

BI-RADS

Breast Imaging Reporting and Data System

Ats Vare

II a radioloogia resident



Breast Imaging Reporting and Data System

American College of Radiology

Esimene väljaanne 1993. a → viies väljaanne 2013. a

Mammograafia / ultraheli / magnetresonantstomograafia

Eesmärgid:

- Uuringute kirjeldamise standardiseerimine
- Ühtse leksikoni rakendamine
- Klinitsistidega suhtlemise hõlbustamine
- Tulemuste jälgimise hõlbustamine

Uuringu näidustus

- Sõeluuring / diagnostiline / jälgimine

Rindade struktuur

Oluliste leidude kirjeldus

- Mass
- Lubjastused
- Strooma deformatsioonid
- Asümmeetriad

Võrdlus varasemate uuringutega

Hinnang

- BI-RADS 0-6

Edasine käsitlus

- Tagasikutse / jälgimine / biopsia / ...

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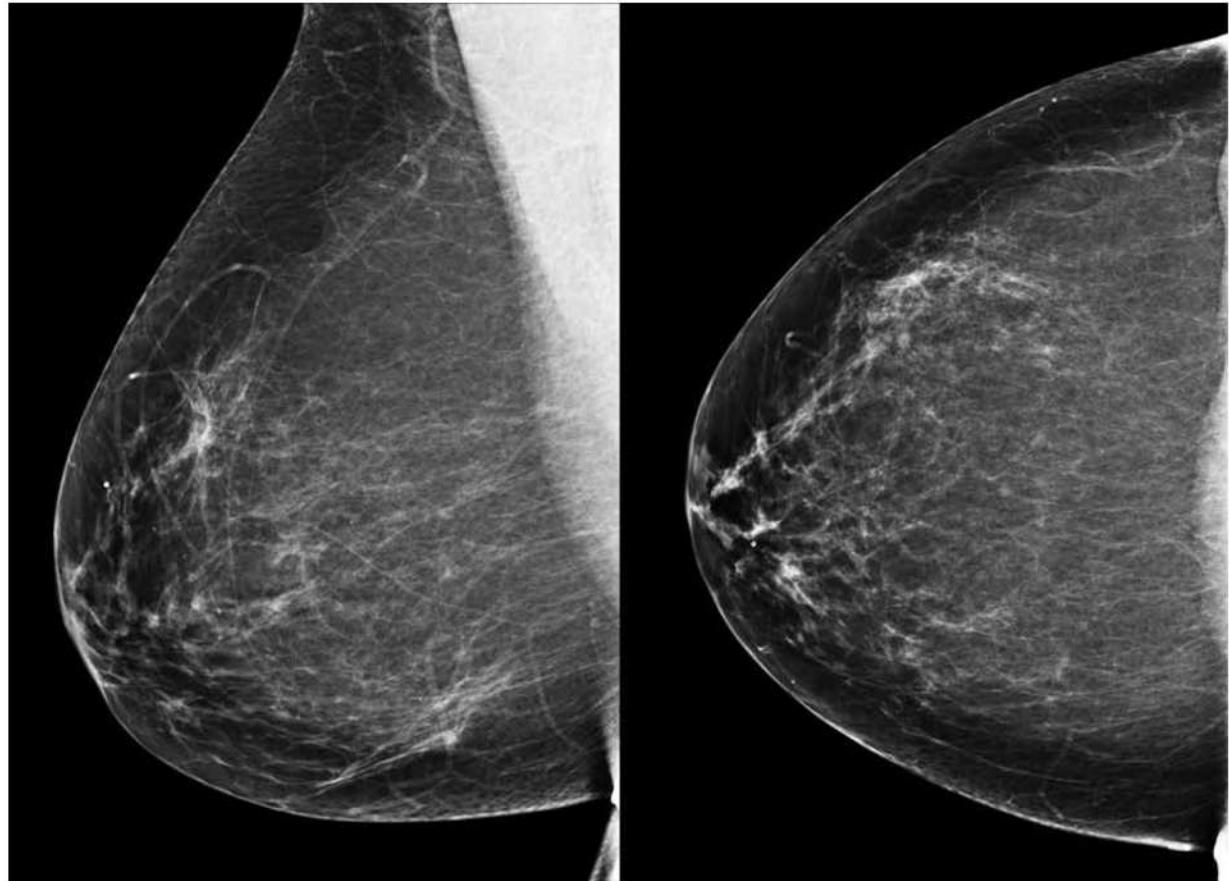
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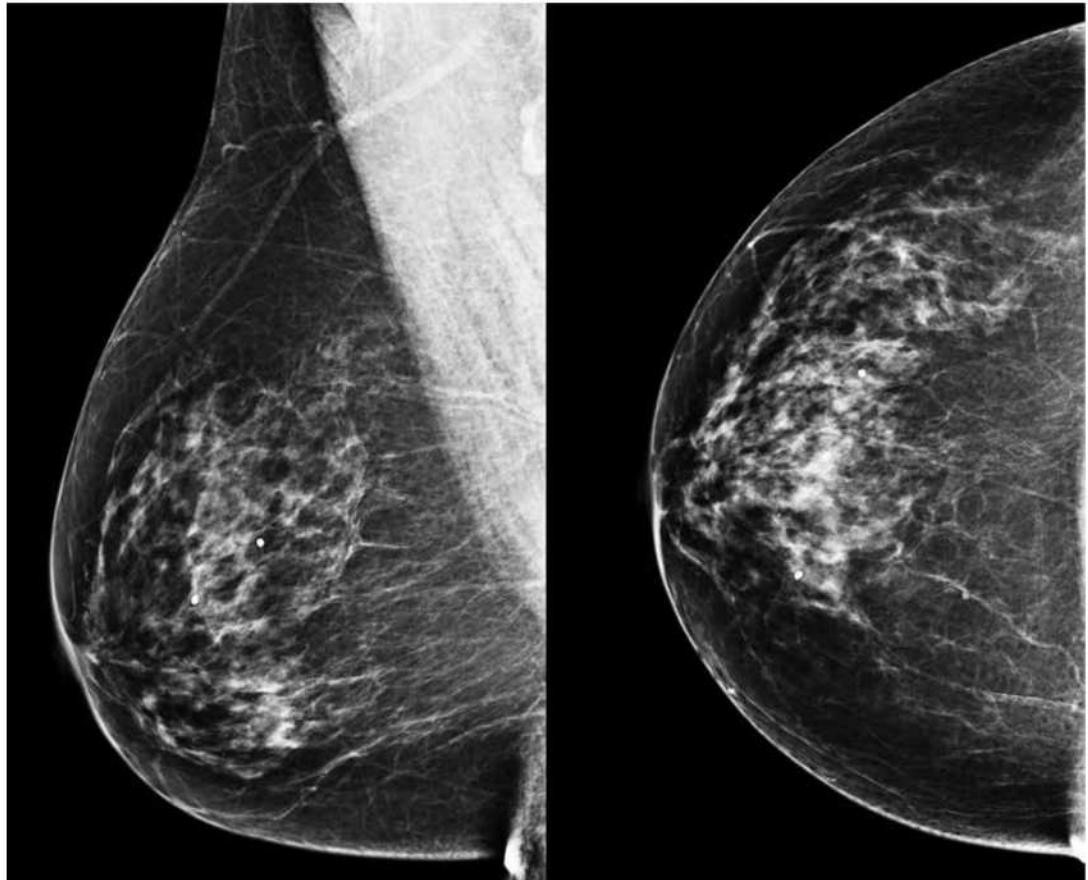
Rindade struktuur

- a. *The breasts are almost entirely fatty.*
- b. *There are scattered areas of fibroglandular density.*
- c. *The breasts are heterogeneously dense, which may obscure small masses.*
- d. *The breasts are extremely dense, which lowers the sensitivity of mammography.*



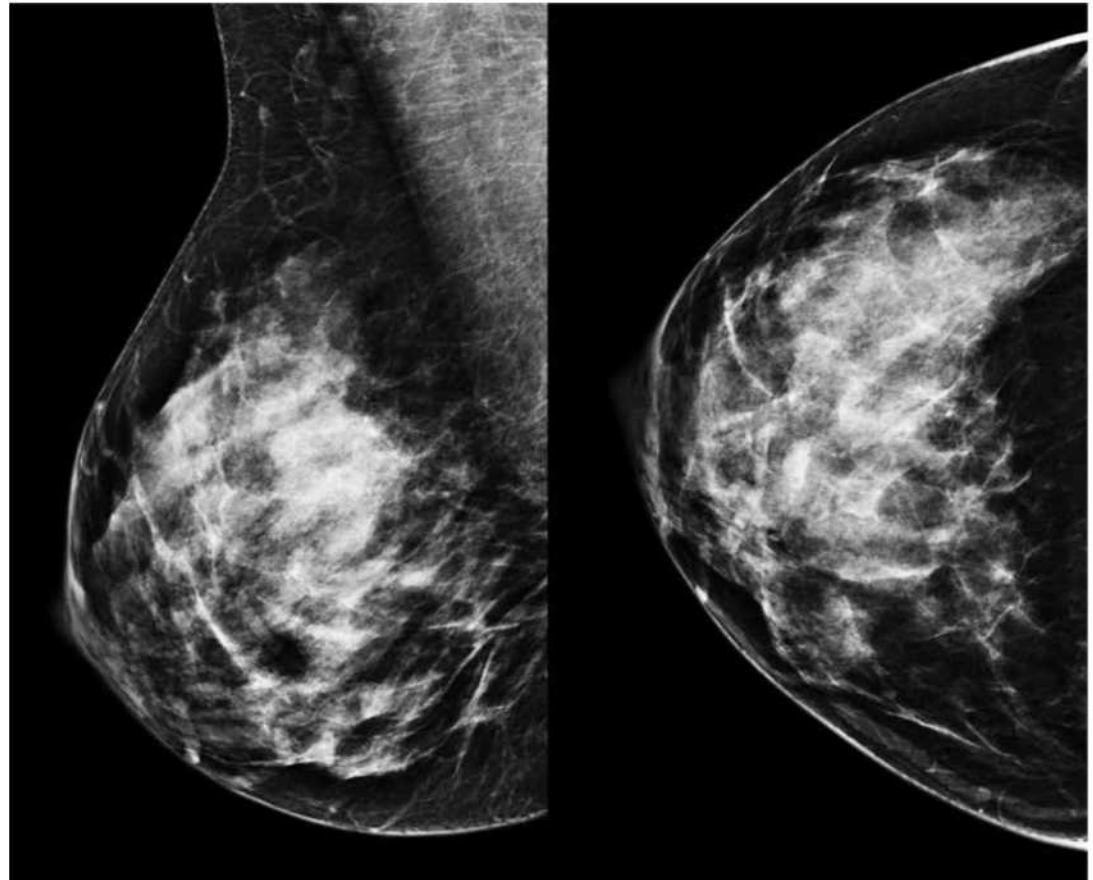
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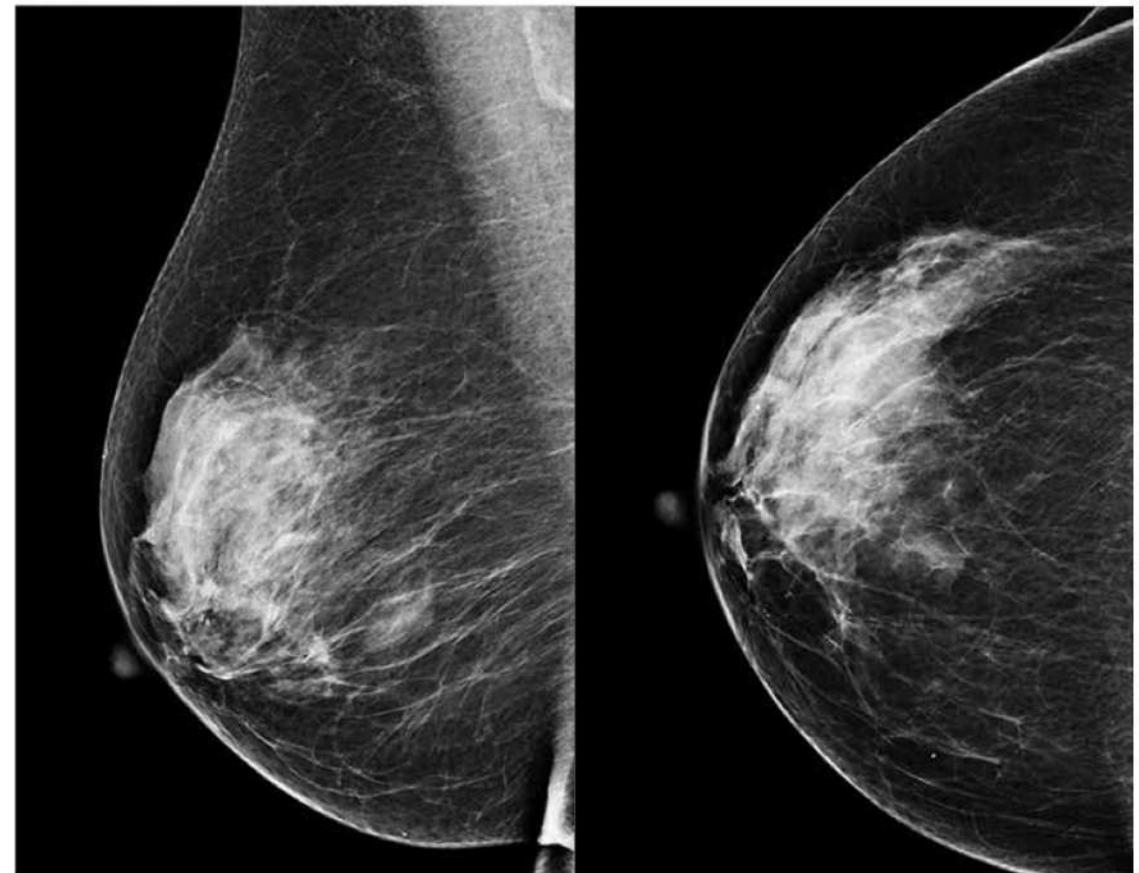
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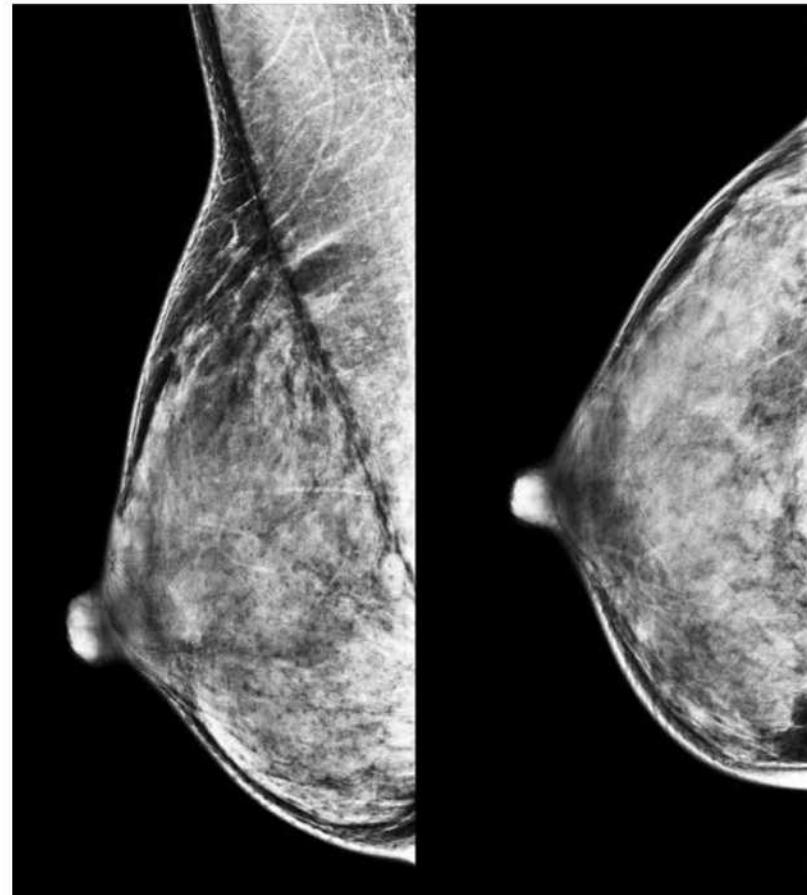
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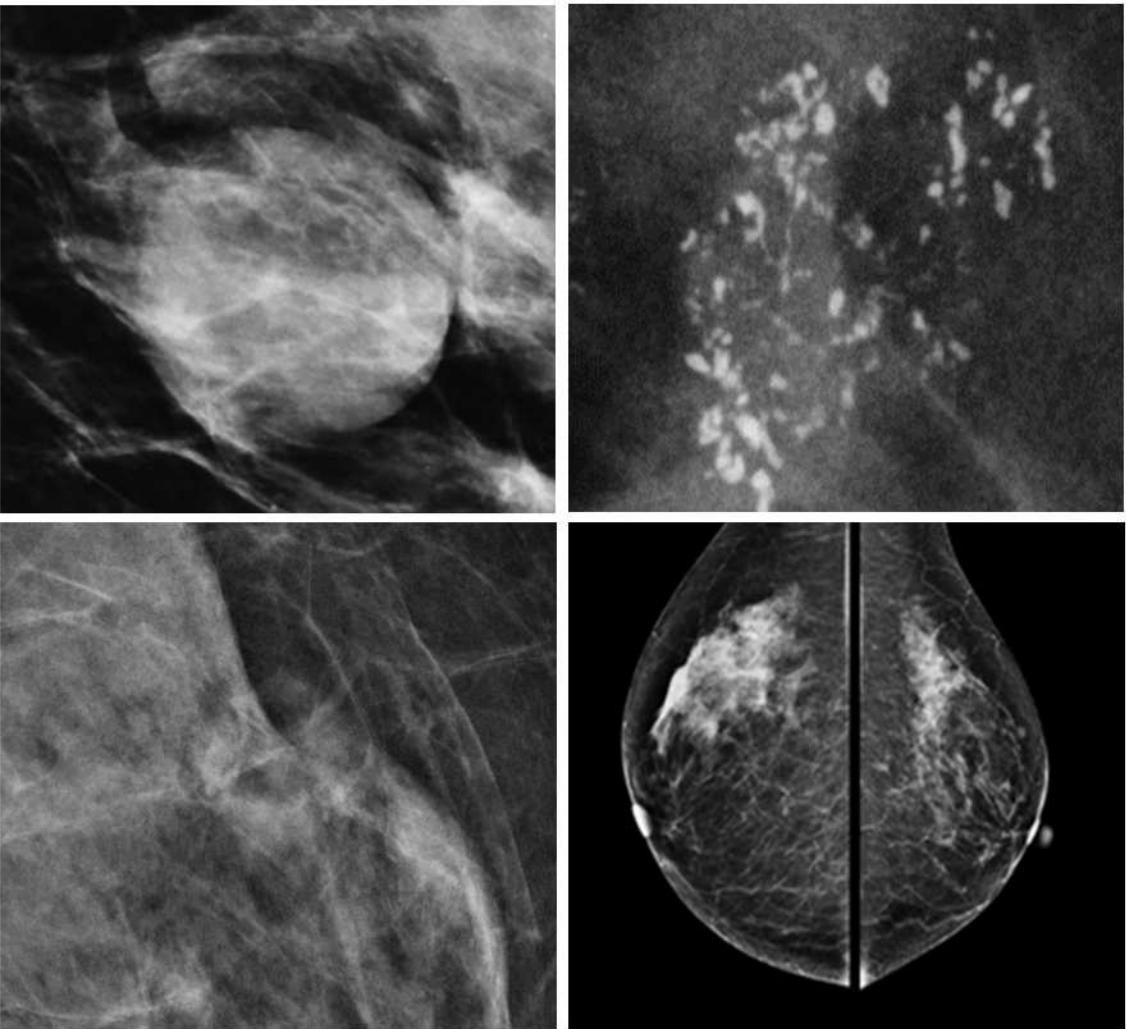
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Oluliste leidude kirjeldus

- Mass
 - Lubjastused
 - Strooma deformatsioon
 - Asümmeetriad
-
- Intramammaarne lümfisõlm
 - Nahalesioon
 - Üksik laienenud piimajuha



Mass

- Lokalisatsioon

- Lateralus
- Kvadrant / kellaosuti suund
- Sügavus
- Kaugus nibust

- Suurus

- Tihedus

- Rasva sisaldav
- Madala tihedusega
- Näärme koega sarnase tihedusega
- Kõrge tihedusega

- + Massiga seotud lubjastused
- + Strooma deformatsioon, turse; piimajuhade muutused; naha paksenemine ja/või rektratsioon

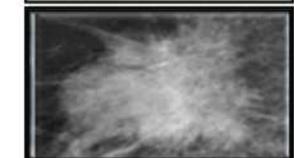
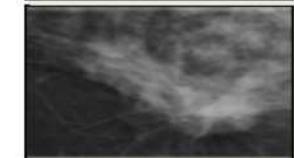
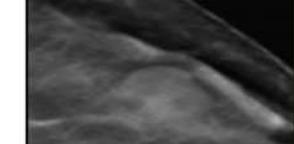
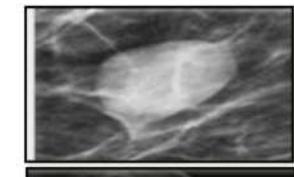
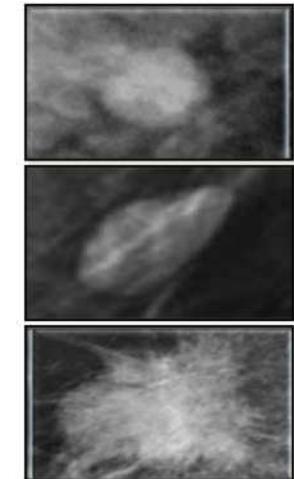
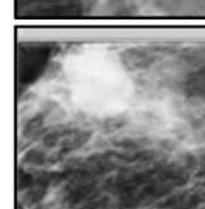
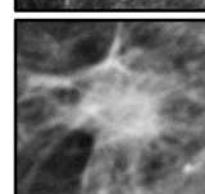
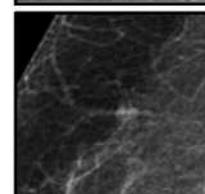
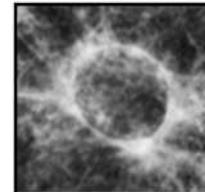
- Morfoloogia

- Kuju

- Ümar
- Ovaalne
- Ebakorrapärasne

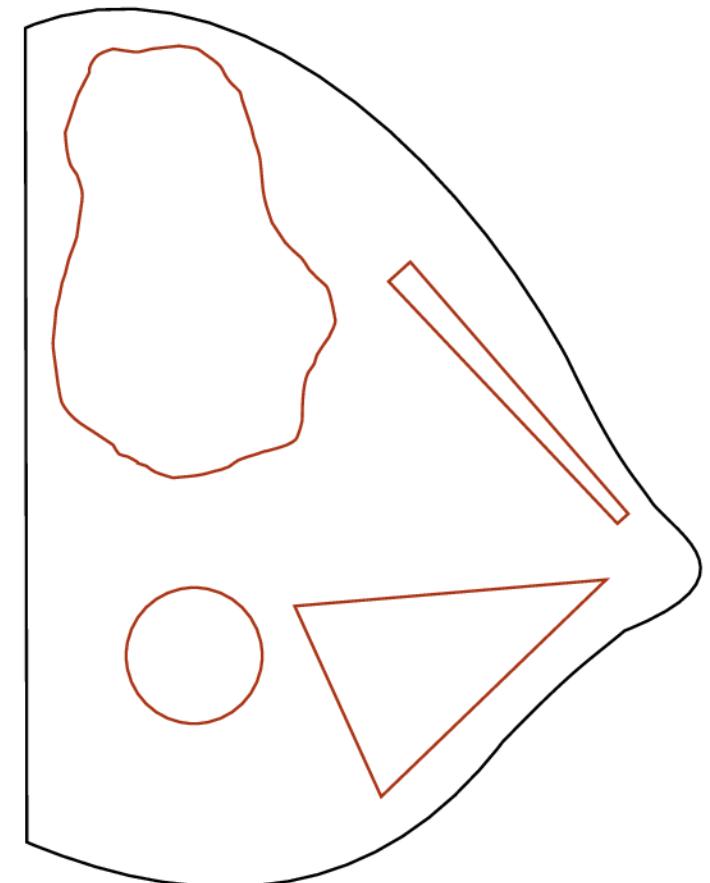
- Kontuur

- Piiritletud
- (Osaliselt) varjatud
- Mikrolobulaarne
- Ebaselgelt piirdunud
- Kiirjas

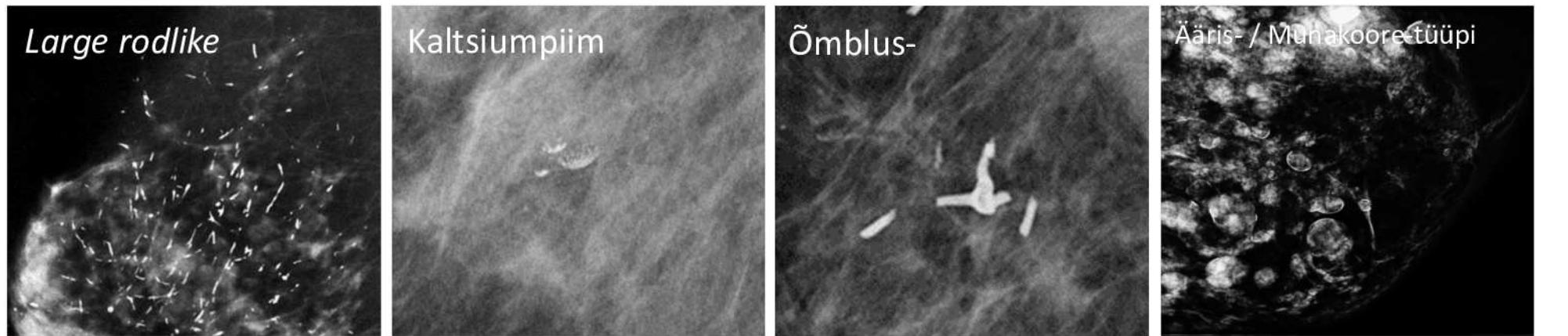
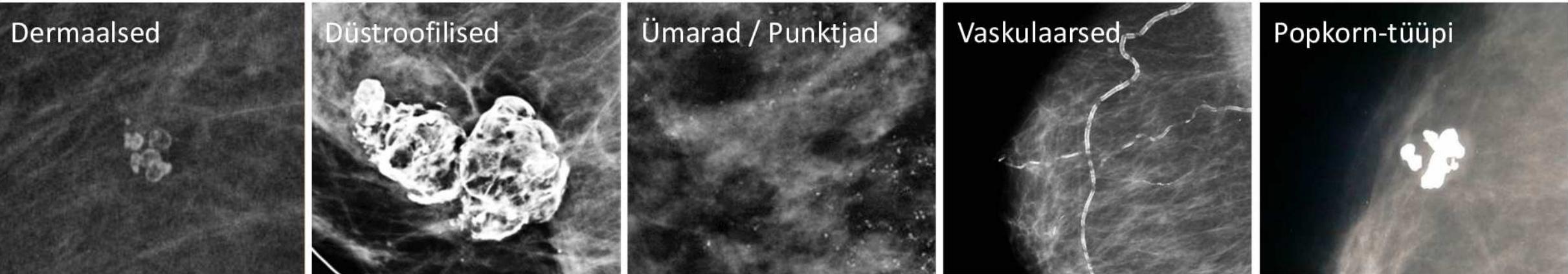


Mikrolubjastuste paiknemine

- Difusne
- Regionaalne
 - Hajusalt suurel alal ($> 2\text{cm}^3$) ning mitte juhade kulgu mööda
- Rühmitatud
 - ≥ 5 mikrolubjastust väikesel alal (1 cm^3 , max läbimõõt 2 cm)
- Lineaarne
- Segmentaalne
 - Mikrolubistuste paiknemine juhade kulgu mööda



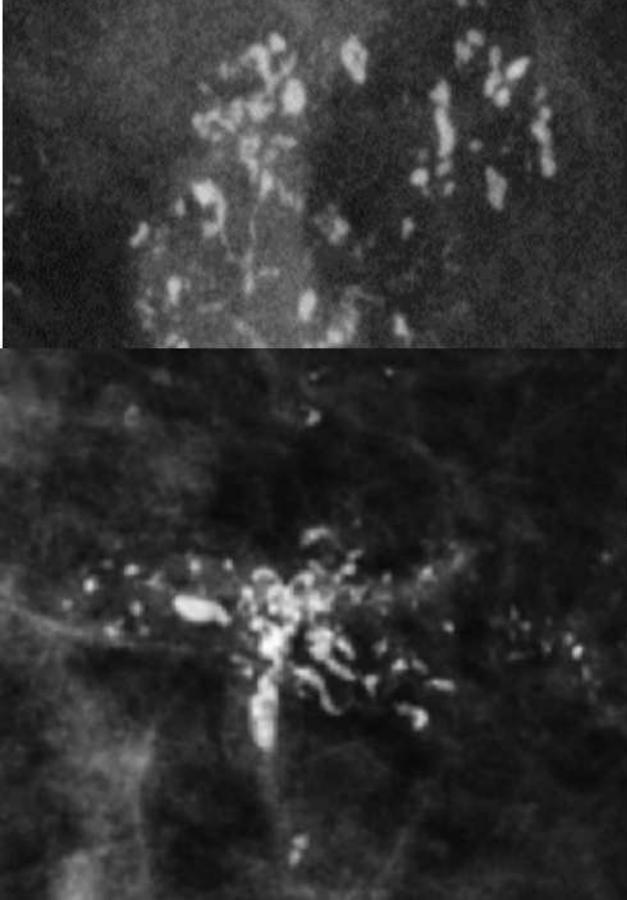
Beniigsed mikrolubjastused



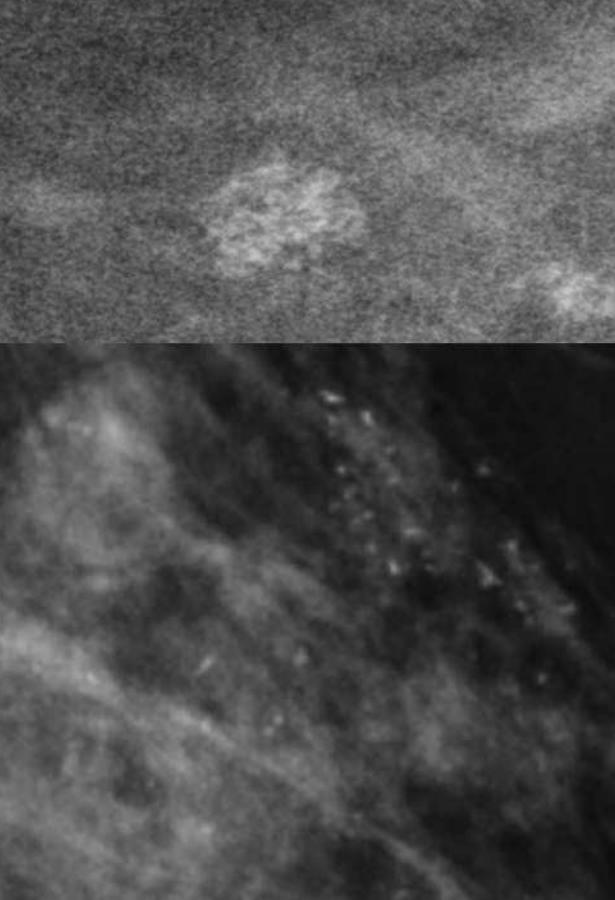
Kahtlased mikrolubjastused



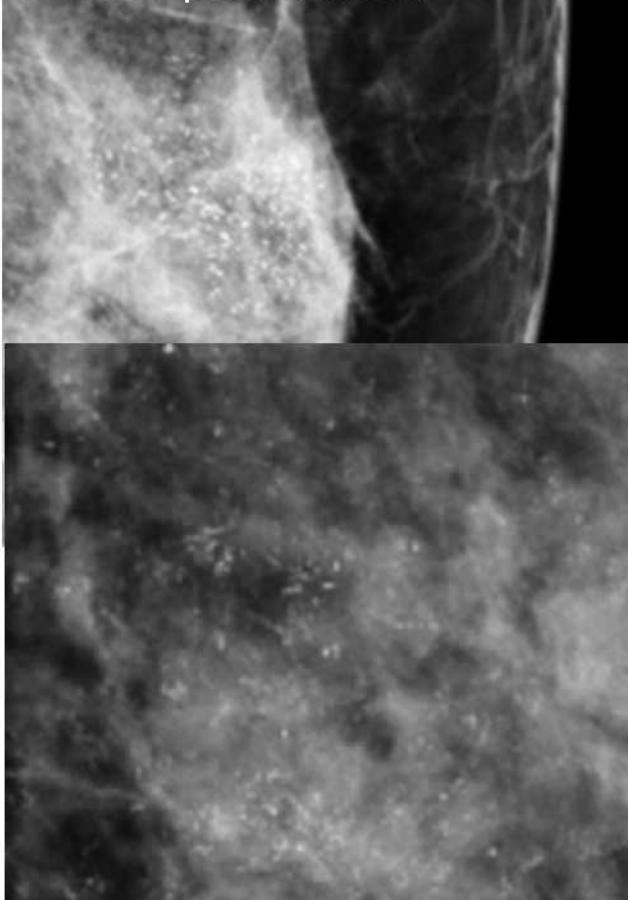
Jämedad heterogeensed



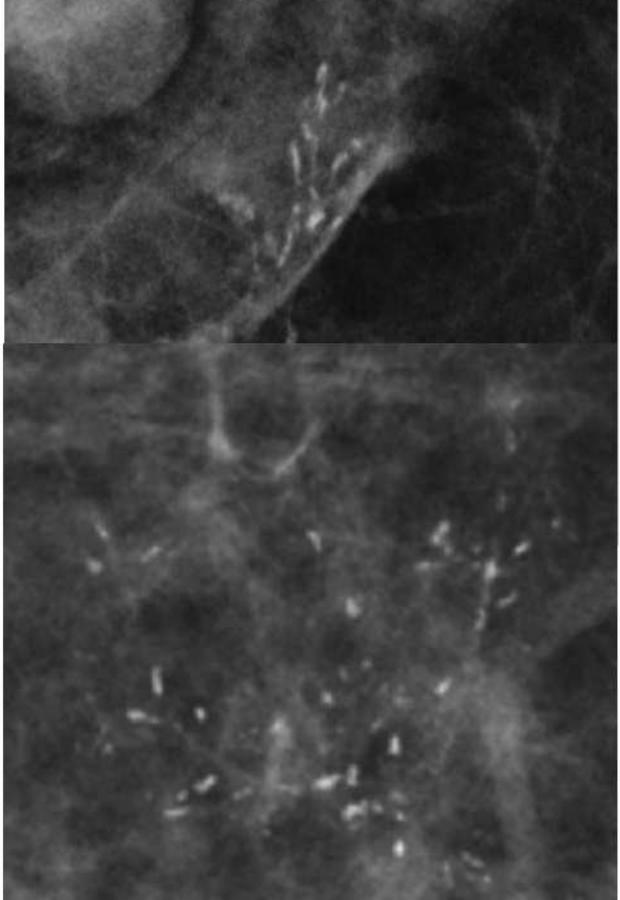
Amorfsed



Peened pleomorfSED



Peened lineaarsed

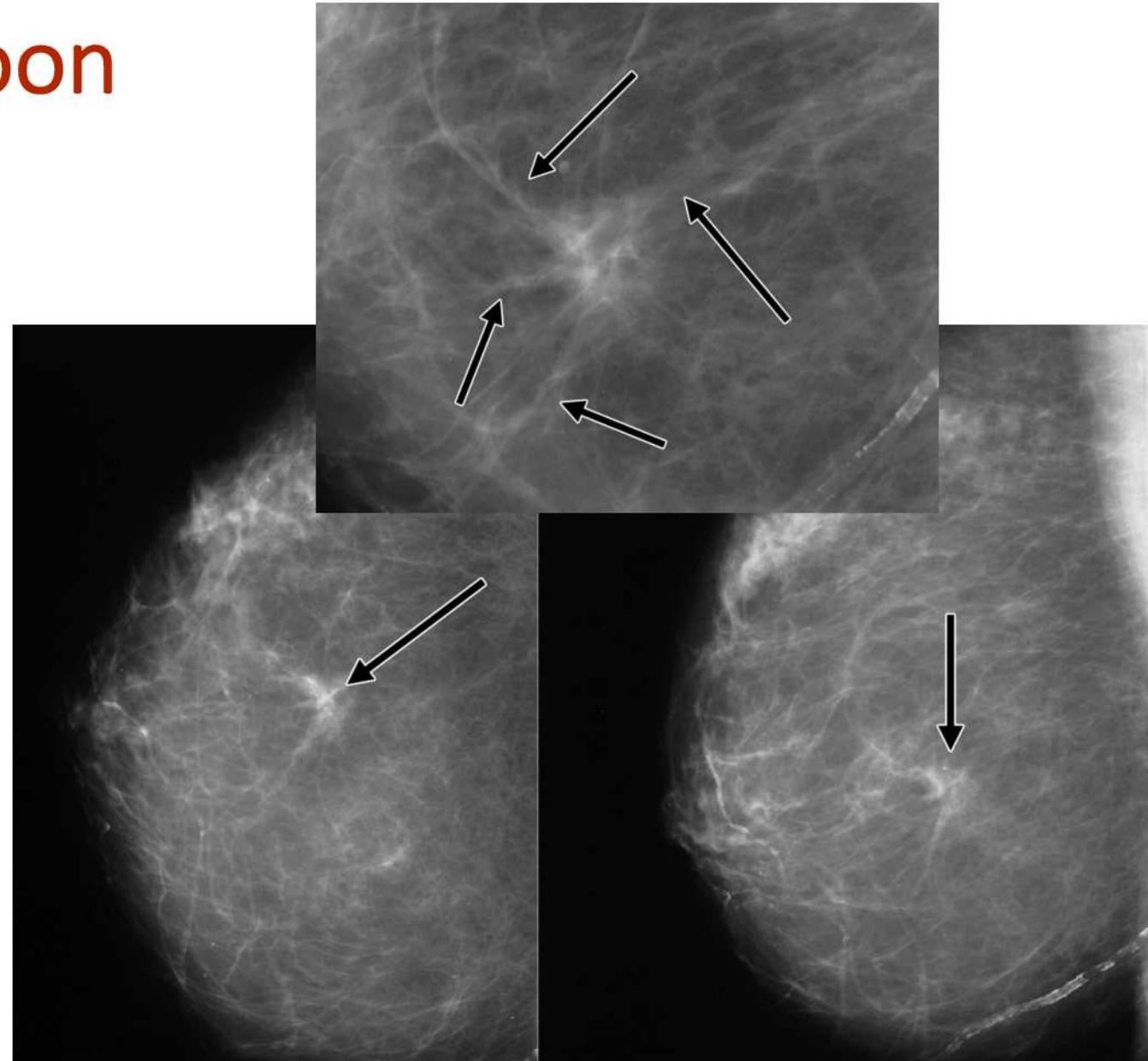


Strooma deformatsioon

Tavapärase struktuuri moonutus

- Keskpunktist lähtuvad sirged jooned, kiirjad jätked
- Parenhüümi kontuuri moonutus

Maliigsus

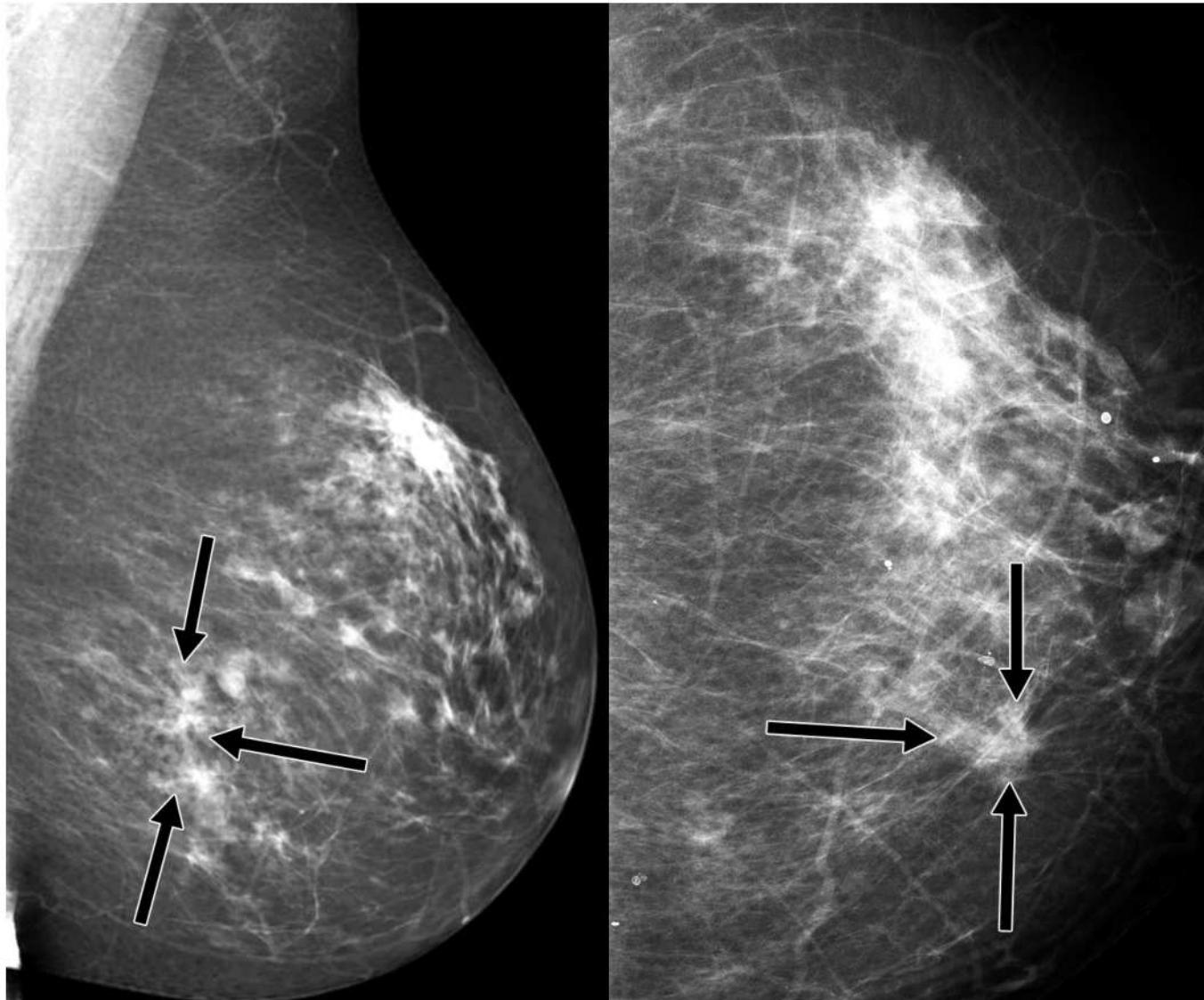


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Maliigsus
Radiaalne arm

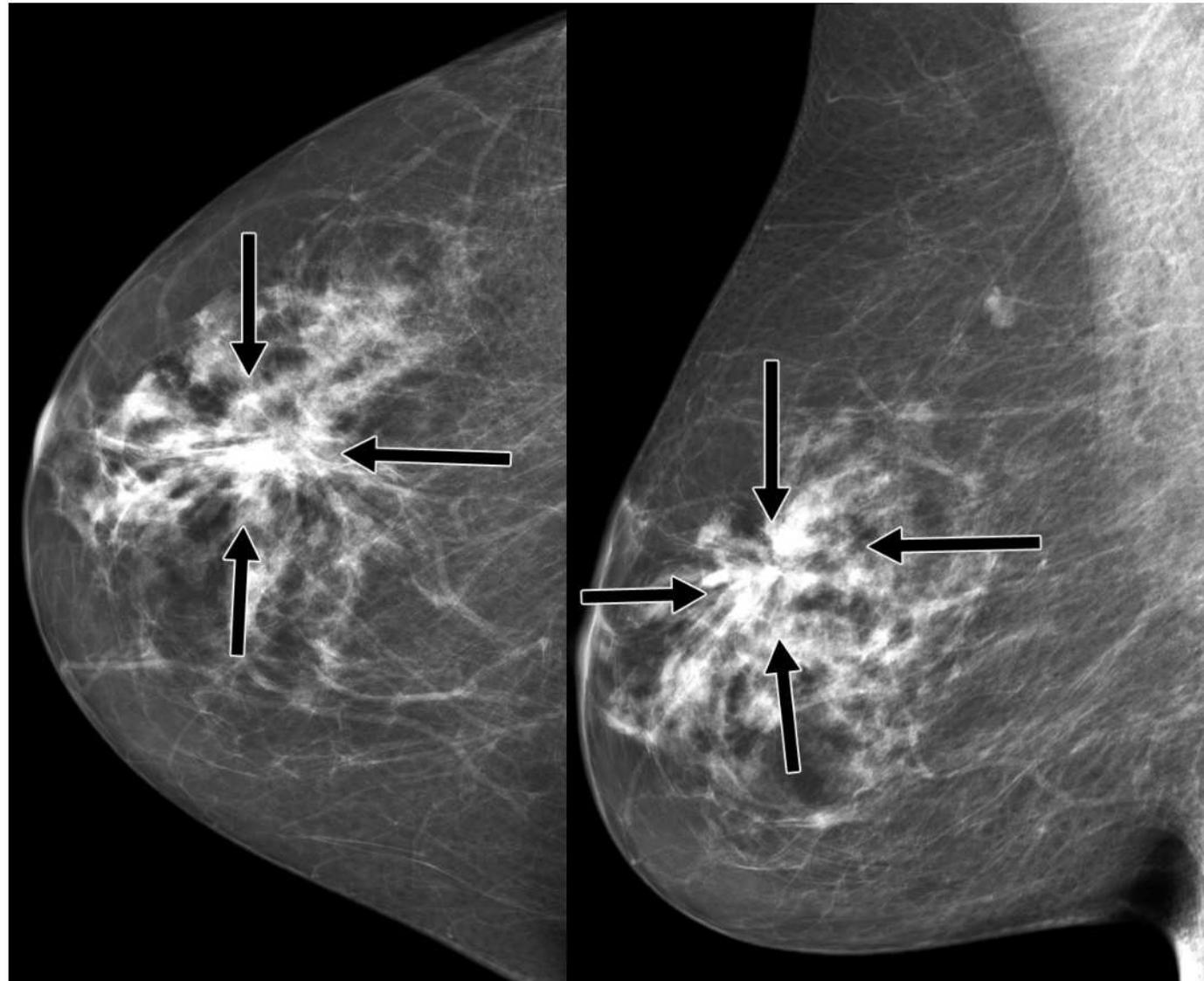


Strooma deformatsioon

Tavapärase struktuuri moonutus

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Maliigsus
Radiaalne arm
Armkude (trauma, post-op.)

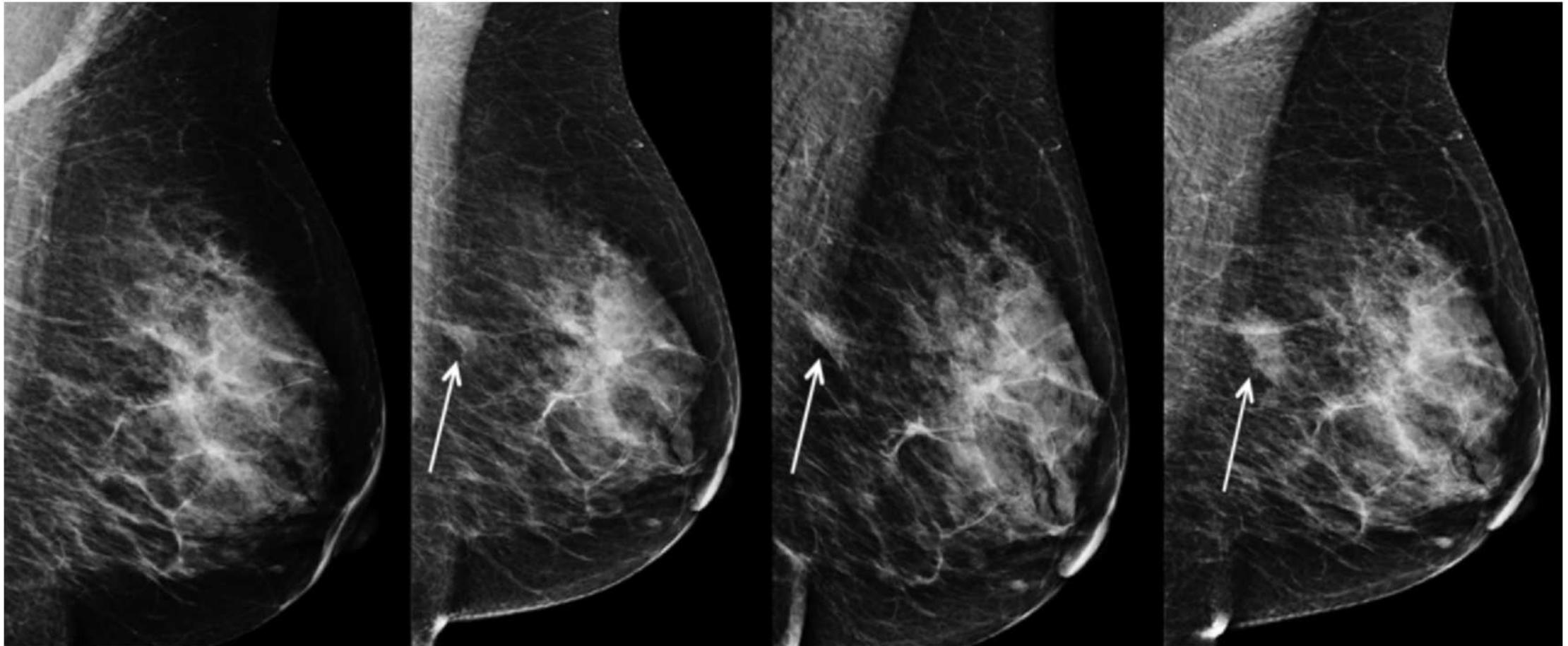


Asümmmeetriad

Unilateraalne fibroglandulaarse koe ala, mis ei ole sedastatav kui mass (nõgusad kontuurid; rasvkoega põimitud)

- **Asümmmeetria**
 - Jälgitav vaid ühel projektsioonil
 - **Fokaalne asümmmeetria**
 - Jälgitav vähemalt kahel projektsioonil
 - Väiksem kui üks kvadrant
 - **Globaalne asümmmeetria**
 - Jälgitav vähemalt kahel projektsioonil
 - Vähemalt üks kvadrant
 - Puudub mass, strooma deformatsioon, kahtlased lubikolded
 - **Arenev asümmmeetria**
 - Fokaalne asümmmeetria, mis on uus, suurem või silmatorkavam võrreldes varasemate uuringutega
- Summatsioon
- Normi variant
- Ligikaudu 15% maliigsus

Asüümmeetriad



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BI-RADS 1

Negatiivne

- Oluline leid puudub
 - Sh ka palpatoorse leiu olemasolul – soovita täiendavaid uuringuid/konsultatsioone

BI-RADS 2

Benigne

- Sisuliselt 0% tõenäosus maliigsusele
- Benigne leid, mida on kirjeldatud
 - Tüüpilised involutiivsed kaltsifitseerunud fibroadenoomid, rasvkoelised muutused (lipoomid, õlitsüstdid, ...), beniigsed lubjastused, intrammaarsed lümfisõlmed, implantaadid, post-op. muutused, võörkehad, ...
 - Reaktiivse/infektsioosse olemusega bilateraalne lümfadenopaatia
 - Abstsess/hematoom, implantaadi kahjustus – soovita vajadusel edasist käsitlust

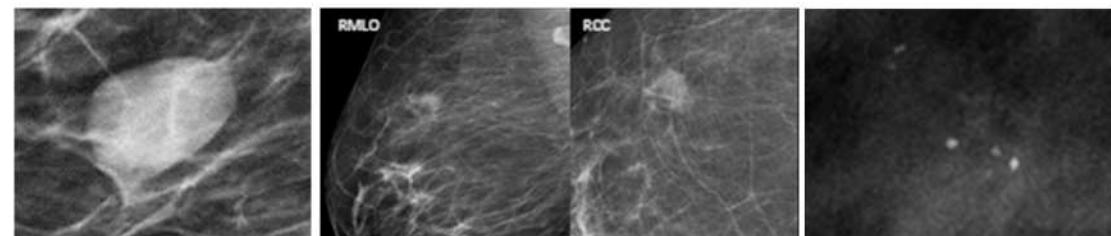
Ära kasuta, kui ...

- beniigset leidu ei ole kirjeldatud (vastasel juhul BI-RADS 1)

BI-RADS 3

Tõenäoliselt beniigne

- Tõenäosus maliigsusele > 0%, kuid ≤ 2%
- Tõenäoliselt beniigne leid, mis eeldatavasti ajas ei muutu, kuid radioloog soovib kinnitada leiu stabiilsust
- Kolm spetsiifilist leidu
 - Mittekaltsifitseerunud piiritletud ümar mass
 - Fokaalne asümmeetria
 - Üksik punktjate lubjastuste rühm
- Radioloogi varasem kogemus
- Palpeeritav muutus?



Ära kasuta, kui ...

- tegemist on sõeluuringuga – eelnevalt vajalik diagnostiline läbivaatus!
- kahtled, kas leid on beniigne või kahtlane
- leiu täpsustamiseks on vajalik MR-uuring

Jälgimine – 6, 12 ja 24 kuud

BI-RADS 4

Kahtlane

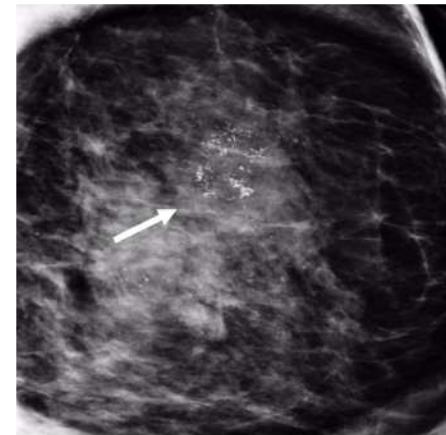
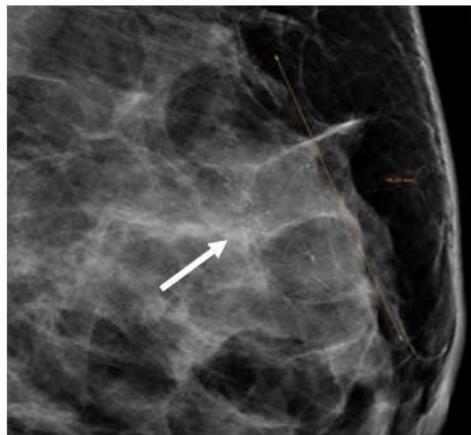
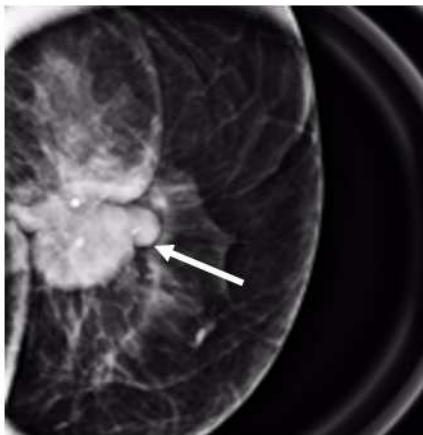
- Tõenäosus maliigsusele 2-95%
 - A. > 2% - ≤ 10%
 - B. > 10% - ≤ 50%
 - C. > 50% - ≤ 95%
- Leid, millel puuduvad klassikalised maliigsuse tunnused, kuid on piisavalt kahtlane õigustamaks biopsiat
 - Sh kahtlane unilateraalne lümfadenopaatia ilma muu koldeleiuta

Biopsia

BI-RADS 5

Oluline maliigsusele viitav leid

- Tõenäosus maliigsusele >95%
- Klassikaline maliigsusele viitav leid
 - Ebakorrapärane kiirjate jätketega tihe mass
 - Segmentaalse või lineaarse paiknemisega peened lineaarsed mikrolubjastused
 - Ebakorrapärane kiirjate jätketega mass pleomorfsete lubjastustega



Biopsia

BI-RADS 0

Vajalik täiendav piltdiagnostika

(*spot compression; eriprojektsioonid; UH; tomosüntees*)

- Üldjuhul kasutatav üksnes sõeluuringu puhul

Ära kasuta, kui ...

- leid on juba ilmselgelt kahtlane
- leid vajab edasist täpsustamist MR-uuringul

BI-RADS 6

Teadaolev biopsial tõestatud maliigsus

- Neoadjuvantse kemoteraapia vastuse hindamine
- Preoperatiivne MR-uuring

Ära kasuta, kui ...

- lisaks biopsial tõestatud maliigsusele tuleb esile mõni muu oluline leid

BI-RADS

Pathologic Condition
Breast cancer

Score or Category
0–6 (4AC)

Assignment
Patient-based

Modalities or Technique
Mammography, MRI, US

Category	Features and Imaging Findings	Management	Mammo	MRI	US
BI-RADS 1	Negative: no visible abnormalities, no well-formed mass, asymmetric glandular structure, no change from prior examination	No additional actions			
BI-RADS 2	Benign: calcified fibroadenomas, cysts, and fatty densities such as lipomas, galactoceles, oil cysts, hamartomas, surgical scars, secretory ductal ectasia, vascular calcifications, breast implants, silicone granulomas, etc	No additional actions			
BI-RADS 3	Probably benign: risk of malignancy is lower than 2%; includes noncalcified solid nodules (arrow), clusters of round or oval calcifications (circle), fibroglandular densities, dilated duct or postbiopsy architectural distortion without central density, etc	Initial short-interval (6 months) follow-up			
BI-RADS 4	Suspicious: risk of malignancy is 2%–94%; 4A = low suspicion, 4B = moderate suspicion, 4C = high suspicion; includes asymmetric, localized, and evolving areas of high density with convex contours, noncystic opacities with obscure contours, etc	Biopsy should be considered			
BI-RADS 5	Highly suspicious: risk of malignancy is >94%; includes microcalcifications with linear branching, clusters with segmental galactophorous distribution, evolving lesions with architectural distortion, poorly circumscribed opacities with irregular contours, speculation, etc	Appropriate action should be taken			

Additional Categories

BI-RADS 0: Incomplete assessment → Need to perform repeat imaging or to review prior mammograms for comparison

BI-RADS 6: Known biopsy-proven malignancy → Appropriate action should be taken



ACR BI-RADS® Atlas Fifth Edition

QUICK REFERENCE

ACR®
AMERICAN COLLEGE OF
RADIOLOGY
QUALITY IS OUR IMAGE

MAMMOGRAPHY		ULTRASOUND			MAGNETIC RESONANCE IMAGING			
Breast composition	a. The breasts are almost entirely fatty b. There are scattered areas of fibroglandular density c. The breasts are heterogeneously dense, which may obscure small masses d. The breasts are extremely dense, which lowers the sensitivity of mammography	Tissue composition (screening only)	a. Homogeneous background echotexture – fat b. Homogeneous background echotexture – fibroglandular c. Heterogeneous background echotexture	Amount of fibroglandular tissue (FGT)	a. Almost entirely fat b. Scattered fibroglandular tissue c. Heterogeneous fibroglandular tissue d. Extreme fibroglandular tissue	Associated features	Nipple retraction Nipple invasion Skin retraction Skin thickening Skin invasion Axillary adenopathy Pectoralis muscle invasion Chest wall invasion Architectural distortion	
Masses	Shape Oval Round Irregular	Masses	Shape Oval Round Irregular	Background parenchymal enhancement (BPE)	Level Minimal Mild Moderate Marked Symmetric or asymmetric Symmetric Asymmetric	Fat containing lesions	Lymph nodes Normal Abnormal Fat necrosis Hamartoma Postoperative seroma/hematoma with fat Location Depth	
Margin	Circumscribed Obscured Microlobulated Indistinct Spiculated	Margin	Circumscribed Not circumscribed - Indistinct - Angular - Microlobulated - Spiculated	Focus	Shape Oval Round Irregular	Kinetic curve assessment	Initial phase Slow Medium Fast Delayed phase Persistent Plateau Washout	
Density	High density Equal density Low density Fat-containing	Echo pattern	Anechoic Hyperechoic Complex cystic and solid Hypoechoic Isoechoic Heterogeneous	Margin	Circumscribed Not circumscribed - Irregular - Spiculated	Signal intensity (SI)/time curve description	Implants	
Califications	Typically benign Skin Vascular Coarse or "popcorn-like" Large rod-like Round Rim Dystrophic Milk of calcium Suture	Posterior features	No posterior features Enhancement Shadowing Combined pattern	Non-mass enhancement (NME)	Distribution Focal Linear Segmental Regional Multiple regions Diffuse	Implant material and lumen type	Saline Silicone - Intact - Ruptured Other implant material Lumen type - Single - Double - Other	
Suspicious morphology	Amorphous Coarse heterogeneous Fine pleomorphic Fine linear or fine-linear branching	Califications	Calcifications in a mass Calcifications outside of a mass Intraductal calcifications	Associated features	Internal enhancement patterns Homogeneous Heterogeneous Clumped Clustered ring	Implant location	Retroglandular Retropectoral	
Distribution	Diffuse Regional Grouped Linear Segmental	Associated features	Architectural distortion Duct changes Skin changes Skin thickening Skin retraction	Edema	Intramammary lymph node	Abnormal implant contour	Focal bulge	
Architectural distortion		Associated features	Vascularity Absent Internal vascularity Vessels in rim	Vascularity	Skin lesion	Intracapsular silicone findings	Radial folds Subcapsular line Keyhole sign (teardrop, noose) Linguine sign	
Asymmetries	Asymmetry Global asymmetry Focal asymmetry Developing asymmetry	Associated features	Elasticity assessment Soft Intermediate Hard	Non-enhancing findings	Ductal precontrast high signal on T1W Cyst Postoperative collections (hematoma/seroma) Post-therapy skin thickening and trabecular thickening Non-enhancing mass Architectural distortion Signal void from foreign bodies, clips, etc.	Extracapsular silicone	Breast Lymph nodes	
Intramammary lymph node		Special cases	Simple cyst Clustered microcysts Complicated cyst			Water droplets	Peri-implant fluid	
Skin lesion			Mass in or on skin Foreign body including implants Lymph nodes – intramammary Lymph nodes – axillary					
Solitary dilated duct			Vascular abnormalities AVMs (arteriovenous malformations/pseudoaneurysms) Mondor disease					
Associated features	Skin retraction Nipple retraction Skin thickening Trabecular thickening Axillary adenopathy Architectural distortion Calcifications		Post surgical fluid collection					
Location of lesion	Laterality Quadrant and clock face Depth Distance from the nipple		Fat necrosis					

BI-RADS® ASSESSMENT CATEGORIES

Category 0: Mammography: Incomplete – Need Additional Imaging Evaluation and/or Prior Mammograms for Comparison
Ultrasound & MRI: Incomplete – Need Additional Imaging Evaluation

Category 1: Negative

Category 2: Benign

Category 3: Probably Benign

Category 4: Suspicious

Mammography & Ultrasound: AVMs (arteriovenous malformations/pseudoaneurysms)
Category 4A: Low suspicion for malignancy
Category 4B: Moderate suspicion for malignancy
Category 4C: High suspicion for malignancy

Category 5: Highly Suggestive of Malignancy

Category 6: Known Biopsy-Proven Malignancy

Kasutatud materjalid

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