Report on the Breast Ultrasound and Mammography Workshop

held in Pretoria, 23-26 September 1999

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he Radiological Society organised a Breast Ultrasound and Mammography Workshop as part of the 1999 South African Radiology Congress at the CSIR Conference Centre from 23 to 26 September 1999. The congress was organised with the co-operation of the faculty members of The International Breast Ultrasound School (IBUS).

Speakers attending the Congress were Dr Edward Azavedo and Dr Gunilla Svane from the Karolinska Hospital in Stockholm and Dr Roberta Chersevani from Gorizia in Italy.

A wide spectrum of topics was discussed starting with the basics of mammographic criteria and ending up with future developments in senology.

The panel of speakers continued to reiterate the importance of quality assurance and quality control in senology as well as the accreditation of radiologists involved in breast imaging. These are two topics which will have to be addressed by the Radiological Society in the very near future.

We cannot continue breast imaging in South Africa without some form of accreditation of the people doing the imaging and some sort of control over whether there is any quality assurance in institutions doing breast imaging.

A further fact that emerged from the Congress, as well as from the discussions, is the continuing question of MR imaging of the breasts. There is a very long learning curve in MR imaging of the breasts and it seems that this examination should only be performed in institutions where they have a high turnover of cases and where they have experience. It is an open question whether this examination should be performed in South Africa at all.

The syllabus that was given out during the Congress contains a handy number of lectures including some interesting lectures about fine needle aspiration and the pathological correlation between pathology slides and mammography. More and more emphasis is today being placed on the importance of ultrasound. High-end equipment should be used with 7.5 or 10 MHz linear transducers. Speaker after speaker confirmed the importance of the technical specifications of the machine.

The importance of fine needle aspiration versus core biopsies and minimally invasive breast biopsy (MIBB) was again discussed at the Congress. The absolute importance of the availability of a dedicated breast cytologist was emphasized again and again. In fact, some of the speakers felt that if a dedicated breast cytology service was not available, that the radiologist should rather be doing core biopsies. The other advantage of core biopsies is that oestrogen receptor status can be done on a core specimen. This enables a definite pre-operative diagnosis to be made and different treatment modalities discussed with the patient. The ideal situation is where all breast surgery candidates have a pre-operative diagnosis. As far as possible the use of frozen sections in theatre should be limited by a proper preoperative work-up.

The workshop sessions consisted of hands-on sessions with ultrasound as well as needle biopsies of the breasts. There were also interactive workshops demonstrating a wide variety of pathology in both mammography and pathological slides with correlation between the two.

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