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REVIEWER'S REPORT

Manuscript No.: IJAR-52302 Date: 18-06-2025

Title: Monitoring and follow-up of BIRADS 3 breast lesions in patients with breast cancer: A luxury or a necessity?

Recommendation:
Accept as it is……**YES……**
Accept after minor revision……
Accept after major revision ……
Do not accept (*Reasons below*) ……

Rating	Excel.	Good	Fair	Poor
Originality			√	
Techn. Quality			√	
Clarity			√	
Significance			√	

Reviewer's Name: Dr Aamina

Reviewer's Decision about Paper: **Recommended for Publication.**

Comments (*Use additional pages, if required*)
.

Reviewer's Comment / Report

Title:
The title is relevant and poses a clinically significant question. It reflects the core theme of the manuscript—whether the management of BI-RADS 3 lesions in the context of breast cancer warrants routine monitoring and follow-up or remains a discretionary measure.

Abstract and Introduction:
The abstract succinctly introduces the context of BI-RADS 3 (ACR3) lesions, including their diagnostic categorization and clinical expectations. The background provides appropriate clarity regarding the current standard as recommended by health authorities, particularly the Haute Autorité de Santé. The introduction effectively sets the premise for investigating the malignancy potential of these lesions in patients already diagnosed with breast cancer.

Objective:
The stated objective is specific and well-articulated. It underscores a focused investigation into the malignancy rate of ACR3 lesions in a defined clinical scenario—pre-treatment and follow-up stages in breast cancer care.

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Materials and Methods:
The study design is clearly retrospective and observational, with a well-defined study period (January 2021–December 2023). The setting includes recognized institutions, adding credibility. The patient cohort (n=53) is appropriate for a preliminary investigation. The criteria for inclusion and the parameters analyzed (radiologic features, second-look ultrasound, pathology, treatment decisions, and biopsy rate) are logically structured and clinically relevant. The methodology appears rigorous in capturing comprehensive follow-up data.

Scientific Relevance:
The study addresses a significant gap in clinical decision-making—how to manage BI-RADS 3 lesions in patients already diagnosed with malignancy. While BI-RADS 3 typically indicates a <2% chance of malignancy, its relevance in an oncologic setting could differ, and this investigation attempts to quantify that nuance.

Data Handling and Presentation:
The abstract indicates an analytic approach involving radiological, pathological, and clinical decision-making aspects. Though detailed statistical outcomes are not provided in the abstract, the structure indicates a multidisciplinary and multifactorial analysis, adding depth to the findings.

Language and Clarity:
The manuscript is clearly written, using precise medical terminology. The language is professional and the progression of ideas is logical and easy to follow.

Ethical and Clinical Considerations:
The abstract suggests ethical adherence, with clinical data being retrospectively sourced and likely anonymized. The focus on decision-making also highlights a commitment to patient-centered care and evidence-based management practices.

Overall Evaluation:
The study explores an important aspect of breast cancer management—evaluating BI-RADS 3 lesions within a population already burdened by malignancy. By examining real-world outcomes over a three-year period across recognized institutions, it contributes valuable insight into the practical and potentially policy-related implications of biopsy recommendations versus observational follow-up. The manuscript demonstrates clinical relevance, sound methodological design, and appropriate context, making it a meaningful addition to the literature.