidus size

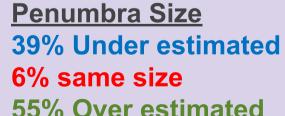
82% underestimate

3% same size

15% overestimated

When compared to Histological size.

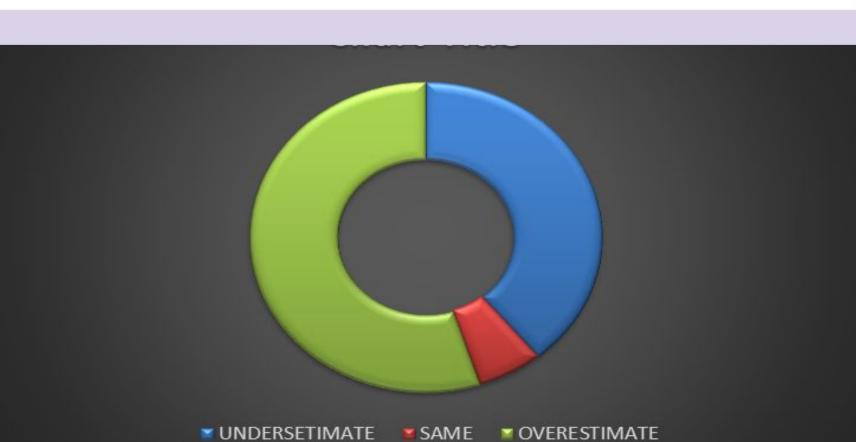




55% Over estimated

When compared to Histological size.

*104 in the study: 33 excluded in the study due to being either unfit for surgery or having neoadjuvant treatment

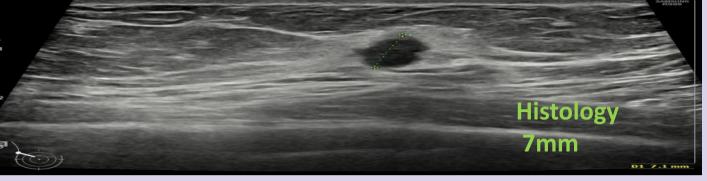


Discussion

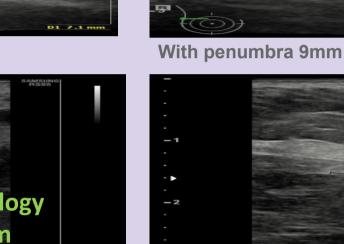


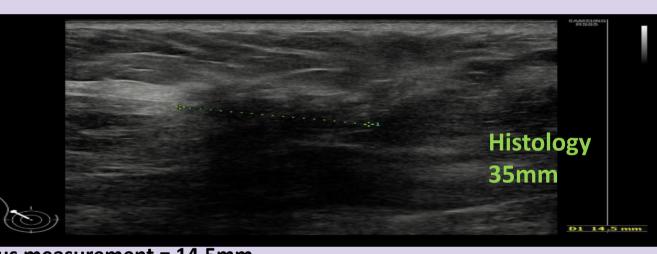
10.4mm nidus measurement



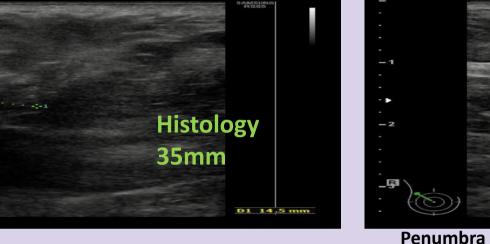


Nidus measurement = 7mm





Nidus measurement = 14.5mm





Penumbra measurement = 48mm

Nidus measurement = 38mm

<u>Underestimation & Overestimation:</u>

- Stiffness of tumour
- Unclear margins of sonographic results from extensive intraductal components
- Posterior Acoustic shadowing hides the posterior edge of the tumour, especially in smaller tumours
- Size of tumour if large then whole of tumour may not be wholly imaged on the screen therefore making it difficult to measure full area of tumour
- Different interpretation of tumour size; the difference in edge perception, which also leads onto the edge perception of the penumbra around the tumour
- Measuring the actual penumbra can be difficult; where does it start and finish

Summary

- Measurement can be subjective as each operator may perceive the measurement differently
- Measuring the actual penumbra can be difficult; where does it start and finish
- Sometimes the acoustic shadowing from dense tumours can make the measurement of tumour size difficult and therefore less accurate
- Overall, our accuracy mean measurement is within 5mm of the histological size, which is same parameters as current literature

Conclusion

When the penumbra is included in overall measurement, neither the nidus measurement or the penumbra measurement appears to be nearer the histological measurement.

The penumbra measurement is not an accurate measurement parameter when it is compares to the histological tumour dimension.

2.Son, J.H., Jung, H.K., Song, J.W., Baek, H.J., Doo, K.W., Kim, W., Kim, W. Kim, W.M., Kim, W.W., Lee, J.S. and Cho, E.Y., 2016. Incidentally detected breast lesions on chest CT with US correlation: a pictorial essay. Diagnostic and Interventional Radiology, 22(6), p.514. 3.Hussain, A., Gordon-Dixon, A., Almusawy, H., Sinha, P. and Desai, A., 2010. The incidence and outcome of incidental breast lesions detected by computed tomography. The Annals of The Royal College of Surgeons of England, 92(2), pp.124-126. 4.Moyle, P., Sonoda, L., Britton, P. and Sinnatamby, R., 2010. Incidental breast lesions detected on CT: what is their significance?. The British journal of radiology, 83(987), pp.233-240. 5.Barrett, A., Kevane, B., Hall, P., Ní Áinle, F. and Breslin, T., 2017. Screening for Malignancy in Patients With Unprovoked Venous Thromboembolism: A Single-Center Retrospective Case Series. Clinical and Applied 7 6.Howard, L.S. and Hughes, R.J., 2013. NICE guideline: management of venous thromboembolic diseases and role of thromboephilia testing. Thorax, 68(4), pp.391-393.

7.D'Agostino, C., Zonzin, P., Enea, I., Gulizia, M.M., Ageno, W., Agostoni, P., Azzarito, M., Becattini, C., Bongarzoni, A., Bux, F. and Casazza, F., 2017. ANMCO Position Paper: long-term follow-up of patients with pulmonary thromboembolism. European Heart Journal Supplements, 19(suppl D), 8. Veerasuri, S. and Massey, H., 2019, December. Review of a new referral pathway for incidental breast lesions detected on Cross-sectional imaging. In BREAST CANCER RESEARCH (Vol. 21). CAMPUS, 4 CRINAN ST, LONDON N1 9XW, ENGLAND: BMC