## LETTERS

## Accuracy of the triple test in the diagnosis of palpable breast masses in Saudi females

To the Editor: I read with interest the article "Accuracy of the triple test in the diagnosis of palpable breast masses in Saudi females" by Al-Mulhim et al.1 I believe this article did not add anything new to what is already known as it is now well established that concordant triple testing of palpable breast masses is almost 100% accurate.<sup>2</sup> Furthermore, it is quite worrying to submit any young female with a breast lump for mammographic examination. Although the authors did not elaborate on the age range of their patients, it was quite clear that they have subjected all their 140 patients with a palpable breast lump, regardless of age, to mammographic examination. It is well known that mammographic examination under the age of 30 years is not recommended unless there is an absolute indication since the breast in women aged 30 to 40 years is relatively radiodense.<sup>2</sup> In such patients ultrasonography of the breast will suffice and in experienced hands, it probably gives as sufficient information as the mammography.

Since the introduction of mass screening programs in Europe and North America, there has been an increase in the rate of excision biopsy of benign breast lesions.<sup>3</sup>

Moreover, there is an increased radiation risk in a radiosensitive group of patients such as women bearing a mutation of breast cancer genes, BRCA1 and BRCA2 genes and elderly females on hormonal replacement therapy.<sup>4</sup> Also such liberal utilization of the mammographic service in a ministry of health hospital results in massive increase in workload to already overstretched resources and increases health care utilization and costs.5 One always tries to teach the junior surgeons not to liberally request a mammogram for every female who walks into the surgical clinic with a breast lump unless there is an absolute indication. It is not at all uncommon to find young surgical trainees requesting mammograms for patients aged 18 to 20 years with definitive fibroadenomas. It is such improper practice that we need to eradicate from the mind of our young surgeons. By promoting the liberal use of mammography, such an article certainly does not help in doing so!

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