



Complete Summary

GUIDELINE TITLE

The use of magnetic resonance imaging of the breast (MRIB) for screening of women at high risk of breast cancer.

BIBLIOGRAPHIC SOURCE(S)

American Society of Breast Disease. The use of magnetic resonance imaging of the breast (MRIB) for screening of women at high risk of breast cancer. Dallas (TX): American Society of Breast Disease; 2004 Jun 28. 5 p. [40 references]

GUIDELINE STATUS

This is the current release of the guideline.

COMPLETE SUMMARY CONTENT

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SCOPE

DISEASE/CONDITION(S)

Breast cancer

GUIDELINE CATEGORY

Risk Assessment
Screening

CLINICAL SPECIALTY

Family Practice
Internal Medicine
Medical Genetics
Obstetrics and Gynecology

Oncology
Radiation Oncology
Radiology
Surgery

INTENDED USERS

Allied Health Personnel
Physicians

GUIDELINE OBJECTIVE(S)

To review current publications and expert opinion on the screening of women at high risk for breast cancer with magnetic resonance imaging of the breast (MRIB)

TARGET POPULATION

Women at high risk for breast cancer

INTERVENTIONS AND PRACTICES CONSIDERED

Screening of Women at High Risk for Breast Cancer

1. Magnetic resonance imaging of the breast (MRIB) as an adjunct to:
 - Mammography
 - Clinical breast examination
 - Ultrasonography

MAJOR OUTCOMES CONSIDERED

Sensitivity and specificity of diagnostic tests

METHODOLOGY

METHODS USED TO COLLECT/SELECT EVIDENCE

Searches of Electronic Databases
Searches of Unpublished Data

DESCRIPTION OF METHODS USED TO COLLECT/SELECT THE EVIDENCE

Not stated

NUMBER OF SOURCE DOCUMENTS

Not stated

METHODS USED TO ASSESS THE QUALITY AND STRENGTH OF THE EVIDENCE

Expert Consensus (Committee)

RATING SCHEME FOR THE STRENGTH OF THE EVIDENCE

Not applicable

METHODS USED TO ANALYZE THE EVIDENCE

Review

DESCRIPTION OF THE METHODS USED TO ANALYZE THE EVIDENCE

The Consensus Committee of the American Society for Breast Disease established a subcommittee working group, which reviewed current publications and expert opinion on the screening of women at high risk for breast cancer with magnetic resonance imaging of the breast (MRIB).

METHODS USED TO FORMULATE THE RECOMMENDATIONS

Expert Consensus

DESCRIPTION OF METHODS USED TO FORMULATE THE RECOMMENDATIONS

Not stated

RATING SCHEME FOR THE STRENGTH OF THE RECOMMENDATIONS

Not applicable

COST ANALYSIS

A formal cost analysis was not performed and published cost analyses were not reviewed.

METHOD OF GUIDELINE VALIDATION

Peer Review

DESCRIPTION OF METHOD OF GUIDELINE VALIDATION

The recommendations were distributed by e-mail to more than 600 members of the American Society of Breast Disease (ASBD) who were invited to comment. The recommendations were then revised to reflect this peer review.

RECOMMENDATIONS

MAJOR RECOMMENDATIONS

1. Magnetic resonance imaging of the breast (MRIB) is an adjunct to mammography, clinical breast examination, and ultrasonography for breast cancer detection in women at high risk of breast cancer based on family history or BRCA mutations.
2. MRIB is not recommended for breast cancer screening in the general population.
3. Although published studies have evaluated yearly screening in conjunction with mammography, clinical breast examination, and in some cases, ultrasonography, the appropriate screening interval for MRIB is not yet determined.
4. At this time there are no data on the use of MRIB for breast cancer screening of women at high risk based on personal history of breast cancer, previous chest irradiation, lobular carcinoma in situ, atypical hyperplasia, or mutations other than BRCA.
5. Limitations of MRIB are related to technical, professional, and biological factors, as well as availability. Standards related to equipment, scanning protocols, interpretation, MRI-guided biopsies and MRI-guided needle localization are presently under development by the American College of Radiology and other societies. Implementation of these performance standards is expected to continually increase the importance of MRIB.
6. Women should be advised of the benefits and limitations of MRIB.
7. The guideline committee supports and encourages prospective clinical trials of MRIB for surveillance of women at high risk for breast cancer.

CLINICAL ALGORITHM(S)

None provided

EVIDENCE SUPPORTING THE RECOMMENDATIONS

TYPE OF EVIDENCE SUPPORTING THE RECOMMENDATIONS

The type of evidence supporting the recommendations is not specifically stated.

BENEFITS/HARMS OF IMPLEMENTING THE GUIDELINE RECOMMENDATIONS

POTENTIAL BENEFITS

Improved screening of women at high risk for breast cancer based on family history or BRCA mutations

POTENTIAL HARMS

Not stated

IMPLEMENTATION OF THE GUIDELINE

DESCRIPTION OF IMPLEMENTATION STRATEGY

An implementation strategy was not provided.

INSTITUTE OF MEDICINE (IOM) NATIONAL HEALTHCARE QUALITY REPORT CATEGORIES

IOM CARE NEED

Living with Illness
Staying Healthy

IOM DOMAIN

Effectiveness
Patient-centeredness

IDENTIFYING INFORMATION AND AVAILABILITY

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ADAPTATION

Not applicable: The guideline was not adapted from another source.

DATE RELEASED

2004 Jun 28

GUIDELINE DEVELOPER(S)

American Society of Breast Disease - Disease Specific Society

SOURCE(S) OF FUNDING

American Society of Breast Disease

GUIDELINE COMMITTEE

Expert Committee on Screening of Women at High Risk of Breast Cancer

COMPOSITION OF GROUP THAT AUTHORED THE GUIDELINE

Committee Members: Amy P. Early, MD, Buffalo Medical Group, Williamsville, New York, *Chair*; Julio A. Ibarra, MD, Orange Coast Memorial Medical Center, Fountain Valley, California; Kenneth H. Eckert, Jr., MD, Kaleida Breast Center, Women and Children's Hospital, Buffalo, New York; David M. Euhus, MD, University of Texas Southwestern Medical Center, Dallas, Texas; Steven E. Harms, MD, University of Arkansas, Little Rock, Arkansas; Richard W. Reitherman, MD, Newport Diagnostic

Center, La Canada, California; Eva Rubin, MD, Montgomery Radiology Associates, Montgomery, Alabama

FINANCIAL DISCLOSURES/CONFLICTS OF INTEREST

Not stated

GUIDELINE STATUS

This is the current release of the guideline.

GUIDELINE AVAILABILITY

Electronic copies: Not available at this time.

Print copies: Available from the American Society of Breast Disease, PO Box 140186, Dallas, Texas 75214; Phone: (214) 368-6836

AVAILABILITY OF COMPANION DOCUMENTS

None available

PATIENT RESOURCES

None available

NGC STATUS

This NGC summary was completed by ECRI on August 16, 2004. The information was verified by the guideline developer on September 14, 2004.

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