

KORELASI ANTARA MORFOLOGI ULTRASONOGRAFI DENGAN DERAJAT DIFERENSIASI (*GRADE*) KARSINOMA DUKTAL INVASIF PAYUDARA

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INTISARI

Pendahuluan : Karsinoma duktal invasif merupakan salah satu dari karsinoma invasif payudara yang paling umum. Ultrasonografi (USG) merupakan modalitas pencitraan yang dapat memvisualisasikan massa payudara bersifat jinak atau ganas berdasarkan *the Breast Imaging Reporting And Data System (BI-RADS) - Ultrasound lexicon*. Temuan histologi bersamaan dengan temuan morfologi USG pada beberapa penelitian diperkirakan dapat menjadi indikator prognostik untuk menentukan derajat diferensiasi keganasan pada karsinoma payudara namun, menunjukkan hasil yang berbeda - beda.

Tujuan : Mengetahui korelasi antara temuan morfologi USG dengan derajat diferensiasi (*grade*) karsinoma duktal invasif payudara.

Metode : Penelitian ini merupakan penelitian observasional analitik uji korelasi, potong lintang pada 1 Januari 2017 - 31 Desember 2020. Temuan massa USG dikorelasikan dengan derajat diferensiasi histologis karsinoma duktal invasif payudara dengan nilai signifikansi $p < 0.05$.

Hasil : Tidak ada hubungan antara temuan morfologi USG berupa bentuk ($p = 0.752$, $r = -0,045$), orientasi ($p = 0.873$, $r = -0.023$), batas ($p = 0.602$, $r = -0.074$), ekhogenitas ($p = 0.745$, $r = -0.046$), kalsifikasi ($p = 0.579$, $r = -0,079$), fitur posterior ($p = 0.151$, $r = -0,202$), fitur terkait ($p = 0.393$, $r = 0,121$), dan kasus khusus ($p = 0.206$, $r = 0,178$) dengan derajat diferensiasi karsinoma duktal invasif payudara.

Kesimpulan : Tidak didapatkan korelasi yang bermakna antara morfologi USG dengan derajat diferensiasi (*grade*) karsinoma duktal invasif payudara, sehingga morfologi USG belum dapat dijadikan indikator prognostik pada karsinoma duktal invasif payudara.

Kata Kunci : *Karsinoma Duktal Invasif Payudara, Ultrasonografi, Temuan fitur morfologi, derajat diferensial (grade), indikator prognostik*

CORRELATION BETWEEN MORPHOLOGY ULTRASOUND FEATURES AND DEGREE OF DIFFERENTIATION OF INVASIVE DUCTAL CARCINOMA OF THE BREAST

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ABSTRACT

Introduction: Ductal invasive carcinoma is one of the most common invasive breast carcinomas. Ultrasonography (USG) is widely used to visualize and differentiate benign or malignant breast mass based on the *Breast Imaging Reporting And Data System (BI-RADS) - Ultrasound lexicon*. Histologic and USG morphology findings suggested as a prognostic indicator to determine the malignancy differentiation degree in breast carcinoma showing different results in several studies.

Aim: This study s investigates the correlation between ultrasonography morphology findings with ductal invasive breast carcinoma differential degree (grading).

Method: This is an observational analytical corelation study with a cross-sectional design from January 1st 2017, to December 31st 2020. The sonographic findings of ductal invasive breast carcinoma were correlated with their histopathologic grades, with $p < 0.05$ considered significant.

Result : No correlation was found between USG morphological findings on shape ($p = 0.752$, $r = -0,045$), orientation ($p = 0.873$, $r = -0.023$), margin ($p = 0.602$, $r = -0.074$), echogenity ($p = 0.745$, $r = -0.046$), calcsification ($p = 0.579$, $r = -0,079$), posterior feature ($p = 0.151$, $r = -0,202$), associated feature ($p = 0.393$, $r = 0,121$), and special case ($p = 0.206$, $r = 0,178$) with differential degree (grading) of ductal invasive breast carsinoma.

Conclusion: No significant correlation was found between USG morphology findings with ductal invasive breast carcinoma's differential degree (grading); therefore, it can not be used as a prognostic indicator yet.

Keyword: *Ductal Invasive Breast Carcinoma, Ultrasonography, Morphological Feature findings, Differential degree (grading), prognostic indicator*