

## Abbreviated breast MRI (AB-MRI) and dense breast tissue

Having dense breast tissue is very common and not in itself a cause for alarm. However, dense breast tissue can obscure details of breast anatomy on a screening mammogram and it is often recommended that women with dense breast tissue have a second, supplemental screening.

Historically, ultrasound has been used as a supplemental screening for women with dense breasts. Research indicates that MRI finds significantly more cancers than ultrasound and renders fewer false positives. While this has been cost prohibitive, a new exam, abbreviated breast MRI (AB-MRI), is a less expensive option that offers an exceptional supplemental screening.

With mammography plus AB-MRI, research has shown an over 200% increase in cancer detection and dramatically fewer false positives compared to mammography plus ultrasound. Plus, the new abbreviated version of the full breast MRI takes only 3 minutes, meaning considerably less time in the scanner.

The cost of AB-MRI is comparable to a breast ultrasound. However, while breast ultrasound is covered by some insurance groups, AB-MRI is not yet covered. The cost for AB-MRI at ARA Diagnostic Imaging is \$425. The ARA billing department can work with you on an extended payment plan. We believe the cost of getting the AB-MRI is worth the investment in your health.

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## Abbreviated Breast MRI (AB-MRI)

*A highly effective supplemental screening for dense breasts*



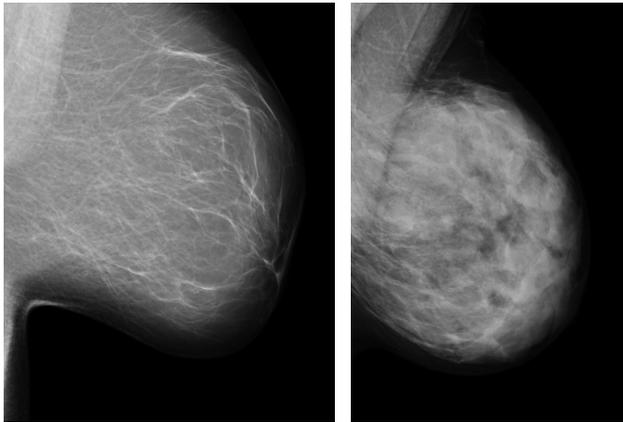
**ARA**  
DIAGNOSTIC IMAGING

Aug 2019

SCHEDULING  
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FATTY BREAST

DENSE BREAST

### What is dense breast tissue?

The breast is composed of

- Lobules which produce milk (glandular tissue)
- Ducts which carry milk from the lobules to the nipples
- Connective tissue that holds other tissues in place
- Fatty tissue that helps give breasts their size and shape

Your breasts are considered “dense” if you have a lot of glandular and connective tissue and not much fat. Most, but not all, women’s breasts become less dense with age.

### What does it mean for me if I have dense breast tissue?

- Having dense breasts is very common.
- However, breast density is linked to a moderate increase in the risk of developing breast cancer.
- **Glandular and connective tissue may obscure cancer on a mammogram.**
- **Supplemental screening may reveal a cancer that was not visible on mammogram.**

### How often should I get a mammogram?

ARA joins with the Society of Breast Imaging and the American College of Obstetricians and Gynecologists, among others, in recommending that **women get annual mammograms starting at age 40**. This is especially true for women with dense breasts. It’s important to know that, starting at age 40, the incidence of breast cancer rises sharply, doubled when compared to ages 35 to 39.

### Why might I need supplemental screening if I have dense breast tissue?

On a mammogram, fatty tissue is black and glandular and connective tissue (dense breast tissue) is white. The problem is that cancer can also appear as white, meaning dense breast tissue can obscure the visibility of any cancer that might be present in the breast.

When the radiologist sees your mammogram she or he will note the breast density status on your report and the report will be sent to you and your health care provider.

### When should I schedule my AB-MRI?

Your healthcare provider will help you decide, but it is generally recommended to schedule the AB-MRI 6 months after the mammogram and on days 7 to 10 of the menstrual cycle to minimize cyclical breast changes.

### Why is abbreviated MRI recommended for a supplemental screening after mammogram?

Compared to mammography plus ultrasound, research has shown an over 200% increase in cancer detection and dramatically fewer false positives. Mammography and abbreviated MRI are a great combination for women with dense breasts. Mammography is good at detecting certain signs of breast cancer that MRI is unable to detect. MRI is an excellent way of detecting highly active vascular cancers that might be obscured by dense breast tissue.

While breast MRI has been recommended for years for women who are at high risk for breast cancer, it has not been used in lower risk patients because of its high cost. The abbreviated breast MRI scan is much shorter, much more affordable and is specifically designed to screen women with dense breasts.

### What is it like to get an abbreviated breast MRI?

- As in all MRI procedures, you will be asked to remove clothing and jewelry and put on a robe. Metal interferes with the magnetic fields the MRI makes to form the images.
- The AB-MRI uses a contrast fluid to highlight any suspicious areas in the breast, so you will be given an intravenous dose of Gadolinium.
- You will be positioned on the MRI table lying on your stomach with your breasts hanging freely below you in cushioned openings.

- The AB-MRI protocol takes about 3 minutes. You will be able to communicate with the technologist, who will leave the room to operate the scanner. You will hear some loud knocking which is caused by the magnetic coils turning on and off as they produce waves that construct the images.
- Be sure and lay still so that the images are clear and not blurry. Movement during the scan may mean that the scan will need to be repeated.

### Who should not have an MRI?

- Patients with implanted electronic devices (pacemaker, defibrillator)
- Patients with implanted metal (ear plates, aneurysm clips, shrapnel)
- Pregnant women
- Patients who are allergic to Gadolinium

### To schedule, please call (512) 453-6100 with a referral from your health care provider.

#### PATIENT SCENARIO: Hidden by dense breast tissue, a cancer is revealed

*This patient came to ARA for a mammogram in 2016. Her mammography exam (1) showed very dense breast tissue with cysts and calcifications. She subsequently had an ultrasound (2) that was inconclusive. Next, the patient had an AB-MRI (3) with contrast which very clearly revealed ductal carcinoma in situ in the lateral right breast. A biopsy confirmed the AB-MRI findings. Without the AB-MRI, this patient could have gone undiagnosed.*

