Definitions

Atypical ductal hyperplasia:

A benign (noncancerous) condition in which ductal cells are increased in number and look abnormal.

Biopsy:

The removal of cells or tissue for examination by a pathologist. The pathologist studies the tissue under a microscope and can perform other tests on the cells or tissue. When an entire lump or suspicious area is removed, the procedure is called an excisional biopsy. When a sample of tissue or fluid is removed with a needle, the procedure is called a needle biopsy, core biopsy, or fine-needle aspiration.

BI-RADS®:

A method used by radiologists to interpret and report in a standardized manner the results of mammography, ultrasound, and MRI used in breast cancer screening and diagnosis. Also called Breast Imaging Reporting and Data System.

BRCA1:

A gene on chromosome 17 that normally helps to suppress cell growth. A person who inherits certain mutations (changes) in the BRCA1 gene has a higher risk of breast, ovarian, prostate, and other types of cancer.

BRCA2:

A gene on chromosome 13 that normally helps to suppress cell growth. A person who inherits certain mutations (changes) in the BRCA2 gene has a higher risk of breast, ovarian, prostate, and other types of cancer.

Breast density:

Is determined by the relative amounts of fat, epithelial, and connective tissues that appear differently on a mammogram due to differences in X-ray attenuation.

Fat appears radiolucent or dark, while epithelial and connective tissues are radiographically dense and appear light or white. A dense breast has less fat than fibroglandular and connective tissue and has more breast cells. Mammograms with high density are harder to read and interpret than those of less dense breasts and individuals with dense breasts are more likely to develop breast cancer.

Core biopsy:

The removal of a tissue sample with a large diameter needle for examination under a microscope. Also called core needle biopsy.

DCIS (ductal carcinoma in situ):

A noninvasive condition in which abnormal cells are found in the lining of a breast duct. The abnormal cells have not spread outside the duct to other tissues in the breast. DCIS, also called intraductal carcinoma, increases the risk of developing invasive cancer or DCIS in the future after it has been surgically removed.

Excisional biopsy:

A surgical procedure in which an entire lump or suspicious area is removed for diagnosis. The tissue is then examined under a microscope by a pathologist to determine if it is cancerous.

Fine-needle aspiration biopsy (FNA):

The removal of tissue or fluid with a thin needle for examination under a microscope. Also called needle biopsy.

Invasive breast cancer:

Cancer that has spread from the ducts or lobules of the breast to surrounding tissue. This includes invasive ductal carcinoma and invasive lobular carcinoma. Invasive breast cancer is the most common type of breast cancer.

LCIS (lobular carcinoma in situ):

A condition in which abnormal cells are found in the lobules of the breast. This condition seldom becomes invasive cancer. However, having lobular carcinoma

in situ in one breast increases the risk of developing breast cancer in either breast.

Non-proliferative lesions:

A type of benign breast disease diagnosis. Non-proliferative diagnoses include fibroadenomas, calcifications, fibrocystic changes, non-sclerosing adenosis, lipomas, and fat necrosis.

Proliferative changes without atypia:

A benign (noncancerous) condition in which breast cells are growing at an unusually fast rate but look normal under a microscope. Proliferative diagnoses without atypia include usual ductal hyperplasia, complex fibroadenomas, sclerosing adenosis, and papilloma or papillomatosis.

Proliferative changes with atypia:

A benign (noncancerous) condition in which breast cells are growing at an unusually fast rate and look abnormal under a microscope. Proliferative diagnoses with atypia include atypical ductal hyperplasia and atypical lobular hyperplasia.