DIAGNOSTIC IMAGING SERVICE

SENOLOGY

Director: Prof. Gino Ghigi

Diagnosis in senology was established for the purposes of prevention and to ensure a unified management of the clinical and instrumental process of breast disease. The equipment is subject to periodic certified quality inspections. Mammography is carried out with direct GE digital equipment which guarantees high-quality images even in the case of "dense breasts", making for the easier recognition of microcalcifications, distortions and small opacities, with reduced doses of x-ray compared to analog equipment.

Patients who come to our facility undergo a mammogram, which always includes a medical interview and a clinical breast examination by the radiologist, as well as an ultrasound examination. The result of the investigation, complete with reports and iconographic material, is immediately delivered to the patient.

USEFUL INFORMATION FOR THE PREVENTION OF BREAST CANCER

Breast cancer is the most common cancer in women. It is estimated that in Italy more than 47,000 cases of breast cancer are diagnosed each year. It is the leading cause of cancer mortality and accounts for 17% of all cancer deaths among Italian women. Early diagnosis, however, permits high survival rates: around 85% at 5 years from diagnosis. Around the world in recent years there has been a significant increase in the incidence of breast cancer, which, however, has not been matched by a similar increase in mortality, because a tumour is more treatable with adequate secondary prevention, i.e. early diagnosis and effective therapy. Early detection is possible if patients regularly undergo a medical examination, mammography and ultrasound test. These periodic clinical-instrumental examinations allow the detection of cancer at an early stage, when the dimensions are very small and the chances of distant metastases are lower; at this early stage, the tumour can be palpated only when it is superficial. Instrumental checks must therefore be regular, not occasional. The time between one check and the next varies with age between 12 and 18 months, the existence of risk factors (heredity) and mammographic patterns. It has been shown with certainty that the onset of the disease is age-related, and monitoring should start around 35-40 years and continue without interruption. If women related by blood (mother, daughter, sister, aunt, grandmother) have a history of breast cancer, it is imperative that inspections be carried out accurately and in a timely manner even before the age of 40, although there are no certainties about the possibility that a tumour may develop.

Scientific research is not yet able to establish with certainty the causes of breast cancer, even though interesting differences between geographically diverse female populations have emerged. There are several risk factors such as age, family history, use of hormone products, and the constitution of the breast (dense breasts).
A mammogram is a safe and simple method, it causes no harm and is most effective when performed with suitable high-grade equipment and by a radiologist with extensive senological experience. Mammography combined with a medical examination is an essential tool in the early diagnosis of breast cancer. Ultrasound is recommended for women under the age of 40. Above that age, it must be integrated with mammography, especially when the mammary gland is very dense. When doubts arise from the analysis of the images, a more detailed diagnosis by needle aspiration or biopsy, with subsequent histological or cytological examination, may be required, as this will allow a certain diagnosis and make it possible to plan medical and/or surgical interventions.