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Mehrdad Mokri, Usefulness of the Triple Test Score for Breast Lesions 9-62  
MD.Researcher., morteza atri, masoumeh guiti, and ali arab kherdmand. Cancer  
Institue., Shahid Beheshti University.Medical science., No 51-st zarnegar-st atlasi-st  
mirdamad-tehran-iran, Tehran, Iran

Objective:The triple test score (TTS) is useful and accurate for evaluating breast  
lesions.

Methods:This method was retrospective,during from1998 to 2003 ,6400 files were  
conveyed . 100 files had three main diagnostic features of this procedure, includes  
physical examination , mammography , FNA in association with postoperation  
pathology result . Three main diagnostic assigned a score of 1, 2 or 3 for benign,  
Suspicious or malignant results; the TTS is the sum of these scores. The TTS has a  
minimum score of 3 (concordant benign) and a maximum score of 9 (concordant  
malignant). The TTS was correlated with subsequent histopathologic analysis or  
follow-up.

Results: All lesions with TTS less than or equal to 4 were benign on clinical  
follow-up. Of the 23 lesions (23%) with score of 5,which considered as suspicious 6  
(6%) were benign lesions, 17 (17%) were malignant lesions. All lesions with TTS  
greater than or equal to 6 were malignant on excisional biopsy . We resulted that in  
our setting, TTS less than or equal to 4 has a specificity of 100% and TTS greater  
than or equal to 6 has a sensitivity of 100%. If TTS is being used as a screening test  
the sensitivity = 96.7% & specificity = 78.9% & accuracy = 90% .The TTS reliably  
guides evaluation and treatment of breast lesions. Lesions scoring 3 or 4 are always  
benign. Lesions with scores greater than or equal to 6 are malignant and should be  
treated accordingly. Confirmatory biopsy is required only for 23% of the lesions that  
receive a TTS of 5.