Onsite
WOMEN'S HEALTH

Breast Cancer
Screening Guidelines

Know the Facts

1 in 8 women in the United States will develop breast cancer in her lifetime; this equates to a 13% average lifetime risk. **For women at the average risk level, annual screening mammography should start at age 40.**

Not sure if you are average risk? Ask your provider for more information about the Tyrer-Cuzick (TC) breast cancer risk assessment.

CAN A PATIENT GET A MAMMOGRAM EARLIER THAN 40 IF NOT HIGH RISK?

Screening mammograms are not indicated in average risk women who are younger than 40 because breast cancer is much less common in younger women; therefore, the benefits of mammography do not outweigh the risks and costs that could be associated. If a woman is having a breast symptom, however, imaging may be indicated.

AT WHAT AGE SHOULD SCREENING STOP?

Per the ACR, there is no defined upper age limit at which mammography ceases to be beneficial. Screening mammography should be considered as long as the patient is in good health, able to undergo the examination, and willing to undergo additional testing, including biopsy, if an abnormality is detected.

> **Annual screening mammography starting at age 40 saves the most lives.**

WHY 40?

- Breast cancer incidence increases substantially around age 40
- 1 in 6 breast cancers occur between 40-49
- 40% of all the years of life saved by mammography are among women in their 40s

WHY ANNUALLY?

Even for women 50+, skipping a mammogram every other year would miss up to 30% of cancers

WHY AT 40 AND ANNUALLY IF ONLY AT AVERAGE RISK?

¾ of women diagnosed with breast cancer have no family history or identifiable risk factors

ARE YOU AT A HIGHER RISK FOR BREAST CANCER?

Many factors may impact women, putting them at an elevated risk for developing breast cancer.

- A family history of breast or ovarian cancer
- Older age
- History of breast radiation before age 30
- A personal history of breast cancer
- Obesity
- Menstruation before age 12
- Menopause onset at 55 or later
- Never having been pregnant or given birth
- Dense breast tissue

If you have one or more of these risk factors, talk to your provider about taking a breast cancer risk assessment to know for sure if you fall into the high risk category as determined by the TC model.

HOW DO THE GUIDELINES CHANGE IF CONSIDERED HIGH RISK?

If you are determined to be high risk, either by a breast cancer risk assessment or a genetic assessment, **screening can start at 30** – The patient and provider can decide together if screening prior to 40 is the best decision.

If a first degree relative had cancer, screening **should start 10 years before age of relative's diagnoses,** but not before age 30.

> **More than 75% of women who develop breast cancer have no family history of breast cancer.**