

More information is available:

There are many risk models to calculate one's lifetime risk for breast cancer, for example the National Cancer Institute has a model on their website to calculate one's personal risk: www.cancer.gov/bcrisktool/

For more information about genetic testing for breast and ovarian cancer please refer to the National Cancer Institute website: www.cancer.gov/cancertopics/genetic-testing-for-breast-and-ovarian-cancer-risk

To learn more about hereditary breast and ovarian cancer, visit FORCE: Facing Our Risk of Cancer Empowered, Inc., a nonprofit organization at: www.facingourrisk.org

See the WRA website for more information on breast MRI and other studies: www.washingtonradiology.com

WRA Breast MRI Centers

Accredited by the American College of Radiology

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Scheduling Appointments

Washington Radiology provides imaging services for patients upon referral from a physician. Patients are seen by appointment. However, emergencies do occur and we make every attempt to accommodate these cases. To schedule your breast MRI study at Washington Radiology please call:

(703) 280-9800

09/09

Am I a candidate for yearly screening with Breast MRI?



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What is MRI?

MRI stands for Magnetic Resonance Imaging (MRI), a non-invasive imaging method that shows the inside of the body without the use of X-rays or radiation. MRI generates high-resolution pictures that appear as slices of the body's anatomy. These highly detailed images are produced using a large magnet, radio waves and a computer. MRI is also capable of producing images in a large number of projections throughout the body including the brain, nerves, spinal cord, muscles, bones and joints, abdominal and pelvic organs and the breasts.

What Is Breast MRI?

Breast MRI uses MRI technology for the detection, evaluation and follow-up of breast cancer. Many studies have shown that it may be the most sensitive technique currently available for the detection of breast cancer. It is important to note that breast MRI does not replace annual screening mammography, as some cancers may only be seen on mammography. Currently, breast MRI serves as an adjunct to mammography and ultrasound.

The injection of intravenous contrast material, called gadolinium, is necessary for the performance of a breast MRI examination. There are limitations in who can receive intravenous gadolinium. These include, but are not limited to, those with an allergic reaction to gadolinium solution and those with a significantly decreased kidney function. Please contact your doctor if you think you may not be a candidate to receive gadolinium.

What are the American Cancer Society guidelines for screening with Breast MRI?

In 2007 the American Cancer Society (ACS) published guidelines for the use of Magnetic Resonance Imaging to screen for breast cancer¹. They recommended annual breast MRI, in addition to annual mammography, in women with the following risk factors:

1. Those with a lifetime risk for breast cancer of 20-25% or greater. *Please refer to the back cover of this brochure for more information on risk assessment.*
2. Those who carry a BRCA1 or BRCA2 gene mutation. BRCA1 and BRCA2 are human genes that belong to a class of genes known as tumor suppressor genes.

Mutation of these genes has been linked to hereditary breast and ovarian cancer. *For more information on genetic testing please refer to the back cover of this brochure.*

3. Those who have not undergone genetic testing themselves but who do have a first degree relative with a BRCA1 or BRCA2 mutation. A first degree relative includes your mother, father, aunts and uncles, sisters, brothers and grandparents (on mother's or father's side).
4. Those with a history of radiation to the chest between ages 10-30 years.
5. Those with the very rare syndromes including Li-Fraumeni, Cowden or Bannayan-Riley-Ruvalcaba and their first-degree relatives.

The ACS concluded that there is insufficient evidence to recommend for or against MRI in the following women:

1. Those with a lifetime risk for breast cancer of 15-20%.
2. Those with a personal history of breast cancer, including Ductal Carcinoma In Situ (DCIS).
3. Those with a previous diagnosis of Atypical Lobular Hyperplasia (ALH) and/or Lobular Carcinoma In Situ (LCIS)
4. Those with heterogeneously or extremely dense breasts on mammography.

The American Cancer Society recommended against screening with breast MRI in women who have a less than 15% lifetime risk to develop breast cancer.

¹ Saslow D., Boetes C., Burke W., et al. American Cancer Society Guidelines for Breast Screening with MRI as an Adjunct to Mammography. *CA Cancer J Clin* 2007; 57; 75-89.

About Washington Radiology Associates, PC

Since 1948, Washington Radiology has been a leader in radiology and medical imaging services in the metropolitan area. Our practice is composed of 26 physicians and more than 200 staff members. Radiologists are board-certified, and have specialty expertise in areas such as women's imaging, CT/MRI, Neuroradiology, PET/CT and Nuclear Medicine.