

KCBC'S

BREAST  
HEALTH  
LIBRARY

**MICROCALCIFICATIONS**

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*The breast health specialists  
for over thirty years*

*The Knoxville Comprehensive Breast Center Breast Health Library has been designed to give you more information about breast health issues. If you have additional questions after you read this brochure, please be sure to ask a Breast Health Nurse Specialist.*

## **MICROCALCIFICATIONS**

**Microcalcifications** are some of the diagnostic markers our Radiologists, who are Breast Imaging Specialists, look for while evaluating your mammogram. Most often, microcalcifications represent a benign process. Only a small percentage are indicative of cancer. In order to evaluate them, we often get additional magnification views.

Microcalcifications are seen in the soft tissues of the body, including the breast, in which there are many benign structures that can calcify. One of the most common reasons for breast microcalcification development is

normal breast metabolism (not related to dietary intake).

Unfortunately, some cancers also produce microcalcifications which can be one of the very first signs that a small breast cancer may be present. By looking at the size, shape, and distribution of the microcalcifications, the Clinical Breast Radiologist can detect whether these microcalcifications may indicate a possible malignancy. Sometimes it can be difficult to differentiate benign from suspicious microcalcifications on the mammogram. After careful review of the images, the Clinical Breast Radiologist will make one of several recommendations. If the microcalcifications are felt to be benign, short-term follow-up examinations will be recommended. When the microcalcifications are indeterminate, other recommendations are made including ultrasound, breast MRI, or possible tissue sampling. In the event that the Clinical Breast Radiologist feels that tissue is needed for a diagnosis, a stereotactic biopsy in the office may be recommended.

## **Mammography and Examinations by a Physician**

Breast cancer affects almost as many women in their forties as it does women fifty and over. As a result, the American Cancer Society has revised its screening guidelines. The current recommendations are:

**Yearly mammograms are recommended starting at age 40 and continuing for as long as a woman is in good health.**

**Women at high risk should get an MRI and a mammogram every year. Women at moderately increased risk or having a dense mammographic pattern should have breast ultrasound along with their yearly mammogram.**