

**Reporting of mammograms in woman who developed breast cancer
(02HDC10479, 11 May 2004)**

Radiologists ~ Breast screening ~ Breast cancer ~ Standard of care ~ Sufficient information ~ Rights 4(1), 6(1)(a)

A 67-year-old woman who developed breast cancer requiring mastectomy complained that three radiologists failed to adequately report on her mammograms and arrange appropriate investigation of a spiculated area (an area with a star-like or spiky appearance, which may contain a lesion), failed to provide her with sufficient information about the area, and did not properly take into account her family history of breast cancer.

Because the woman's sister and a niece had both had breast cancer, she underwent "routine" two-view screening mammograms every two years, in 1995, 1997, 1999 and 2001, as a precautionary measure. The 1995 mammogram (reported by another radiologist at the same practice) was normal and acted as a baseline for comparison with the later scans. The spiculated area was visible on only one of the 1997 views; in 1999 it was visible on the same view as in 1997 and "very diffuse and difficult to distinguish" on the second view. It showed no change over the period from 1995 to 1997, and was considered by the radiologists to be benign. At the 2001 screening, a lesion was identified and subsequently confirmed to be a small, slow-growing breast cancer.

It was held that the radiologists did not breach Right 4(1) in their standard of care. The 1997 mammogram was reported by the first radiologist alone; he compared it with the 1995 scan, and his decision that no further investigation was required was reasonable. The 1999 mammogram was reported by both the second and third radiologist, in line with recent practices adopted by BreastScreen Aotearoa; their report that the spiculated area was unchanged and there was no evidence of malignancy was reasonable. With respect to the woman's family history of breast cancer, it was held that while the radiologists may not have been aware of this, it would not have affected the degree of care and skill exercised on reading the mammograms.

It was also held that the radiologists did not breach Right 6(1)(a) in not informing the woman about the spiculated area when they considered it to be benign; although more information could have been provided, they acted in what they believed to be the patient's best interests (in not causing her unnecessary confusion and stress) and in accordance with accepted standards of reporting practice.

It is important to understand the limitations of the breast cancer screening process (it is not always easy to distinguish benign from malignant tissue), while bearing in mind the positive aspects, particularly in cases where cancer has been identified by mammogram when it may have remained undetected by palpation, breast self-examination or ultrasound.