



PIPER BREAST CENTER *Communiqué*

Fall 2003

Volume Three, Number Four

BREAST MRI

~ by Deborah L. Day, MD

Magnetic resonance imaging, or MRI, is a technique that uses magnetic energy rather than X-rays to make images. Breast MRI has been used for at least a decade to evaluate for implant rupture. With further refinements, additional indications for breast MRI have evolved. In 2003, we have had significant growth in the number of MRIs performed at the Piper Breast Center.

The greatest advantages of breast MRI are its sensitivity for detecting implant rupture and infiltrating ductal cancer, the most common type of breast cancer. Although still good, MRI is less sensitive for detecting infiltrating lobular cancer, low grade variants of infiltrating ductal cancer and ductal carcinoma in situ.

Disadvantages of breast MRI include its lack of specificity (not all positive findings are cancer), cost (approximately \$1,200), lack of study standards and need for labor-intensive evaluation by the radiologist. There are also some limitations as to who can undergo MRI – claustrophobia, vascular clips or other metal parts in the brain or eye, and body size may make the study dangerous or impossible to perform.

Breast MRI should only be done as a secondary study after mammography. Mammography is still the best tool we have for detecting breast cancer. Calcifications, which can be seen in up to 50 percent of newly diagnosed breast cancers, cannot be seen on breast MRI. Indications for breast MRI include:

- evaluating implant integrity
- staging newly diagnosed breast cancer
- problem-solving in a woman with dense breast tissue (as seen on mammogram) and a difficult clinical breast examination
- searching for breast cancer that is not seen on a mammogram in a woman who presents with cancer in a lymph node under the arm
- distinguishing between scarring versus cancer recurrence at a lumpectomy site
- monitoring cancer response to neoadjuvant (before surgery) chemotherapy
- screening in a very high-risk woman (lifetime risk greater than 25 percent).

Breast MRI is an exciting new technology that is now available at the Piper Breast Center.

Did You Know ...

~ by Stephanie Remark, RT (R)(M)

Patients should try to schedule their routine breast imaging and clinic appointments well in advance of any vacation or extended get-away. Occasionally patients may need additional imaging or tests that may interfere with these plans. Please allow sufficient time for any unforeseen appointments. Patients may also schedule any routine appointment upon their return.

October is National Breast Cancer Awareness Month. This month is dedicated to increasing the awareness of breast cancer issues and the importance of early breast cancer detection.



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WHY WOMEN GET HOT FLASHES

~ by Jill H. Rusterholz, MD

Hot flashes occur when there is a decrease or withdrawal of estrogen, as at menopause or when abruptly stopping hormone replacement therapy. Other common causes are psychosomatic, stress, thyroid disease and other medical conditions. Hot flashes at menopause occur in 75 to 85 percent of women. About 80 percent of these women have them for more than one year; 45 percent have them for more than five years. They are common at night and may be triggered by stress, heat, caffeine and alcohol.

The actual physiology of hot flashes is not yet understood. For an unknown reason, the temperature-regulating center in the brain (hypothalamus) triggers an inappropriate release of heat.

Medical treatments include estrogen, progestins alone, selective serotonin re-uptake inhibitor (SSRI) antidepressants and the blood pressure medication Clonidine. Lifestyle changes can also be helpful.

COMMUNITY OUTREACH: PART OF OUR MISSION

Whether she's speaking to college students, suburban professionals, an employee group or residents of a retirement community, Carol Bergen, RN, has one goal in mind: empowering women to achieve better health.

As the clinical manager at Piper Breast Center, Bergen speaks to numerous community groups each year. Depending on a group's interests, her talks can cover a range of breast health topics – from the latest advancements in breast cancer detection and treatment to the impact of hormone replacement therapy on breast health.

“Community outreach is part of our mission,” says Bergen. “I believe that informed, educated individuals make better health care decisions.”

Bergen is not alone in her efforts to improve women's health through education and information. Piper Breast Center physicians are frequently featured in local newspapers and magazines, including *Minnesota Monthly* and *Mpls/St. Paul*. Television and radio are also important vehicles to reach the larger community. In particular, the Sound Health program on FM 107 has featured many breast health topics.

Sharing the Piper Breast Center's expertise with other health care providers is also part of the center's mission. Many of the physician specialists are involved in

education conferences designed to update and enhance the knowledge of nurses, technologists and other doctors.

In some cases, Bergen's connection with an organization evolves into a long-term relationship. This month, the Burnsville Women of Today hosted their ninth annual luncheon and fundraiser for the Piper Breast Center. Bergen has spoken at each event, sometimes accompanied by a special guest.

No matter what organization she works with or how many people attend, Bergen finds that community outreach is one of the most satisfying parts of her job. “If my being there compels even one woman to feel more confident about her health, to start a dialogue with her doctor or to schedule a mammogram, it's worth it,” she says.

If you are interested in having a representative of Piper Breast Center speak with your organization or at your place of business, you are encouraged to call the Piper Breast Center. Past presentations have been done at schools, colleges, women's clubs, churches, fundraisers, and breakfast and luncheon events. Attractive and informative handout materials can be provided for each participant. The presentation and materials are adapted in content and length to suit the audience.

For more information, call Clinical Manager Carol Bergen, at 612-863-5383.

OPTIONS IN BREAST RECONSTRUCTION

~ by Brian Kobienia, MD

Today most women who have undergone a mastectomy are candidates for breast reconstruction. Which type of reconstruction is appropriate for you depends on anatomy, emotional energy, anticipated hospitalization and recovery time, as well as aesthetic goals.

Breast reconstruction options commonly offered to women facing mastectomies include:

- no reconstruction (external prosthesis)
- tissue expander and implant reconstruction
- latissimus dorsi reconstruction
- TRAM (transverse rectus abdominus myocutaneous) flap reconstruction.

Tissue expanders are medical devices that are placed in the mastectomy site. They essentially act as balloons, and are expanded to create a space into which the much softer breast implant can be placed. Permanent breast implants can be filled with saline or silicone gel.

Latissimus dorsi flap breast reconstruction involves moving a section of tissue from the patient's back to reconstruct the breast mound. Typically a breast implant is used to obtain symmetry. The scars on the back are easily hidden beneath the bra.

TRAM reconstruction allows complete reconstruction of the breast mound without need for an implant. Tissue from the lower abdomen is transferred to the mastectomy site. This procedure may be done in several different ways, depending on the patient's individual needs and condition.

The more informed you are the more capable you will be to decide which breast reconstruction technique is right for you.