population (n = 102) according to the histological diagnosis and the scintimammographic criterion set for ductal carcinoma in situ/ lobular carcinoma in situ (DCIS/LCIS) Making and Indiana Same April Desire Insiene (a - 60)

	mangriant resions (n = +o)				denign lesions (// = de)			
Histology	Carcinoma in situ, alone, or with invasive component (DCIS/LCIS $\pm$ IDC/LC) $(n = 20)$		Invasive carcinoma (IDC/ILC) $\langle n=26 \rangle$		Lesions with usual type, or atypical hyperplasia (UTH/ATH) (n = 14)		Lesions without hyperplasia (fibrosis, adenosis and ductal dilatation) (n = 42)	
Radiotracer	99mTc-(V)DMSA	99mTc-Sestamibi	99eTc-(V)DMSA (n = 25)	10mTc-Sestamibi	90mTc-(V)DMSA	<sup>69</sup> nTc-Sestamibi	95mTo-(V)DMSA	98nTc-Sestambi

Results (n = 18) (n = 1)(n=0) (n=20) (n=10) (n=4)(n = 28)

FP Classification FN TN

99mTc-(V)DMSA, technetium-99m pentavalent dimercaptosuccinic acid; 99mTc-Sestamibi (99mTc-MIBI), technetium-99m 2-methoxy isobutyl isonitrile; EIC, extensive intraductal component; IDC, invasive ductal carcinoma; ILC, invasive lobular carcinoma; UTH, usual type hyperplasia; ATH,

atvoical type hyperplasia: (+), positive scan: (-), negative scan: TP, true positive: FN, false negative: FP, false positive: TN, true negative.