

# Key article Radiologia



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BREAST

# Breast lesions classified as probably benign (BI-RADS 3) on magnetic resonance imaging: a systematic review and meta-analysis

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Abstract BI-RADS 3 lesions are classified as probably benign. The aim of this systematic review and meta-analysis was to evaluate the prevalence of BI-RADS 3 lesions on magnetic resonance imaging (MRI) and to assess the risk of malignancy in these lesions.

# Caratteristiche dello studio

- Tipo di studio: metanalisi
- Studi esaminati: 15
- Oggetto dello studio: BI-RADS 3 in MR

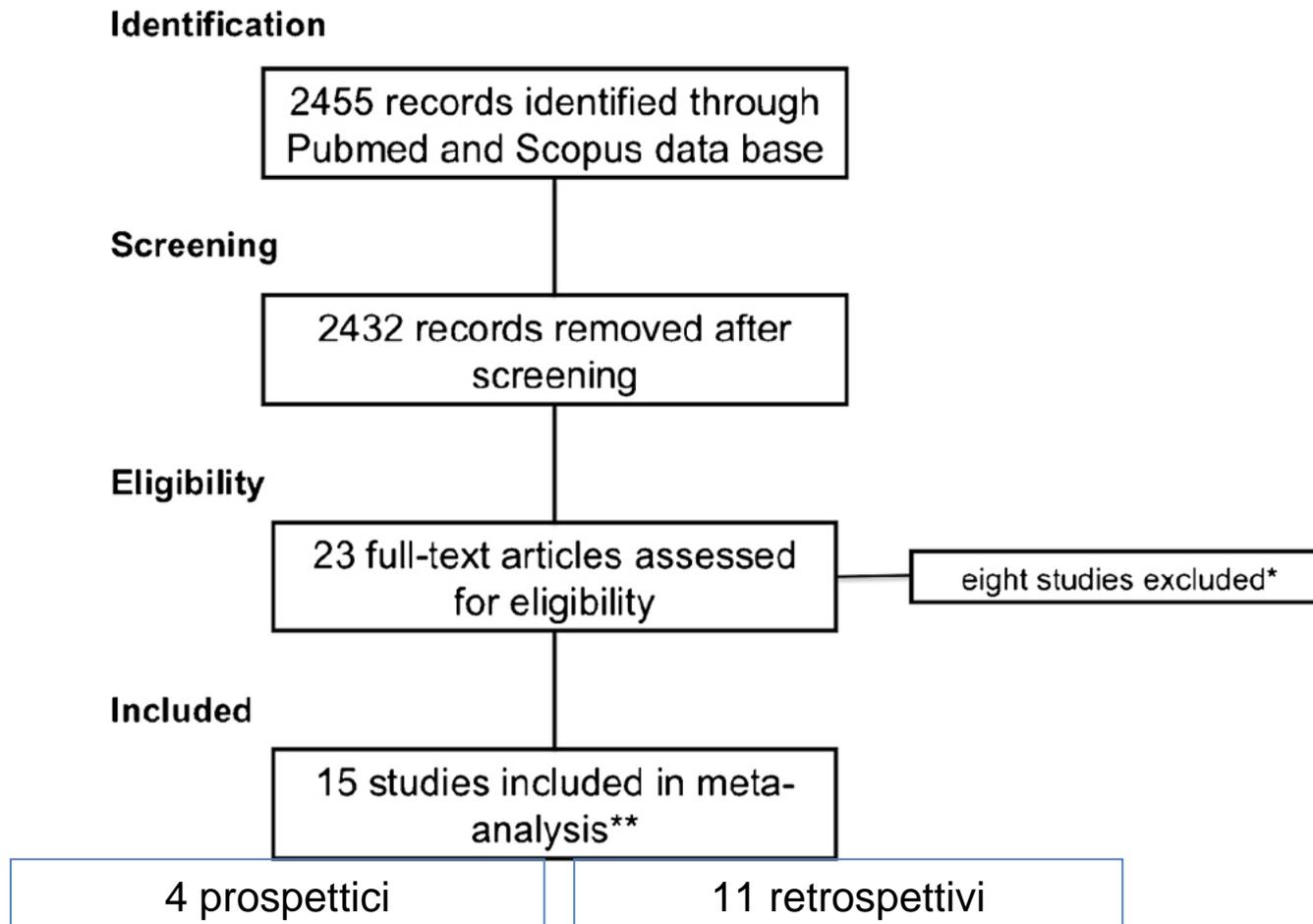
# Scopo dello studio

- Prevalenza BI-RADS 3 in MR
- Tasso di malignità
- Caratteristiche dell'immagine MR
- Valutazione follow-up

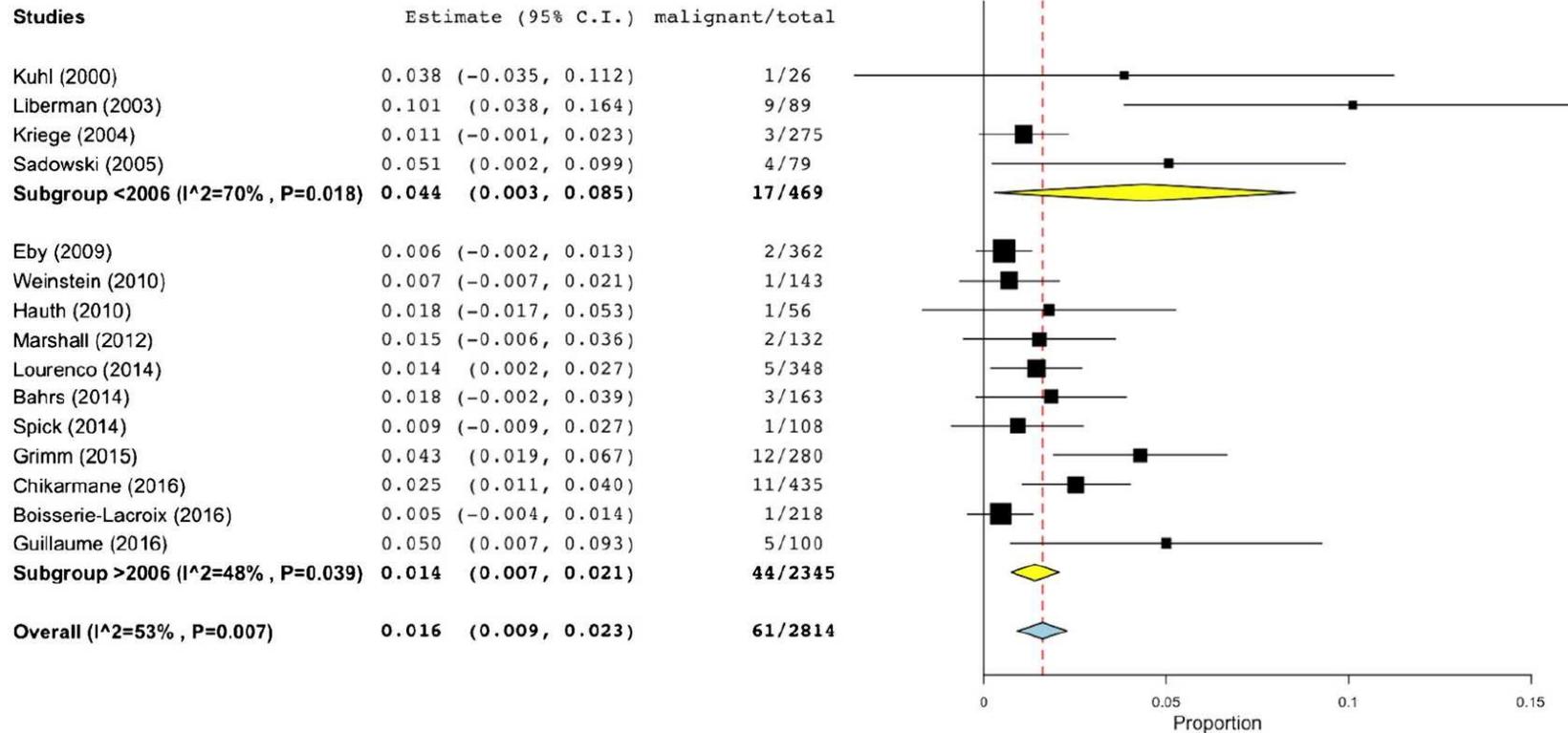
# Materiali e Metodi

- Ricerca su Pubmed/Scopus con criteri definiti
- Due ricercatori, + consenso e arbitrato
- Criteri di inclusione: studi MR con BI-RADS 3, >10 pz, diagnosi istopatologica
- Range temporale 0-22/6/2016

# Risultati – studi inclusi



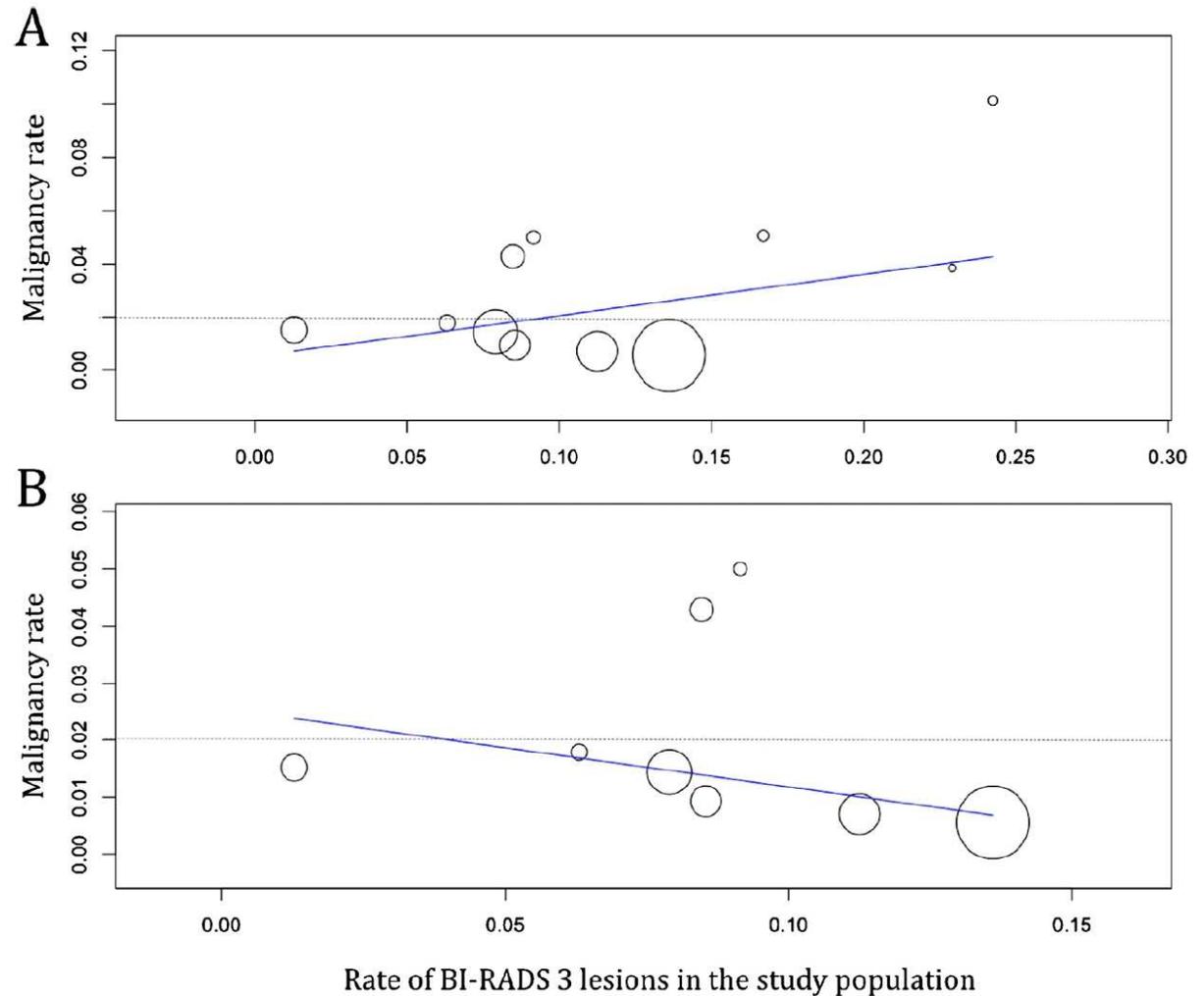
# Risultati – tasso di malignità in BI-RADS 3 MR



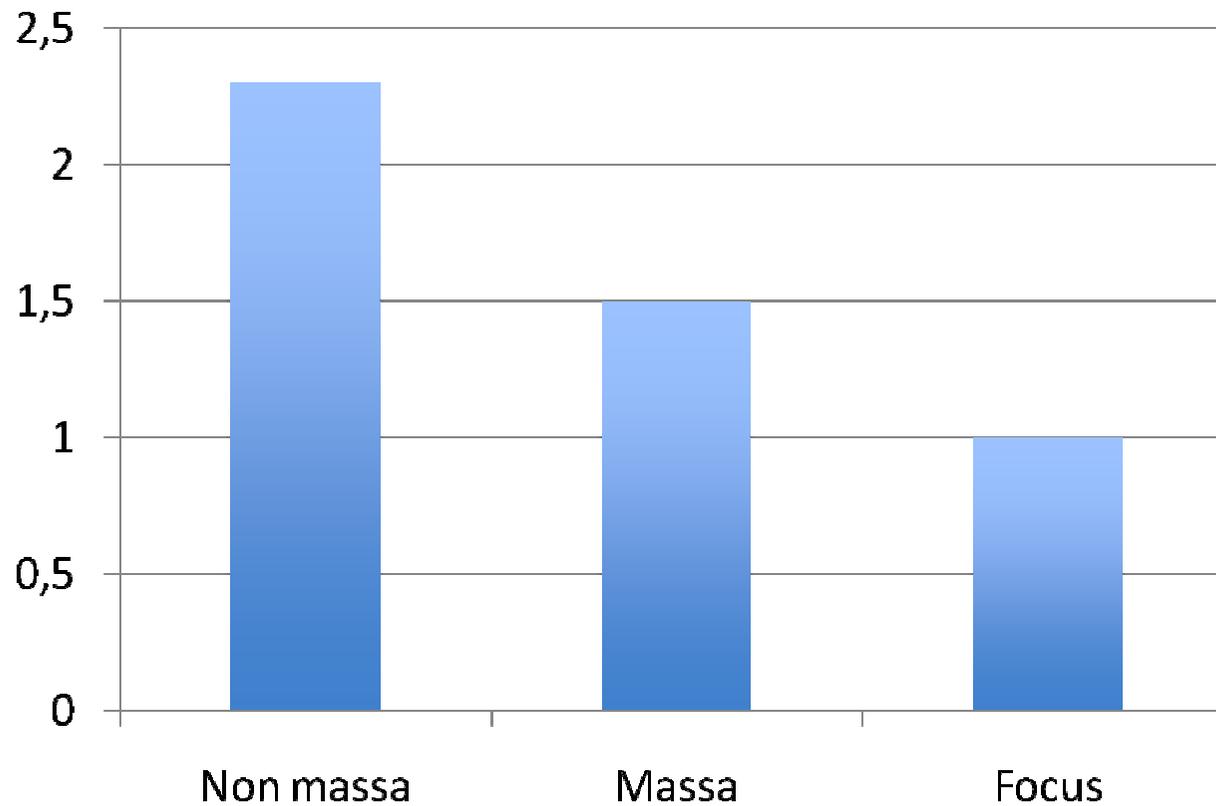
**Fig. 2** Forest plot of malignancy rates of all studies included in the meta-analysis. Subgroup analysis demonstrates that the majority of outliers in terms of malignancy rates exceeded the BI-RADS benchmark of 2%, having been published before 2006

# Risultati – prevalenza vs. tasso di malignità

**Fig. 3** Meta-regression results on the influence of BI-RADS 3 prevalence on BI-RADS 3 malignancy rates (A). Removing outlier studies published before 2006 (B, see also figure 2) revealed a non-significant trend ( $P=0.077$ ) of lower malignancy rates in studies that reported a higher prevalence of BI-RADS 3 lesions in their study populations. Circle diameters represent study weights according to the random effects model



# Tasso malignità per tipologia immagine



# CONCLUSIONI

- Forte variabilità prevalenza
- Tasso di malignità < 2%
- Lieve trend in discesa del tasso di malignità in funzione della prevalenza di BI-RADS 3
- Lesioni BI-RADS 3 non mass più probabilmente associate a malignità
- Gli autori raccomandano follow-up per 24 mesi

**Grazie per l'attenzione**

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