
Positron emission tomography (PET) and magnetic resonance imaging (MRI) for the assessment of axillary lymph node metastases in early breast cancer: systematic review and economic evaluation

Cooper KL, Meng Y, Harnan S, Ward SE, Fitzgerald P, Papaioannou D, Wyld L, Ingram C, Wilkinson ID, Lorenz E

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Citation

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Authors' objectives

The objectives of this assessment were to evaluate the diagnostic accuracy, cost-effectiveness and effect on patient outcomes of positron emission tomography (PET), with or without computed tomography (CT), and magnetic resonance imaging (MRI) in the evaluation of axillary lymph node metastases in patients with newly diagnosed early-stage breast cancer. PET and MRI are assessed firstly as a replacement for SLNB or 4-NS, and secondly as an additional test prior to SLNB or 4-NS.

Authors' conclusions

Study found that ultrasmall super-paramagnetic iron oxide (USPIO)-enhanced magnetic resonance imaging (MRI) for detection of axillary lymph node metastases in early breast cancer may have similar diagnostic accuracy to current surgical techniques (sentinel lymph node biopsy and 4-node sampling), and that MRI was more cost-effective owing to reduction in adverse events. MRI had greater sensitivity than positron emission tomography (PET) in this setting.

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Indexing Status

Subject indexing assigned by CRD

MeSH

Axilla; Breast Neoplasms; Lymph Nodes; Magnetic Resonance Imaging; Positron-Emission Tomography

Language Published

English

Country of organisation

England

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AccessionNumber

32010000253

Date abstract record published

14/04/2010