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Introducing a new scoring system based on her2/neu, p53 oncogenes 212-4
results and Mammographic findings for prediction of tumor grade in breast cancer

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Objective:To investigate the correlation of the results of a new scoring system comprised of mammogram, P53 and her2/neu with the tumor grade in invasive ductal carcinoma.

Methods:150 cases of pathology proven invasive ductal carcinoma of a private clinic were included. According to BIRADS system, the mammography results received the scores of 1(benign:groups of I and II in BIRADS), 2 (suspicious:group III in BIRADS)and 3 (malignant:groups of IV and V in BIRADS).P53 and her2/neu presence were assessed by immunohistochemical studies and the results were scored equal to 1(negative results) and 2(positive results).The final score of each patients was calculated by adding scores of all three studies (P53,

her2, mammography) which ranged between 3 to 7.

Results: The mean age was 48.2 ± 11.2 years. Age between 30-50 years old. Eighty one cases had suspicious (54%) and 66 had malignant mammogram (44%). Positive P53 was seen in 59 (39%), positive her2/neu in 69 (46%) and high grade tumor in 77 (51%) patients. On scoring, 2 patients gained 3 (1.3%), 36 scored 4 (24%), 53 patients received 5 (35.3%), 37 reached 6 scores (24.7%) and 22 patients received 7 scores (14.7%). Placing scores 3-4 in one group and 5-7 in another, the sensitivity and negative predictive value of the system for high grade tumors reached 97.7% and 89.5% respectively. By placing scores 3-6 in one group and score 7 in another, the specificity and positive predictive value of the system reached to 100%. The results of mammography, P53 and her2/neu have a good correlation with tumor grade; when all three parameters are positive, the patients' tumor is almost always high grade.

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