
Evaluation of Core-needle Biopsy in Indeterminate Breast Mass With no Significant Imaging Finding

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ABSTRACT

Background: Triple assessment of breast pathologies is a very important pathway to detect breast cancers earlier.

Objectives: To ascertain the necessity of ultrasound-guided core biopsy for investigating clinically indeterminate breast masses with no significant imaging findings.

Patients and Methods: Prospective study on fifty patients fulfilling our eligibility criteria presented with symptomatic indeterminate breast lesions chosen according to our selection criteria and underwent an ultrasonography-guided core biopsy in the period from January 2021 to March 2022.

Results: Out of 50 clinically indeterminate breast lesions were investigated and showed 47 lesions (94%) were benign lesions of which 34 lesions (68%) were Fibroadenomas, 6 lesions (12%) were Fibrocystic disorder without ductal hyperplasia, one lesion (2%) was fibrocystic disease with ductal hyperplasia with no atypia and 6 lesions (12%) showed periductal mastitis. Two lesions (4%) were proliferative breast lesions with focal atypia. One lesion (2%) was *infiltrating duct carcinoma* grade 2.

Conclusion: Ultrasound-guided core biopsy is necessary for investigating clinically indeterminate breast mass in symptomatizing patients with insignificant changes in imaging, for early detection of malignancy and atypical hyperplastic changes.