

HOLOGIC® The Sounce of State	3D MAMMOGRAPHY TM Clinical Papers	Date	Screening	Diagnostic	Recall Rates	Dose	Outcomes	Economics	Cancer Detection	Interval Cancers	Biopsy
Sonographically occult lesion Ariaratnam NS, Little ST, Whitley M	s vacuum assisted biopsy for Tomosynthesis-detected ns A, Ferguson K - Clinical Imaging Volume 47, January–February 2018, Pages 4-8 and accurate for lesions found through DBT and occult on FFDM and	01/2018		х							х
Destounis S, Arieno A, Morgan R, Pł	of Digital Breast Tomosynthesis Into Clinical Practice nilpotts LE - Breast Tomosynthesis 2018, Pages 18–25 ts diagnostic performance, DBT will, in due course, become the	01/2018						х			
Philpotts LE, Hooley RJ - Breast Tom	ed screening recalls and fewer diagnostic mammograms requiring	01/2018									
Destounis S - Seminars in Ultrasoun *Key Point: This article desc	ynthesis in Screening and Diagnostic Breast Imaging d, CT and MRI Available online 14 August 2017 ribes the history of digital breast tomosynthesis through the review s and scientific presentations.	08/2017	x	x							
tomosynthesis mammogram Bennett DL, Merenda G, Schnepp S, *Key Point: Primary breast of	a mimicking calcified fibroadenoma on screening digital breast Lowdermilk MC - Radiology Case Reports Available online 29 July 2017 esteosarcoma lesion presents as a "sunburst" on the DBT images and se of similarities to a calcifiedfibroadenoma.	07/2017		х					х		
An Observer Performance St Chan HP, Helvie MA, Hadjiiski L, Jeft Radiology Available online 21 June *Key Point: BI-RADS assessn	ries DO, Klein KA, Neal CH, Noroozian M, Paramagul C, Roubidoux MA - Academic	6/2017	х								
-	North America Volume 55, Issue 3, May 2017, Pages 493-502 false-positive examinations and the increase of cancer detection is	5/2017	х		х		х		х		



HOLOGIC®	3D MAMMOGRAPHY TM Clinical Papers	Date	Screening	Diagnostic	Recall Rate	Dose	Outcomes	Economics	Cancer Detect	Interval Canc	Biopsy
*Key Point: Utilizing a synthesiz	phy Imaging of North America Volume 55, Issue 3, May 2017, Pages 503-512 zed 2D image with DBT in a screening exam instead of acquiring a on dose by nearly one-half, making DBT more widely available	05/2017				х					
	America Volume 55, Issue 3, May 2017, Pages 475-492 o digital mammography, imaging the breast with DBT for non-	05/2017							х		
Population Miller JD, Bonafede MM, Herschorn SD Radiology Volume 14, Issue 4, April 201 *Key Point: In order to deliver	Tomosynthesis for Breast Cancer Screening in a US Medicaid , Pohlman SK, Troeger KA, Fajardo LL - Journal of the American College of 17, Pages 467-474.e5 value-based care to Medicaid programs, a wider adoption of DBT need for follow-up diagnostic services while improving the	04/2017						x			
Tomosynthesis in a Large Scree Aujero M, Gavenonis S, Benjamin R, Zh 2017162674 *Key Point: Synthesised 2D + D	sized Two-dimensional Mammography Combined wth ning Population ang Z, Holt J - Radiology. 2017 Apr;283(1):70-76. doi: 10.1148/radiol. BT performed better than DBT + FFDM or FFDM alone in a large erms of recall rates, PPVs without any loss in cancer detection	04/2017	х		х	х	х		х		
compared to double-reading of Houssami N, Bernardi D, Pellegrini M, N Epidemiology Volume 47, April 2017, P *Key Point: The authors found	ingle-reading of breast tomosynthesis (3D-mammography) 2D-mammography: Evidence from a population-based trial Valentini M, Fantò C, Ostillio L, Tuttobene P, Luparia A, Macaskill P - Cancer ages 94-99 an increase detection of breast cancer and lower false positive DBT compared to a double-reading of FFDM.	04/2017	х				X				



HOLOGIC* 3D MAMMOGRAPHY Clinical Papers	Date	Screening	Diagnostic	Recall Rates	Dose	Outcomes	Economics	Cancer Detect	Interval Cance	Biopsy
Characterisation of noise and sharpness of images from four digital breast tomosynthesis systems for simulation of images for virtual clinical trials Mackenzie A, Marshall N, Hadjipanteli A, Dance D, Bosmanns H, Young K - Phys. Med. Biol. 62(2017)2376-2397. doi.org/10.1088/1361-6560/aa5dd9 *Key Point: Evaluation and comparrison of four different digital breast tomosynthesis manufacturers in terms of image sharpness and image noise.	02/2017	х								
Value Analysis of Digital Breast Tomosynthesis for Breast Cancer Screening in a US Medicaid Population. Miller JD, Bonafede MM, Herschorn SD, Pohlman SK, Troeger KA, Fajardo LL - J Am Coll Radiol. 2017 Jan 26. pii: S1546-1440(16)31328-X. doi: 10.1016/j.jacr.2016.11.019. *Key Points: Wider adoption of DBT presents an opportunity to deliver value-based care to Medicaid programs and to help address disparities and barriers to accessing preventive care by some of the nation's most vulnerable citizens.	01/2017	х					х			
Diagnostic performance of tomosynthesis and breast ultrasonography in women with dense breasts: a prospective comparison study Kim WH, Chang JM, Lee J, Chu AJ, Seo M, Gweon HM, Koo HR, Lee SH, Cho N, Bae MS, Shin SU, Song SE, Moon WK - Breast Cancer Res Treat. 2017 Jan 12. doi: 10.1007/s10549-017-4105-z. *Key Point: Tomosynthesis exhibits comparable performance to U/S as an adjunct to mammography for diagnosis of breast cancer, except among women with extremely dense breasts.	01/2017		х			x		x		
Digital breast tomosynthesis: Dose and image quality assessment A. Maldera, P. De Marco, P.E. Colombo, D. Origgi, A. Torresin - Physica Medica Volume 33, January 2017, Pages 56-67 *Key Point: The paper offers a comparison for dose and image quality among four DBT systems and finds the the reconstruction and post processing algorithms greatly affects the image quality	01/2017				x					
Breast cancers detected in only one of two arms of a tomosynthesis (3D-mammography) population screening trial (STORM-2). Bernardi D, Houssami N - Breast. 2017 Jan 17;32:98-101. doi: 10.1016/j.breast.2017.01.005. *Key Point: This short report describes 13 (from 90) cancers detected in only one of two paralled double-reading arms implemented in STORM-2. Most were detected at 3D-mammography only and predominantly by one reader from double-reading pairs, highlighting that 3D-mammograph may enable detection of cancers that are challenging to perceive at routine screening.	01/2017	х				X				

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Fiorica JV - Clin Obstet Gynecol. 201 *Key Point: This article is an o	mmography, and Other Modalities 6 Dec;59(4):688-709. Experience of the modalities available for breast cancer screening. The clinician individualize breast cancer screening for each patient.	12/2016	х				X				
full-field digital mammograp Clauser P, Nagl G, Helbich TH, Pinker Eur J Radiol. 2016 Dec;85(12):2161-2 *Key Point: Wide scan-angle	gital breast tomosynthesis with a wide scan angle compared to by for the detection and characterization of microcalcifications. -Domenig K, Weber M, Kapetas P, Bernathova M, Baltzer PA 2168. doi: 10.1016/j.ejrad.2016.10.004. Epub 2016 Oct 7. DBT enabled the detection and characterization of micront differences from FFDM. Inter-reader variability was seen.	12/2016		х			х				
mammography (SM) with dig diagnostic performance and Kang HJ, Chang JM, Lee J, Song SE, S doi: 10.1016/j.ejrad.2016.09.007. Ep *Key Point: The combined us specificity to two-view DM wi	ateral oblique (MLO) digital mammography (DM) with synthesized ital breast tomosynthesis (DBT) images: Comparison of the radiation dose with two-view DM with or without MLO-DBT. Inin SU, Kim WH, Bae MS, Moon WK - Eur J Radiol. 2016 Nov;85(11):2042-2048. Inin 2016 Sep 12. <i>GE tomo</i> e of CC-DM plus MLO-DBT with SM showed higher sensitivity and the a smaller AGD increment and comparable diagnostic few DM with MLO-DBT with a significantly lower mean AGD.	11/2016	х			х					
Histologic Grade. Wang WS, Hardesty L, Borgstede J, T *Key Point: Breast cancers id	igital Breast Tomosynthesis: A Comparison of Pathology and Fakahashi J, Sams S - Breast J. 2016 Nov;22(6):651-656. doi: 10.1111/tbj.12649. entified through the addition of tomosynthesis are associated with a pathology and prognostically more favorable than cancers ligital mammography alone.	11/2016					х		х		
detection of breast cancers. Choi WJ, Kim HH, Lee SY, Chae EY, SI Epub 2015 Nov 3.	Il breast tomosynthesis and full-field digital mammography for the nin HJ, Cha JH, Son BH, Ahn SH, Choi YW - Breast Cancer. 2016 Nov;23(6):886-892. demonstrated that combining DBT and FFDM is superior in standard FFDM.	11/2016					х		х		

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HOLOGIC* The Science of Sure	3D MAMMOGRAPHY Clinical Papers	Date	Screening	Diagnostic	Recall Rates	Dose	Outcomes	Economics	Cancer Detection	Interval Cancers	Biopsy
digital breast tomosynthes Su X, Lin Q, Cui C, Xu W, Wei Z, Fe *Key Point: DBT and US ga DCIS compared with DM in than that of US in all cases	oma in situ of the breast: comparison of diagnostic accuracy of is, digital mammography, and ultrasonography. i J, Li L - Breast Cancer. 2016 Nov 11 ve better detection rates and diagnostic accuracy for non-calcified all cases and in dense breasts. The detection rate of DBT was lower and in dense breasts. The diagnostic accuracy of DBT was slightly cases and in dense breasts, but the difference was not statistically	11/2016	х	x			х		х		
the Society of Breast Imagi Hardesty LA, Kreidler SM, Glueck *Key Point: DBT is becoming would assist practices in de	sis Utilization in the United States: A Survey of Physician Members of ng. DH - Am Coll Radiol. 2016 Nov;13(11S):R67-R73. doi: 10.1016/j.j acr.2016.09.030. Ing more common but remains a limited resource. Clinical guidelines ciding whether to adopt DBT and in standardizing which patients of members responded to the survey.	11/2016					х	х			
Screening Technology Into Lee CI, Lehman CD - • J Am Coll Published in 2013 *Key Point: Published in 20	sis and the Challenges of Implementing an Emerging Breast Cancer Clinical Practice. Radiol. 2016 Nov;13(11S):R61-R66. doi: 10.1016/j.jacr.2016.09.029. D13, this article speaks to the potential of digital breast tomosynthesis d negative effects of the adoption of this technology.	11/2016						х			
(EUSOBI) and 30 national be Herzegovina, Bulgaria, Croc Greece, Hungary, Iceland, I Poland, Portugal, Romania Sardanelli F, Aase HS, Álvarez M, Stojanovic D, Briediene R, Brkljaci Fuchsjaeger MH, Gilbert FJ, Graf C Lisencu EC, Luczynska E, Mann RN Pediconi F, Pijnappel RM, Pinker RM, Vejborg I, Vourtsis A, Forrai C *Key Point: Digital mammo	g for breast cancer by the European Society of Breast Imaging breast radiology bodies from Austria, Belgium, Bosnia and atia, Czech Republic, Denmark, Estonia, Finland, France, Germany, Ireland, Italy, Israel, Lithuania, Moldova, The Netherlands, Norway, Serbia, Slovakia, Spain, Sweden, Switzerland and Turkey. Azavedo E, Baarslag HJ, Balleyguier C, Baltzer PA, Beslagic V, Bick U, Bogdanovicce B, Camps Herrero J, Colin C, Cornford E, Danes J, de Geer G, Esen G, Evans A, D, Hargaden G, Helbich TH, Heywang-Köbrunner SH, Ivanov V, Jónsson Á, Kuhl CK, M, Marques JC, Martincich L, Mortier M, Müller-Schimpfle M, Ormandi K, Panizza P, K, Rissanen T, Rotaru N, Saguatti G, Sella T, Slobodníková J, Talk M, Taourel P, Trimboli G Eur Radiol. 2016 Nov 2. Degraphy (not film-screen or computer radiography) should be used. In emammography" in the screening setting in the next future.	11/2016	X								



HOLOGIC* The Science of Sun	3D MAMMOGRAPHY TM Clinical Papers	Date	Screening	Diagnostic	Recall Rates	Dose	Outcomes	Economics	Cancer Detection	Interval Cancers	Biopsy
Sardanelli F, Fallenberg EM, Clauser P, Imaging (EUSOBI), with language revie 2016 Nov 16. *Key Point: Information about	he EUSOBI recommendations on information for women Trimboli RM, Camps-Herrero J, Helbich TH, Forrai G - European Society of Breast w by Europa Donna—The European Breast Cancer Coalition - Insights Imaging. new mammographic technologies (tomosynthesis and contrast- phy). Digital breast tomosynthesis increases cancer detection and	11/2016	х	х	x		x				
digital mammography. Cai S, Yan J, Cai D, Huang M, Yan L - Zh Chinese]	efficiency between digital breast tomosynthesis and full-field nong Nan Da Xue Xue Bao Yi Xue Ban. 2016 Oct 28;41(10):1075-1081. [Article in ical significance in BI-RADS classification for breast X-ray	10/2016					х				
Quantra [™] and 5th edition BI-R Ekpo EU, Mello-Thoms C, Rickard M, B 10.1016/j.breast.2016.10.003.	rennan PC, McEntee MF - Breast. 2016 Oct 18;30:185-190. doi: moderate to substantial agreement in BD assessment between	10/2016							х		
*Key Point: This article review and benign and malignant image diagnostic workup, and image-	JR Am J Roentgenol. 2016 Oct 27:1-11. Is key features of DBT including technique, clinical implementation, ing findings. We will also present the benefits of DBT in screening, guided biopsy.	10/2016	х	х	х		х	х	х		x
mammography for the assessn study. Whelehan P, Heywang-Köbrunner S2, R, Reilly M, Stahnke M, Evans A - Clin F Siemens tomo *Key Point: Siemens DBT demo	nent of screen-detected soft-tissue abnormalities: a multi-reader vinnicombe SJ, Hacker A, Jänsch A, Hapca A, Gray R, Jenkin M, Lowry K, Oeppen Ladiol. 2016 Oct 10. pii: S0009-9260(16)30345-2. doi: 10.1016/j.crad.2016.08.011. constrates equivalent diagnostic accuracy according to ROC curve SMVs (supplementary mammographic views) in screen-detected formalities.	10/2016					x		x		



HOLOGIC* The Science of State	3D MAMMOGRAPHY Clinical Papers	Date	Screening	Diagnostic	Recall Rates	Dose	Outcomes	Economics	Cancer Detecti	Interval Cance	Biopsy
Hodgson R, Heywang-K€obrunner SH, Hai Published by Elsevier Ltd. *Key Point: US and European studinvasive cancer detection rates, in	graphy for breast cancer screening Evey SC, Edwards M, Shaikh J, Arber M, Glanville J - The Breast 27 (2016) 1e10 Hies show that DBT + FFDM, compared to FFDM, yields higher Creasing the effectiveness of breast cancer screening. The use Every reduce both program costs and distress caused by a false	10/2016	х							х	
comparison between tomosynthe Berger N, Schwizer SD, Varga Z, Rageth C, 10.1016/j.clinimag.2016.09.003.	ocalci!cations to predict the size of a ductal carcinoma in situ: esis and conventional mammography Frauenfelder T, Boss A Clin Imaging. 2016 Nov - Dec;40(6):1269-1273. doi: ady determined that DBT provides a slightly better estimation of	09/2016					х				
Breast Tomosynthesis Screening Zuckerman SP, Conant EF, Keller B, Maidr radiology.rsna.org n Radiology: Volume 2	nent ADA, Barufaldi B, Weinstein SP, Synnestvedt M, McDonald ES - 31: Number 3—December 2016 DBT allowed for the benefits of DBT with a decrease in radiation	08/2016	х			х					
resonance imaging added to digit Kim WH, Chang JM, Moon HG, Yi A, Koo H 10.1007/s00330-015-3998-3. Epub 2015	nthesis (DBT) plus mammography was compared with MRI plus	06/2016					х				
accuracy study for comparison be full-field digital mammography. Chae EY, Kim HH, Cha JH, Shin HJ, Choi W. *Key Point: In this study, a comparison.	F breast lesions in a selective diagnostic population: diagnostic etween one-view digital breast tomosynthesis and two-view 1 Br J Radiol. 2016 Jun;89(1062):20150743. doi: 10.1259/bjr. 20150743. arison between one-view DBT compared to two-view digital reader performance for detection and characterization of	06/2016		х			х				

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HOLOGIC* 3D N	/IAMMOGRAPHY Clinical Papers	Date	Screening	Diagnostic	Recall Rates	Dose	Outcomes	Economics	Cancer Detection	Interval Cancers	Biopsy
Analysis from 3 Years of Breast Cancer Screenia McDonald ES, Oustimov A, Weinstein SP, Synnestvedt MB, 43 doi:10.1001/jamaoncol.2015.5536 *Key Point: Suggests 3D MAMMOGRAPHY™ scr	Schnall M, Conant E - JAMA Oncology, 2016 June 1;2(6):737-	06/2016	х	х		х	х				
Breast cancer screening with digital breast tom Skaane P - Breast Cancer. 2016 Apr 30. *Key Point: The retrospective and the prospect have all demonstrated that tomosynthesis has a screening. DBT should be regarded as a better n limitations of the conventional mammography, new technique in the next future of breast cancer.	tive screening studies comparing FFDM and DBT a great potential for improving breast cancer nammogram that could improve or overcome and tomosynthesis might be considered as the	04/2016	х								
	hort study within the PROSPR consortium. DL, Onega T, Tosteson AN, McCarthy AM, Poplack SP, Haas JS, Treat (2016) 156:109–116 DOI 10.1007/s10549-016-3695-1 mentation of DBT screening based on increased	03/2016	х		х	х	х	х	x		
Breast cancer screening controversies: who, who chetlen A, Mack J, Chan T - Clinical Imaging, Volume 40, Is *Key Point: The article compares and contrasts breast screening ultrasound, magnetic resonance.	ssue 2, March–April 2016, Pages 279-282 s screening mammography, tomosynthesis, whole-	03/2016	х	х							



HOLOGIC®	3D MAMMOGRAPHY Clinical Papers	Date	Screening	Diagnostic	Recall Rates	Dose	Outcomes	Economics	Cancer Detection	Interval Cancers	Biopsy
detected cancers and false (Houssami N, LÃ¥ng K, Bernardi D, 10.1016/j.breast.2016.01.007. Rev *Key Point: This pictorial remammography and tomosylonly at tomosynthesis scree	view prospecttive screeing trials the performed standard digital nthesis in the same screening patients. It highlights cancers detected ning and screens falsely recalled in the course of breast ustrating both true-positive (TP) and false-positive (FP) detection	02/2016	х		х				х		
*Key Point: Prospective screstudies have demonstrated effectiveness and feasibility	is (DBT): a review of the evidence for use as a screening tool. n Radiol. 2016 Feb;71(2):141-50. doi: 10.1016/j.crad.2015.11.008. Review. UK eening studies were reviewed and the authors agreed with the reduced recall rates and increased cancer detection, in the UK, cost studies are needed before implementation into the UK NHSBSP can s technology is undoubtedly an improvement on conventional 2D	02/2016	х		х	х	х	х			
diagnosis of screen-detecte Cornford EJ, Turnbull AE, James JJ, Chen Y, Jones V Br J Radiol. 2016 *Key Point: This study prov system demonstrating that is	t tomosynthesis vs supplementary mammographic views for d soft-tissue breast lesions Tsang R, Akram T, Burrell HC, Hamilton LJ, Tennant SL, Bagnall MJ, Puri S, Ball GR, 1;89(1058):20150735. doi: 10.1259/bjr.20150735. UK study on GE DBT ides evidence for the use of the commercially available GE DBT it is at least equivalent to supplementary mammographic views in the reen-detected abnormalities.	01/2016					х				
to digital mammography in experience and review of th Carbonaro LA, Di Leo G, Clauser P, Bazzocchi M, Sardanelli F Eur J R *Key Point: DBT was confin	digital breast tomosynthesis as an adjunct the screening setting. A double reading ne literature. Trimboli RM, Verardi N, Fedeli MP, Girometti R, Tafà A, Bruscoli P, Saguatti G, adiol. 2016 Apr;85(4):808-14. doi: 10.1016/j.ejrad.2016.01.004. med to reduce recall rates and was confirmed through double eased inter-reader agreement.	01/2016	х		х						



HOLOGIC* The Bolence of State	3D MAMMOGRAPHY Clinical Papers	Date	Screening	Diagnostic	Recall Rates	Dose	Outcomes	Economics	Cancer Detection	Interval Cancers	Biopsy
for the U.S. Preventive Service: Melnikow J, Fenton JJ, Whitlock EP, Mi 16;164(4):268-78. doi: 10.7326/M15-1 *Key Point: This systematic rev	glioretti DL, Weyrich MS, Thompson JH, Shah K Ann Intern Med. 2016 Feb	01/2016	х		x						
modality: results from the Mal study. LÃ¥ng K, Andersson I, Rosso A, Tingber 10.1007/s00330-015-3803-3. Siemens *Key Point: Over 10,000 screen The study found a significant in	st tomosynthesis as a stand-alone breast cancer screening mö Breast Tomosynthesis Screening Trial, a population-based g A, Timberg P, Zackrisson S Eur Radiol. 2016 Jan;26(1):184-90. doi: ning exams from an urban Swedish population was investigated. crease in cancer detection rate when using one-view DBT as a compared to two-view digital mammogram (DM).	01/2016	х						х		
Assessment From a Prospective Sumkin JH, Ganott MA, Chough DM, Ca Dec;22(12):1477-82. doi: 10.1016/j.acr *Key Point: Large inter-reader	atullo VJ, Zuley ML, Shinde DD, Hakim CM, Bandos Al, Gur D Acad Radiol. 2015	12/2015	х		х						
Cancer Screening within the PF Tosteson AN, Beaber EF, Tiro J, Kim J, N Garcia M, Corley DA, Haas JS, Halm EA consortium. J Gen Intern Med. 2016 Ap *Key Point: This study highligh	AcCarthy AM, Quinn VP, Doria-Rose VP, Wheeler CM, Barlow WE, Bronson M, Kamineni A, Rutter CM, Tosteson TD, Trentham-Dietz A, Weaver DL; PROSPR or;31(4):372-9. doi: 10.1007/s11606-015-3552-7. Its the opportunity for improving the delivery of cancer screening ent, provider, clinic, and health system characteristics associated	12/2015	X					х			



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Retrospective Reading Stud Gilbert FJ, Tucker L, Gillan MG, Wil Morrish O, Young KC, Duffy SW – F *Key Point: Compared the obreast tomosynthesis (DM p	omosynthesis for Depicting Breast Cancer Subgroups in a UK y (TOMMY Trial) Isher P, Cooke J, Duncan KA, Michell MJ, Dobson HM, Lim YY, Suaris T, Astley SM, Isadiology. 2015 Dec; 277(3):697-706. doi: 10.1148/radiol.2015142566. iagnostic performance of digital mammography (DM), DM plus lus BT), and synthesized DM plus BT (sDM plus BT) for depicting ent subgroups of women invited for screening. Summary Card	12/2015	х	х		х					
Peppard HR, Nicholson, BE, Rochm RadioGraphics 2015; 35:975–990 - *Key Point: The authors' ex diagnostic workflow to evalu	is in the Diagnostic Setting: Indications and Clinical Applications an CM, Merchant JK, Ray C. Mayo RC, Harvey JA Published online 10.1148/rg.2015140204 Decrience shows that DBT can be implemented effectively in the late and localize potential lesions more efficiently. DBT may conal supplemental mammography at diagnostic workup and obviate ses.	07/2015		х			х	х			
	east Cancer: Final Findings & Decision Report Review/California Technology Assessment Forum	04/2015						х			
Issues to Consider Before In Practice Hardesty LA - AJR March 2015; 204 *Key Point: When appropria technologist and radiologist	nplementing Digital Breast Tomosynthesis Into a Breast Imaging 1:681–684 Interpretation is given to image acquisition, interpretation, storage, training, patient selection, billing, radiation dose, and marketing, a breast imaging practice can be successful.	03/2015	х					х			
insured US population Bonafede MM, Kalra VB, Miller JD, *Key Point: The results of the street cancer screening amount of the street cancer screeni	Fajardo LL - Journal of ClinicoEconomics and Outcomes Research. Jan 2015; 7:53-63 nis study demonstrate clinical and economic favorability of DBT for ong commercially-insured US women. Wider adoption of DBT opportunity to deliver value-based care in the US health care system.	01/2015		х				х			



HOLOGIC* 3D MAMMOGRAPHY Clinical Papers	Date	Screening	Diagnostic	Recall Rates	Dose	Outcomes	Economics	Cancer Detecti	Interval Cance	Biopsy
Screening Recalls after Tomosynthesis Mammography: Are Additional Mammographic Views Necessary? Geisel J, Andrejeva-Wright L, Raghu M, Durand M, Levesque P, Philpotts L – RSNA 2014 *Key Point: Authors conclude that following screening tomosynthesis, there may be no need for additional mammographic views. This will help in reducing costs, radiation, exposure and time.	12/2014	х	х	x						
Comparison of Digital Mammography (FFDM) and FFDM Plus Digital Breast Tomosynthesis in Mammography Screening for Cancer Detection according to Breast Parenchyma Density. Skaane P, Osteras B, Eben E, Gullien R – Radiological Society of North America 2014 *Key Point: Authors conclude that combined digital mammography and tomosynthesis has the potential to significantly improve the cancer detection rate in screening women with BI-RADS density 2-4. Summary Card	12/2014	х	x					х		
Recall Rate Reduction with Tomosynthesis during Baseline Screening Examinations – Assessment from a Prospective Screening Trial Sumkin J, Zuley M, Gur D – Radiological Society of North America 2014 *Key Point: Authors conclude that the addition of tomosynthesis to digital mammography during baseline screening resulted in 32% reduction in recall rate especially in density BI-RADS 2 and 3. The data also demonstrates that the addition of tomosynthesis to DM resulted in a substantially higher PPV3 in recalled women	12/2014	x	x	x						
Analysis of Cancers Missed on Digital Breast Tomosynthesis Zuley M, Koo J, Plecha D, Rose S, Benjamin J, Gur D, Bandos A, Sumkin J, Kelly A, Ganott M - Radiological Society of North America 2014 *Key Point: The authors conclude that the number of cancers detected with tomosynthesis imaging in CC view (78%) is significantly higher than in MLO view (47%). The authors also conclude that with tomosynthesis imaging in one or both views, all cancer types and at all locations may still be missed primarily in dense breasts because the cancers appear like normal tissue.	12/2014					x				
The STORM II (Screening with Tomosynthesis or Mammography II) Trial: Interim Comparison of Screen-reading Strategies in Population Breast Screening Bernardi D, Pellegrini M, Valentini M, Fanto C, Houssami N - Radiological Society of North America 2014 *Key Point: The authors conclude integrated synthetic 2D with 3D MAMMOGRAPHY™ imaging had a comparable cancer detection compared to integrated standard 2D and 3D MAMMOGRAPHY™ imaging, thus reducing the radiation dose in patients undergoing tomosynthesis-based screening. Summary Card	12/2014	х			x					

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Tomosynthesis and Digital 2D Choi J, Han B, Ko E, Ko E, Hahn S - Rac *Key Point: The authors concl mammography compared to d synthetic mammogram may re	Mammography Reconstructed from Digital Breast Mammography for the Detection of T1 Breast Cancer diological Society of North America 2014 ude that the diagnostic performance was similar for synthetic 2D digital 2D mammography. The authors also suggest that the use of educe the radiation dose in patients, since the results indicate that a necessary during the tomosynthesis-based screening.	12/2014	х			х					
(AB) Aguillar V, Ferreira V, Endo E, De *Key Point: The authors concl (US) had no significant effect of	ing Breast Tomosynthesis: Initial Experience qui C, Giannotti D, Cerri G RSNA 2014 ude that the addition of hand-held whole breast ultrasonography on the cancer detection rate after screening with breast ed the number of biopsies, lowering the overall PPV.	12/2014		х			х	х			
Comparison with Prone Stere Schrading S, Distelmaier M, Dirrichs T ahead of print] PubMed PMID: 25386 *Key Point: Digital breast tor	mosynthesis vacuum-assisted biopsy is an efficient and sample lesions, especially ones who mammographic	11/2014		x							х
for Women with Dense Breast (P) Lee CI, Cevik M, Alagoz O, Sprague Lehman CD - Radiology. 2014 Oct 13: *Key Point: Combined biennia dense breasted women aged 5 the potential to decrease the procedures that result from fa	BL, Tosteson AN, Miglioretti DL, Kerlikowske K, Stout NK, Jarvik JG, Ramsey SD,	10/2014	X						х		



HOLOGIC* 3D MAMMOGRAPHY Clinical Papers	Date	Screening	Diagnostic	Recall Rates	Dose	Outcomes	Economics	Cancer Detection	Interval Cancers	Biopsy
Effect of radiologists' experience on breast cancer detection and localization using digital breast tomosynthesis Alakhras MM, Brennan PC, Rickard M, Bourne R, Mello-Thoms C - Eur Radiol. 2014 Sep 6. PubMed PMID: 2519 *Key Point: The authors conclude that the addition of DBT to DM improved radiologists' performance regardless of prior DBT experience; and both increased the number of canced detected and led to more accurate localization of breast lesions. Summary Card	09/2014							х		
Early Clinical Experience with Digital Breast Tomosynthesis for Screening Mammography Durand MA, Haas BM, Yao X, Geisel JL, Raghu M, Hooley RJ, Horvath LJ, Philpotts LE - Radiology. 2014 Sep 1:13 PubMed PMID: 25188431 *Key Point: The authors conclude that the addition of tomosynthesis to conventional 2D mammography resulted in 37% reduction in recall rate compared conventional 2D mammography with no significant difference in the cancer detection rate. The reduction i rate was seen greatest for asymmetries and calcifications.	09/2014			х		х				
Changes in Recall Type and Patient Treatment Following Implementation of Screening D Breast Tomosynthesis Lourenco AP, Barry-Brooks M, Baird G, Tuttle A, Mainiero MB - Radiology. 2014 Sep 22:140317. PubMed PMID 25247407 *Key Point: The study results demonstrate a 31% reduction in recall rate without a change biopsy PPV or cancer detection rate after implementation of DBT. There were fewer recal asymmetries and more recalls for masses, calcifications, and areas of architectural distortions.	9 in 09/2014 s for			х						
A Reader Study Comparing Prospective Tomosynthesis Interpretations with Retrospective Readings of the Corresponding FFDM Examinations Rose SL, Tidwell AL, Ice MF, Nordmann AS, Sexton R Jr, Song R - Acad Radiol. 2014 Sep; 21(9):1204-10. doi: 10.: acra.2014.04.008. PubMed PMID: 25107868 *Key Point: The authors concluded that for screening asymptomatic women, the addition to FFDM resulted in significant improvements in both performance measures, namely a reduction of recall rate (34%) with a simultaneous increase in cancer detection rate, participal invasive cancers (66%). Summary Card	of DBT 09/2014	х		х		x				



HOLOGIC*	3D MAMMOGRAPHY Clinical Papers	Date	Screening	Diagnostic	Recall Rates	Dose	Outcomes	Economics	Cancer Detection	Interval Cancers	Biopsy
Mammography for Breast (Greenberg J, Javitt M, Katzen J, M *Key Point: The authors corresulted in increases in cand	cs of 3D Digital Breast Tomosynthesis Compared With 2D Digital Cancer Screening in Community Practice Ichael S, Holland A - AJR Am J Roentgenol: 203, Sept 2014 Included that patients screened with combined 2D/3D™ exams Icer detection rate (for cancer overall and for invasive cancers) and In the recall rate. The results also demonstrated a significantly higher Ir recalls. Summary Card	09/2014	х		х		х				
mammography in the assess Morel JC, Iqbal A, Wasan RK, Peac 6. doi: 10.1016/j. rad.2014.06.005 *Key Point: The authors conevaluating mammographic adata further demonstrates to	ist tomosynthesis compared with coned compression magnification is ment of abnormalities found on mammography ock C, Evans DR, Rahim R, Goligher J, Michell MJ - Clin Radiol. 2014 Nov;69(11):1112 Epub 2014 Aug 3. PubMed PMID: 25100302 in firm that two-view mammography with one-view DBT is better is abnormalities compared to two-view mammography and CCMM. The chat DBT can be used effectively at screening and in symptomatic er evaluating these abnormalities.	08/2014	х	х							
screening: initial clinical ex Partyka L, Lourenco AP, Mainiero *Key Point: Breast tomosyr	ically occult architectural distortion on digital breast tomosynthesis eperience MB - AJR Am J Roentgenol. 2014 Jul; 203(1):216-22. doi: 10.2214/AJR.13.11047 Athesis can visualize architectural distortions (ADs) better than digital lso can detect ADs that that are hidden on DM, thus increasing the	07/2014	х				х				
mammography) for single-istrategies Houssami N, Macaskill P, Bernardi Ciatto S - Eur J Cancer 2014 Jul; 50 * Key Point: 3D MAMMOGR detection than 2D mammog based on this evidence, screen	mammography or integrating digital breast tomosynthesis (3D-reading or double-reading - Evidence to guide future screening D, Caumo F, Pellegrini M, Brunelli S, Tuttobene P, Bricolo P, Fantò C, Valentini M, (10):1799-807 RAPHY™ imaging was found to offer significantly higher cancer graphy using either single or double reading. The authors suggest that bening practices may be made more effective by employing 3D grather than 2D mammography. Summary Card	07/2014	х						x		



HOLOGIC* 3D MAMMOGRAPHY Clinical Papers	Date	Screening	Diagnostic	Recall Rates	Dose	Outcomes	Economics	Cancer Detection	Interval Cancers	Biopsy
Digital breast tomosynthesis: lessons learned from early clinical implementation (P) Roth RG, Maidment AD, Weinstein SP, Roth SO, Conant EF - Radiographics. 2014 Jul-Aug; 34(4):E89-E102. doi: 10.1148/rg.344130087. PubMed PMID: 25019451 * Key Point: The authors conclude that the clinical implementation of digital breast tomosynthesis improves screening and diagnostic accuracy. The data shows a large education recall rate with an increased cancer detection rate in the screening population. The data also shows enhanced conspicuity of lesions, especially architectural distortion and masses. The authors also conclude that diagnostic tomosynthesis can reduce the number of supplemental imaging examinations (spot compressions and additional projections for localization) thus improving workflow.	07/2014	х	х	x		x	x			
Digital Breast Tomosynthesis: Lessons Learned from Early Clinical Implementation Gartner R, Maidment ADA, Susan P. Weinstein SP, Orel Roth S, Conant EF - RadioGraphics 2014; 34:E89–E102 - Published online 10.1148/4130087 *Key Point: CDBT has shown improved accuracy for screening and diagnostic breast imaging. Or year after implementing DBT for all screening patients, it has demonstrated a substantial reduction in overall callback rate and a trend toward increased cancer detection. In diagnostic examinations, improved conspicuity of lesions with use of DBT, particularly for architectural distortion and masses. The use of DBT in the diagnostic setting can expedite workups by reduction in the number of 2D images needed (ie, spot compressions and additional projections for localization).	07/2014	х	x	x		х	х			
Breast Cancer Screening Using Tomosynthesis in Combination With Digital Mammography Friedewald S, Rafferty E, Rose S, Durand M, Plecha D, Greenberg J, Hayes M, Copit D, Carlson K, Cink T, Barke L, Gre Miller D, Conant E - JAMA. 2014; 311(24):2499-2507. doi:10.1001/jama.2014.6095 *Key Point: In this largest screening study involving over 450,000 examinations, the authors conclude that the addition of 3D MAMMOGRAPHY™ exams to 2D mammography demonstrat an increase in cancer detection rate and a decrease in the recall rate. The authors also conclude that the PPV3 improved by 21% after the introduction of tomosynthesis. Summary Card	o6/2014	х		x		x				



HOLOGIC®	3D MAMMOGRAPHY Clinical Papers	Date	Screening	Diagnostic	Recall Rates	Dose	Outcomes	Economics	Cancer Detection	Interval Cancers	Biopsy
on radiologists' true-positive Bernardi D, Caumo F, Macaskill P, C Montemezzi S, Houssami N Eur J Ca *Key Point: Variability in per reflected in variability with t variability in true positive rea the addition of tomosynthes	formance among radiologists using 2D mammography was also he addition of 3D MAMMOGRAPHY™ exams, however there was less ads using 3D MAMMOGRAPHY™ imaging. The authors conclude that is to 2D conventional mammography either reduced the false e cancer detection rate, with most readers achieving both	05/2014					X				
Features and Histology (AB) Butler R, Marx S, Durand M, H Presented at the ARRS 2013, Scient *Key Point: Tomosynthesis f diagnostic workup, or evalua	ooley R, Horvath L, Raghu M, Andrejeva L, Philpotts L iffic Session 27 - Breast Imaging inds lesions occult on 2D mammography from screening, in ation of palpable masses. Tomosynthesis can also be used for obtaining a histologic diagnosis.	05/2014	х	х							
Freer PE, Wang JL, Rafferty EA - Ra	s in the analysis of fat-containing lesions diographics. 2014 Mar-Apr;34(2):343-58 classification of fat containing lesions using tomosynthesis differs mography.	03/2014		х							
preoperative assessment of Mariscotti G, Houssami N, Durando A, Fonio P, Gandini G Anticancer Re *Key Point: The authors con	M, Bergamasco L, Campanino PP, Ruggieri C, Regini E, Luparia A, Bussone R, Sapino	03/2014		x	х			х			
mammography or full field of Destounis S, Arieno A, Morgan R - J *Key Point: The authors con	Dination digital breast tomosynthesis plus full field digital digital mammography alone in the screening environment Clin Imaging Sci. 2014 Feb 25;4:9 clude that the addition of breast tomosynthesis to digital reduced the recall rate by ~63%	02/2014			х						



HOLOGIC® The Science of State	3D MAMMOGRAPHY TM Clinical Papers	Date	Screening	Diagnostic	Recall Rate	Dose	Outcomes	Economics	Cancer Detect	Interval Canc	Biopsy
combined with one-view and Rafferty E, Park J, Philpotts L, Poplar 281 *Key Point: The authors cond mammography improved the addition of two-view tomosymperformance gain at the same MAMMOGRAPHY™ imaging imaging women with dense be	Il rates for digital mammography and digital mammography Itwo-view tomosynthesis: results of an enriched reader study of St. S. Sumkin J., Halpern E., Niklason L - AJR Am J Roentgenol. 2014 Feb; 202(2):273-18. Ilude that the addition of one-view tomosynthesis to digital diagnostic accuracy and reduced the recall rate. However, the inthesis to digital mammography resulted in twice the diagnostic etime further reducing the recall rate. Two-View 3D in combination with 2D had a large gain in diagnostic accuracy for creasts; in fact the diagnostic accuracy for women with dense alone for women with nondense breasts. Summary Card	02/2014			х		x				
Images: Comparison with Di Images Skaane P, Bandos A, Eben E, Jebsen 2014 Jan 24:131391 *Key Point: The use of synthe FFDM plus DBT when interpre and false-positive scores. The (Hologic's C-View [™] software)	rosynthesis Screening with Synthetically Reconstructed Projection gital Breast Tomosynthesis with Full-Field Digital Mammographic I, Krager M, Haakenaasen U, Ekseth U, Izadi M, Hofvind S, Gullien R - Radiology esized 2D images combined with DBT performed comparably to eting screening mammograms in terms of cancer detection rates authors also conclude that the use of generated 2D images constituted an average dose reduction of 45% while not resulting in erences in diagnostic accuracy. Summary Card	01/2014	х	х	х	X					
Mammograms Alone and in C Zuley M, Guo B, Catullo V, Chough D Radiology 2014 Jan 21:131530 *Key Point: The authors cond combination with tomosynthe FFDM in a routine clinical stud	combination with Tomosynthesis Images by, Kelly A, Lu A, Rathfon G, Spangler M, Sumkin J, Wallace L, and Bandos A - clude that the use of synthetic mammograms whether alone or in lesis has similar diagnostic accuracy and may eliminate the need for ledy. The authors also conclude that the use of synthetic lediation dose in patients that are undergoing tomosynthesis based mmary Card	01/2014	х			x					



HOLOGIC®	3D MAMMOGRAPHY Clinical Papers	Date	Screening	Diagnostic	Recall Rates	Dose	Outcomes	Economics	Cancer Detection	Interval Cancers	Biopsy
breast cancer screening Haas BM, Kalra V, Geisel J, Raghu N *Key Point: In this study, 13 examinations were retrospe reduction in recall rates (~30 old and in women with dens	is plus digital mammography and digital mammography alone for 1, Durand M, Philpotts L - Radiology 2013 Dec;269(3):694-700 158 screening mammography examinations and 6,100 combo ctively review. The study results demonstrated a significant 19%, the greatest reductions seen for women younger than 50 years the breasts, ~50%) along with an increase in the cancer detection rate duction of tomosynthesis in the clinical practice. Summary Card	12/2013	х		х						
Measure of Outcome Conant E, Wan F, Thomas M, Synno of North America 2013, SSK01-02 *Key Point: The implementa reduction in recall rates and	estvedt M, Weinstein S, Roth S, Kontos D, McCarthy A, Mitra N - Radiological Society tion of tomosynthesis in a large screening program demonstrated a an increase in cancer detection rates that varied by reader. The reader, as measured by PPV1, showed significant improvements for or 1 reader.	12/2013	х		х		х				
*Key Point: 50 biopsy recomfrom September 2012 to Matomosynthesis as part of the detected by the addition of	Findings of Breast Lesions Detected by Tomosynthesis liological Society of North America 2013, SSK01-08 mendations were made in 4350 women that underwent screening rch 2013, including 15 biopsies in 2,610 women choosing to undergo ir screening exam. The authors conclude that 30% more cancers are comosynthesis to FFDM in their screening program. They also improved with the addition of tomosynthesis to their practice	12/2013					X				
Tomosynthesis versus Conv Dang P, Humphrey K, Freer P, Halp *Key Point: Conclude that consignificantly better with tom	tion and Characterization in Invasive Cancers Using Breast entional Mammography ern E, Saksena M, Rafferty E - Radiological Society of North America 2013, SSE02-03 encers presenting with architectural distortion were detected osynthesis as compared to digital mammography. Similar effect was encer morphology. Summary Card	12/2013		x			x				



HOLOGIC* 3D MAMMOGRAPHY Clinical Papers	Date	Screening	Diagnostic	Recall Rates	Dose	Outcomes	Economics	Cancer Detecti	Interval Cance	Biopsy
Tomosynthesis in Breast Cancer Visualization as a Function of Mammographic Density Butler R, Ostrover R, Hooley R, Geisel J, Raghu M, Philpotts L - Radiological Society of North America 2013, SSE02-04 *Key Point: In this study, 246 cancers (in 201 women) imaged with the combo mode (Tomo plus 2D mammography) that were diagnosed between 10/3/2011 and 1/16/2013 were reviewed by radiologists. Tomosynthesis imaging is especially beneficial for visualizing non-calcification breas cancers in 80% women with scattered and heterogeneously dense breasts. It is also better in visualizing lesions associated with architectural distortion, invasive lobular histology that is difficult to detect and in visualizing small tumors.	,		х			X				
Digital Breast Tomosynthesis in Diagnostic Mammography: Can Tomo Affect the Final Assessment Categories? Raghu M, Hooley R, Philpotts L, Geisel J, Durand M, Andrejeva-Wright L, Horvath L, Butler R - Radiological Society of North America 2013, SSE02-06 *Key Point: The authors conclude that the number of patients categorized as BI-RAD3 needing follow-up will be reduced with the use of tomosynthesis in diagnostic mammography.	12/2013		х	х		х				
Comparative Study with Digital Mammography (DM) vs. DM Combined with Digital Breast Tomosynthesis (DBT) for the Detection of Invasive Lobular Carcinoma (ILC) Mariscotti G, Durando M, Martincich L, Caramia E, Campanino P, Luparia A, Bergamasco L, Fonio P, Gandini G - Radiological Society of North America 2013, SSE02-02 *Key Point: Six radiologists retrospectively interpreted 56 examinations of women. The study results demonstrated an increase in the sensitivity and diagnostic accuracy in the detection of IL using digital breast tomosynthesis. The effect was more pronounced in women with dense breasts. DBT + DM demonstrated an increase in cancer detection rate and a decrease in the recall rate. The authors also conclude that the PPV3 improved by 21% after the introduction of tomosynthesis.	12/2013		X	X		X				
Imaging and Histopathology Findings of Breast Lesions Detected by Tomosynthesis Fajardo L, Limin Yang L, Park J - Radiological Society of North America 2013, SSK01-08 *Key Point: 50 biopsy recommendations were made in 4350 women that underwent screening from September 2012 to March 2013, including 15 biopsies in 2,610 women choosing to underg tomosynthesis as part of their screening exam. The authors conclude that 30% more cancers are detected by the addition of tomosynthesis to FFDM in their screening program. They also conclude that biopsy PPV3 improved with the addition of tomosynthesis to their practice.	12/2013		х			х				

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HOLOGIC®	3D MAMMOGRAPHY Clinical Papers	Date	Screening	Diagnostic	Recall Rates	Dose	Outcomes	Economics	Cancer Detection	Interval Cancers	Biopsy
Philpotts L, Kalra V, Crenshaw J, Bu *Key Point: 11,101 screening to 16,438 total exams. The a	zes Patient Work Up, Throughput, and Resource Utilization tler R - Radiological Society of North America 2013, SSK01-09 g and 5,357 diagnostic exams were performed for an overall increase uthors conclude that the addition of tomosynthesis resulted in fewer hich resulted in faster patient diagnostic workup and better patient lization.	12/2013		х	х			х			
Increasing Experience (AB) Skaane P, Eben E, Jebsen I, Ha 04 Breast Imaging (Digital Breast To *Key Point: The authors con	clude that addition of tomosynthesis increases the interpretation ceptable for high-volume screening. This time decreases with	12/2013	x					х			
tomosynthesis in a populati with arbitration Skaane P, Bandos AI, Gullien R, Ebe Radiol. 2013 Aug;23(8):2061-71 *Key Point: 2D and 3D™ ima women. The study results de	full-field digital mammography (FFDM) versus combined FFDM and on-based screening programme using independent double reading in EB, Ekseth U, Haakenaasen U, Izadi M, Jebsen IN, Jahr G, Krager M, Hofvind S - Eur ging were performed during the first year on 12,629 consenting emonstrated that double reading of 2D plus 3D™ imaging significantly ate compared to 2D alone during mammographic screening.	08/2013	X								
screening (STORM): a prosp Ciatto S, Houssami N, Bernardi D, C Montemezzi S, Macaskill P - Lancet *Key Point: Integrated 2D and detection and has the poten detected were visible only a	Taumo F, Pellegrini M, Brunelli S, Tuttobene P, Bricolo P, Fantò C, Valentini M, Oncol. 2013 Jun; 14(7):583-9 and 3D MAMMOGRAPHY™ exams significantly improves breast-cancer tial to reduce false positive recalls. Twenty of the 59 cancers fter the addition of tomosynthesis. Cancer detection increased 51% insities for integrated 2D and 3D MAMMOGRAPHY™ exams	06/2013					х				



HOLOGIC* 3D MAMMOGRAPHY Clinical Papers	Date	Screening	Diagnostic	Recall Rates	Dose	Outcomes	Economics	Cancer Detecti	Interval Cance	Biopsy
Implementation of breast tomosynthesis in a routine screening practice: an observational study Rose SL, Tidwell AL, Bujnoch LJ, Kushwaha AC, Nordmann AS, Sexton R Jr - AJR Am J Roentgenol. 2013 Jun;200(6):1401 *Key Point: The study results demonstrated a significant reduction in recall rates (~37%) along with a non-significant increase in the cancer detection rate (35% overall, 54% for invasive cancers) after the introduction of tomosynthesis in the clinical practice. These improvements were distributed over all breast density categories. Summary Card	06/2013	х		х						
Comparison of digital mammography alone and digital mammography plus tomosynthesis in a population-based screening program Skaane P, Bandos AI, Gullien R, Eben EB, Ekseth U, Haakenaasen U, Izadi M, Jebsen IN, Jahr G, Krager M, Niklason LT, Hofvind S, Gur D - Radiology 2013 Apr; 267(1):47-56 *Key Point: In a screening study involving over 12,000 women, the addition of tomosynthesis to digital mammography resulted in a 40% increase in the cancer detection rate for invasive cancers, and a simultaneous significant decrease in false-positive rate. The increase was observed across all breast densities. Summary Card	04/2013	х				х				
One-View Versus Two-View Tomosynthesis: A Comparison of Breast Cancer Visibility in the Mediolateral Oblique and Craniocaudal Views Beck N, Butler R, Durand M, Andrejeva L, Hooley R, Horvath L, Raghu M, Philpotts L - American Roentgen Ray Society April 2013., 177, SS 27 *Key Point: The study included 106 patients who received both 2D mammography and tomosynthesis in both the views (mediolateral oblique and craniocaudal) in one year in both screening and diagnostic setting. Results demonstrated that obtaining both views is necessary to ensure that a cancer will be optimally visualized and derive the greatest potential benefit from tomosynthesis. Summary Card	04/2013	х	х							
The role of additional tomosynthesis combined with digital mammography Martínez P, Echano J, Sainz M, Simon I, Viteri G, Garcia Lallana A, Minguillon C, Pina L - European Congress of Radiology annual meeting, Vienna, Austria, March 2013, B-0809, SS 1702 *Key Point: 9301 combo studies were retrospectively reviewed. The study concludes that the addition of DBT to conventional 2D screening mammography increases the cancer detection rate by 61%. No statistical differences were found among the three density patterns, so tomosynthesis can be useful not only in dense patterns but also in pattern 2. Summary Card	02/2012	х				х				

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HOLOGIC* 3D MAMMOGRAPHY Clinical Papers	Date	Screenin	Diagnost	Recall Rat	Dose	Outcome	Economi	Cancer Dete	Interval Can	Biopsy
Can digital breast tomosynthesis replace conventional diagnostic mammography views for screening recalls without calcifications? A comparison study in a simulated clinical setting Brandt KR, Craig DA, Hoskins TL, Henrichsen TL, Bendel EC, Brandt SR, Mandrekar J - AJR Am J Roentgenol. 2013 Feb;200(2):291-8 *Key Point: The authors conclude that DBT offers similar sensitivity and specificity compared to conventional digital mammography for the evaluation of noncalcified findings recalled from screening mammography. The authors also concluded that for more than 90% of the findings, two-view DBT was sufficient for further mammographic evaluation, and can replace conventional diagnostic mammography.	02/2013		X	х						
Assessing radiologist performance using combined digital mammography and breast tomosynthesis compared with digital mammography alone: results of a multicenter, multireader trial (P) Rafferty EA, Park JM, Philpotts LE, Poplack SP, Sumkin JH, Halpern EF, Niklason LT - Radiology. 2013 Jan;266(1):104-13. doi: 10.1148/radiol.12120674 *Key Point: Radiologist performance for diagnostic accuracy and recall rate significantly improved for with the addition of tomosynthesis to digital mammography.	01/2013			х		х				
Digital breast tomosynthesis versus supplemental diagnostic mammographic images for evaluation of non-calcified breast lesions Zuley ML, Bandos AI, Ganott MA, Sumkin JH, Kelly AE, Catullo VJ, Rathfon GY, Lu AH, Gur D - Radiology 2013 Jan; 266(1): 89-95 *Key Point: Tomosynthesis significantly improved diagnostic accuracy for non-calcified lesions compared to supplemental mammographic views.	01/2013		х	х						
Cost-Effectiveness of Digital Breast Tomosynthesis Kalra V, Haas B, Forman H, Philpotts L - Radiological Society of North America 2012, LL-BRS-WE5C *Key Point: Combined DBT had a direct cost savings of \$10,185 per 1,000 women screened resulting from decreased callback rates. Given that there also appears to be a trend for improved cancer detection rate, combined DBT appears to be preferable to FFDM alone for screening mammography.	12/2012	х		x			х			



HOLOGIC The Boance of Sure	3D MAMMOGRAPHY Clinical Papers	Date	Screen	Diagno	Recall R	Dose	Outcon	Econom	Cancer Det	Interval C	Biops
and digital breast tomosy Michell MJ, Iqbal A, Wasan RK, E Oct;67(10):976-81 *Key Point: The addition of of screen detected soft tis	racy of film-screen mammography, full-field digital mammography, in thesis vans DR, Peacock C, Lawinski CP, Douiri A, Wilson R, Whelehan P - Clin Radiol. 2012 If tomosynthesis improved the diagnostic accuracy in the assessment usue lesions compared to full-field digital mammography and film-nbined and film-screen mammography alone. Summary Card	10/2012	х	x							
Skaane P, Gullien R, Bjørndal H, 1 1;53(5):524-9 *Key Point: The authors st	sis (DBT): initial experience in a clinical setting Eben EB, Ekseth U, Haakenaasen U, Jahr G, Jebsen IN, Krager M - Acta Radiol. 2012 Jun udied the performance of tomosynthesis in imaging work-up and reasing sensitivity, especially for cancers manifesting as spiculated mmary Card	06/2012		x			х				

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