



Breast Cancer Screening

What is breast cancer screening?

Breast cancer screening is a way in which doctors check the breasts for early **signs of cancer** in people who have no symptoms of breast cancer. The main test used to screen for breast cancer is a special kind of X-ray called a “mammogram.”

The goal of breast cancer screenings is to **find cancer early**, before it has a chance to grow, spread, or cause problems. Studies show that being screened for breast cancer lowers your chance of dying from the disease.

Who should be screened for breast cancer?

Different experts have different recommendations for breast cancer screenings. Also, the recommendations for screening might be different for people at higher risk of getting breast cancer.

- Starting at the **age of 40**, it's important to talk to your doctor about the benefits and downsides of screening and decide, with your doctor's help, whether to get screened and when.
- Some people who are at **higher risk** of breast cancer might need to begin screening before age 40. For example, this might be the case if you have certain genes that increase your risk of breast cancer (*such as "BRCA genes"*).
- Regular screening with mammograms generally continues through the **age of 74**. Some people choose to continue getting regular mammograms after this if they are healthy and expect to live for at least 10 more years.

What are the benefits of being screened for breast cancer?

The main benefit of screening is that it helps doctors find cancer early, when it might be easier to treat. This lowers the chances of dying from breast cancer.

What are the downsides of being screened?

The downsides include:

- **False Positives** - Mammograms sometimes give “false-positive” results. This means that the results suggest that you might have cancer when you actually do not. This can lead to unneeded worry and more tests, including a biopsy in some cases, which can be painful. False-positive results are more likely to happen in people younger than 50 than in older people.
- **Finding cancer that would not have needed treatment** - Sometimes, mammograms find cancer that would never have affected your health. This can be a problem because treating these cancers does not have any benefit, and can cause harm. For example, you could get surgery, radiation treatment, or chemotherapy to treat a cancer that would never have caused problems if it hadn't been found. There is no way to know which cancers found by screening will lead to problems, and which won't.
- **Radiation Exposure** - Like all X-rays, mammograms expose you to some radiation. But studies show that the number of lives saved by finding cancer early greatly outweighs the very small risks that come from this radiation exposure.

What happens during a mammogram?

During a mammogram, your breasts will be X-rayed one at a time. Each breast is typically **X-rayed twice**, once from the top down and once from side-to-side. This is so the radiologist can get a good look at all of the tissue. To make the tissue easier to see, a technician will **flatten each breast** between two panels. This can be uncomfortable, but it only lasts a few seconds.

What if my mammogram is abnormal?

If your mammogram is abnormal, try not to panic. In 9 out of 10 cases, an abnormal mammogram turns out **not** to be breast cancer. You will need more tests to see what is going on.

- If the doctor thinks your abnormal result is probably **not due to cancer**, they may suggest another mammogram in 6 months.
- Other tests could include a more detailed mammogram, or an **ultrasound of the breast** to check something seen on the mammogram.
- If these tests show anything concerning, your doctor may **order a biopsy**. During a biopsy, a doctor will take a sample of breast tissue and send it to a lab for testing.