Objectives

To evaluate preoperative performance of the ADNEX model in the discrimination between benign and malignant adnexal formations, when used by IOTA-certified sonographers of two Portuguese tertiary referral centres.

Methods

- Study population: 70 out of 250 women (non-pregnant, ≥ 18 year old), consecutively diagnosed with adnexal formations who were submitted to surgery

- The formations were classified by ADNEX as:
  - Benign (risk of malignancy <10%) or
  - Malignant (risk of malignancy ≥10%)

Results

Figure 1 & Table 1

ADNEX accuracy achieved 88.6%

<table>
<thead>
<tr>
<th></th>
<th>Correctly classified</th>
<th>Uncorrectly classified</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benign</td>
<td>58</td>
<td>6#</td>
<td>64</td>
</tr>
<tr>
<td>BOT</td>
<td>1</td>
<td>2§</td>
<td>3</td>
</tr>
<tr>
<td>Invasive</td>
<td>3</td>
<td>0</td>
<td>3</td>
</tr>
</tbody>
</table>

# Most frequently, inflammatory masses evidenced as multilocular-solid formations

§ Multilocular mucinous BOT with < 10 loci & unilocular-solid serous BOT with a single 3 mm papillary projection

Conclusion

Although our data indicate promising ADNEX accuracy in differentiating invasive malignancies from benign adnexal lesions, further research is unquestionably required to validate ADNEX in our settings.