Editorial Review

From The New England Journal of Medicine
Catherine Chinyama has made a creditable attempt to bring order to the often confusing field of benign breast disease. She begins with an overview of diagnostic approaches -- radiologic, surgical, and pathological -- and then gives a detailed description of specific types of benign breast disease that are organized predominantly by pathological findings. The book concludes with a discussion of risk assessment for patients with the condition. The author addresses one of the major challenges in the field -- a lack of agreement among practitioners regarding terminology -- in a discussion of the various terms used for each benign breast condition, although terminology that is used in the United Kingdom predominates. The main focus of the book is on radiologic and pathological findings in benign breast disease and the implications of those findings as breast-cancer risks. Clinical issues are addressed in less detail and mainly to place the radiologic and pathological findings in context. The book is remarkably well illustrated, with more than 170 figures showing the results of mammography and ultrasonography and histologic images. The figures are informative and clarify points discussed in the text, and many of the images will serve as references for pathologists and radiologists as they interpret their findings. The range of benign breast disease covered in the book is broad, and the notable omission of infectious lesions and problems arising during pregnancy and breast-feeding reflects the fact that such conditions are not associated with the risk of breast cancer. The inclusion of recent advances in molecular pathology provides a biologic basis for discussions of the association of specific lesions with breast cancer and brings a 21st-century approach to the long-standing challenge of deciding which benign breast lesions are precancerous and which are not. Throughout the book, Chinyama reviews the often inconsistent findings in the literature regarding the breast-cancer risk associated with various benign breast lesions; she reports not only on the relative risks but also on the absolute risks during a defined period. For example, the relative risk of breast cancer in women with atypical ductal hyperplasia is reported to be 4.4 as compared with women without proliferative disease, whereas the absolute risk within 10 to 15 years is 10 percent. The influence of a patient's family history on these general risks is addressed. Despite this attention to detail, the chapter on risk assessment is the weakest one in the book. A more critical approach to studies of risk evaluation would have been useful, since it would have given more weight to the results of cohort studies instead of case-control studies. The book emphasizes the use of Wolfe mammographic patterns rather than tissue density as radiologic determinants of risk, although both methods are discussed. Furthermore, the results of the Women's Health Initiative (a randomized trial that showed a clear increase in breast-cancer risk among women receiving combined hormone-replacement therapy) are not included, despite a discussion of the methodologically weaker Million Women Study, which was published later. Offsetting these limitations is Table 12.1, a gem that provides a well-referenced summary of relative breast-cancer risks that are associated with various pathologically defined benign breast diseases. The book would have been strengthened by a discussion of common clinical presentations of benign breast disease -- for example, generalized lumpiness, dominant lumps, and both cyclical and noncyclical breast pain -- as well as a review of normal breast anatomy and development. Furthermore, Chinyama refers to the need for multidisciplinary meetings to address correlations between radiology and pathology in managing benign breast disease but does not make recommendations regarding the nature or format of such meetings or whether all benign breast lesions should be discussed. Nonetheless, this very useful book will interest any clinician, radiologist, or pathologist who deals with benign breast disease and its association with breast cancer. Some readers may disagree with the terminology and classification system used in some sections, but such a lack of consensus reflects the current reality, rather than any limitations in the writing. The book's detailed focus on specialized aspects of radiology and pathology makes it more useful for breast specialists than for general practitioners. *Pamela J. Goodwin, M.D.*

Review

From the reviews:

"The advent of breast screening … now means that the breast team is regularly presented with a variety of benign pathological diagnoses and an understanding of the clinical relevance of these is essential. This text aims to contribute towards this understanding. … Pathological slides are beautifully reproduced in full colour … . a comprehensive text on the pathology and risk assessment of benign breast disease which is well illustrated with pathological slides. … it would represent useful supplementary reading for non-pathologists … ." (Dr. J Litherland, RAD Magazine, July, 2005)

"Catherine Chinyama has made a creditable attempt to bring order to the often confusing field of benign breast disease. … The main focus of the book is on radiologic and pathological findings in benign breast disease … . The book is remarkably well illustrated … . The figures are informative … . The range of benign breast disease covered in the book is broad … . this very useful book will interest any clinician, radiologist, or pathologist who deals with benign breast disease … ." (Pamela J. Goodwin, The New England Journal of Medicine, September, 2004)

About the Author

Dr. Chinyama qualified with Honours Degree in Medicine in Harare, Zimbabwe, Trained in Breast Pathology at St. Bartholomew's Hospital, London and Bristol South West Breast Screening Unit in Bristol,UK. Worked as Senior Lecturer/Honorary Consultant in Histopathology at Guy's and St.Thomas' Hospital, London. Currently working as a Consultant Pathologist, Princess Elizabeth Hospital, Guernsey, Channel Islands.

Users Review

From reader reviews:

Jack Alexandre:

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Cory Marshall:

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