Role of proton MR-spectroscopy in predicting the response of locally advanced breast cancer to neoadjuvant chemotherapy

Essay

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Abstract

Most patients with locally advanced breast cancer (LABC) will require

a modified radical mastectomy, a procedure that remains the standard

surgical treatment for operable locally advanced disease.

Less extensive surgeries are being increasingly explored with the use of

neoadjuvant chemotherapy (NACT). The down-staging of tumors seen in

these cases not only makes them operable but also, on many occasions can

be considered for breast conservative therapy (BCT).

Neoadjuvant chemotherapy, is performed prior to breast cancer surgery

and offers several advantages over standard postoperative chemotherapy. It

is important to know early; if the drug chosen will be effective or not.

Recently hydrogen 1 (H1) MR spectroscopy is used to detect and

monitor breast cancer through measuring tCho concentration and so

predicting response to chemotherapy as early as 24 hours.

Key wards: magnetic resonance spectroscopy (MRS)- predict response – locally advanced breast cancer- neoadjuvant

chemotherapy

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<u>A</u>

AC Anthracyclin

ACR American Joint Committee on Cancer

ADC Apparent Diffusion Coefficient
AJCC American College of Radiology
ALND Axillary lymph node dissection

B

BCT Breast Conservative Therapy
BCS Breast-Conserving Surgery

BMRI Breast Magnetic resonant Imaging

BI-RADS Breast Imaging Reporting And Data System

BRCA1 is a human caretaker gene that produces a protein called breast

cancer type 1 susceptibility protein

BRCA2 is a human caretaker gene that produces a protein called breast

cancer type 2 susceptibility protein

B0 Main Magnetic Field

<u>C</u>

CAD Computer-Aided Detection

CE-BMRI Contrast- Enhanced Breast Magnetic Resonance Imaging

CHESS Chemical Shift Selective Saturation

CMF Cyclophosphamide, Methotrexate, And 5-Fluorouracil

Chemotherapy

CSI Chemical-Shift Imaging CT Computed Tomography

CTX Chemotherapy CXR Chest Radiograph

D

2D Two- Dimensional3D Three – Dimensional

DCE-MRI Dynamic Contrast-Enhanced Magnetic Resonance Imaging

DCIS Ductal Carcinoma In Situ

3DFT 3D Fourier Transform 2DFT 2D Fourier Transform

<u>E</u>

EBCTCG Early Breast Cancer Trialists' Collaborative Group

ER Estrogen Receptor

<u>F</u>

FLASH Fast Low-Angle Shot FID Free Induction Decay

FSE Fast Spin Echo

<u>G</u>

Gd-DTPA Gadolinium-DiethyleneTriaminePentaacetic Acid

GPC Glycerophosphocholine

GRCC Glycogen-Rich Clear Cell Carcinoma

<u>H</u>

¹H Proton

H&E Hematoxylin and Eosin Stain

HER2- human epidermal growth factor receptor 2-Negative

¹H MR Proton Magnetic resonance HR+ Endocrine Receptor–Positive

IAC Invasive Apocrine Carcinoma

IBTR | Ipsilateral Breast Tumor Recurrence

IBC Inflammatory breast cancer invasive ductal carcinoma

ILC invasive lobular cancer

LABC Locally Advanced Breast Cancer

LCIS Lobular Carcinoma In Situ

LR Local Recurrence

M

M Distant Metastasis

MCA Mucinous Cystadenocarcinoma
MIP Maximum intensity projection

MR Magnetic Resonance

MRI Magnetic Resonance Imaging

MRS Magnetic Resonance Spectroscopy

MS Mammography Screening

N

NACT/NAC NOS Neoadjuvant Chemotherapy

Invasive Duct Carcinoma Not Otherwise Specified