

## Update: Missed palpable breast cancers and CBE competencies

There is now sufficient medical evidence to advise that every breast cancer screening program conduct proficient clinical breast examinations (CBE'S).

**A model-based comparison of breast cancer screening strategies: mammograms and clinical breast examinations.** Shen Y, Parmigiani G  
*Cancer Epidemiol Biomarkers Prev.* 2005 Feb;14(2):529-32 > [CBE + Mammo](#)

**Palpable breast cancers are inherently different from nonpalpable breast cancers.** Skinner KA, Silberman H, Sposto R, Silverstein MJ. *Ann Surg Oncol.* 2001 Oct;8(9):705-10 [Palpable breast cancers](#)

**Palpable breast cancer which is mammographically invisible.** Rajentheran R, Rao CM, Lim E, Lennard TW. *Breast.* 2001 Oct;10(5):416-20. [False Negatives](#)

The medical findings also report that mammograms are unacceptably variable and too often fail to confirm *palpable* (manual) evidence of breast lesions.

For example:

**Clinical value of mammography for symptomatic women 35 years of age and younger.** Hindle WH, Davis L, Wright D. *Am J Obstet Gynecol.* 1999 Jun;180(6 Pt 1):1484-90 [missed cancers](#)

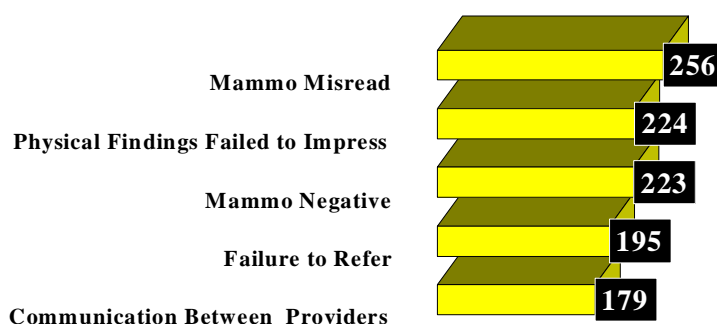
**Physician predictors of mammographic accuracy.** Smith-Bindman R, Chu P, Miglioretti DL, Quale C, Rosenberg RD, Cutter G, Geller B, Bacchetti P, Sickles EA, Kerlikowske K. *J Natl Cancer Inst.* 2005 Mar 2;97(5):358-67 [interpretation errors](#)

**Accuracy of screening mammography interpretation by characteristics of radiologists.** Barlow, W.E. et.al *J Natl Cancer Inst.* 2004 Dec 15;96(24):1840-50  
[Differences in ability](#)

## Avoiding malpractice: Confirming [palpable](#) cancers

These and related findings explain why breast cancer screening and diagnostic failures account for the largest number of malpractice suits and the largest adult indemnity dollars paid out. To access click here> [PIAA](#)

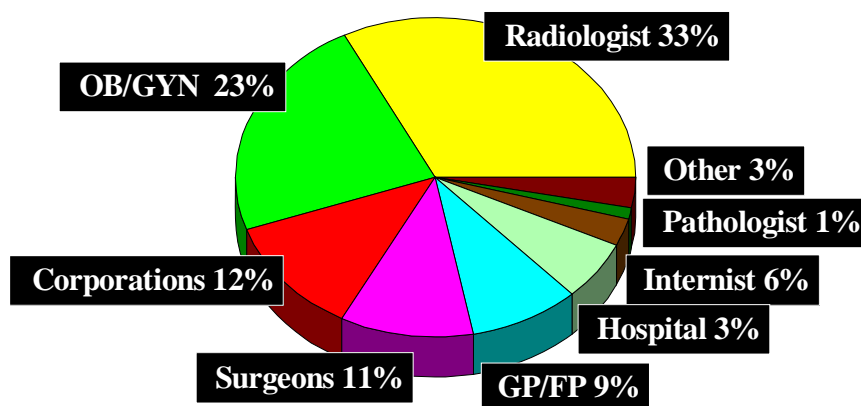
### Missed breast cancer – successful lawsuit bases (PIAA Study)



Mammograms are found to be ineffective for women with dense breasts at any age because firm breast tissue is radiographically opaque. Women under 40 have a lower incidence of breast cancer but typically present with significantly more aggressive cancers and a poorer prognosis. [risk](#)

One study examined the usefulness of mammography in screening a cohort of women aged 35 years or younger. Although 23 had *palpable* cancers, none of their 1,908 mammograms contributed useful information. [Click here> missed palpable cancers](#)

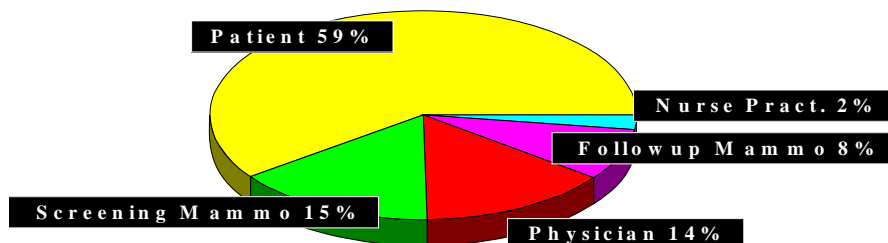
### Successful lawsuits by specialty



### Certifying CBE competence through training and testing

The data confirm that most breast cancers are palpable. Not surprisingly, the data also confirm that patients or clinicians first detect most breast lesions. To access these reports [click here> CBE Method of Discovery Women MD's PIAA CBE + MAMMO](#)

### Breast lesion first discovered by: (PIAA Summary)



Quality CBE's are a universally recommended component of public and private breast cancer screening programs. The ability to perform proficient CBE requires skill-based training and practice. Validated training standards and technology have emerged clinicians to learn and/or certify examination skill and quality.

JAMA published a report concluding that: *"MammaCare standards for teaching and practicing effective CBE emerged from an extensive series of laboratory studies measuring lump detection and breast examination skills using tactually accurate breast models embedded with small simulated lesions"* [click here> JAMA](#)

### Summary of evidence-based findings

- Most breast cancers are first detected someone's fingers
- About 35-40% of breast cancers are *not* confirmed by mammograms (false negatives)
- Mammograms do not reliably detect small <1cm cancers.
- Mammograms do not penetrate firm (dense) breast tissue.
- Most lawsuit payouts result from missed palpable breast cancers.
- Published studies identify MammaCare as the standard of practice.

**Conclusion: Competent CBE reduces a patient's exposure to missed palpable breast cancer and can prevent the corresponding professional exposure. A skill-based method for proficient clinical breast examination has been validated and recognized as the standard of practice. Professional certification in CBE and instructional learning systems can achieve or improve CBE competencies.**