Should I Get a Mammogram?

BREAST CANCER SCREENING

Ages 40-49

This photo is for illustrative purposes only, and the person depicted in the photograph is a model.
Introduction

Breast cancer is one of the most common cancers among women over the course of a lifetime. Many women want to know when they should start having screening mammograms and how often they should have them. If you are between the ages of 40 and 49 this may be a difficult question for you. Some expert organizations recommend starting screening mammograms at age 40 while others recommend starting routine screening at 50. To decide what is best for you, you should consider the benefits and possible harms that can result from getting mammograms. You also need to understand your risk of breast cancer and your personal health concerns.

This tool is designed to help you decide if you need a screening mammogram and how often you should have mammograms.

If you currently have any breast symptoms such as pain or lumps, please see your primary care provider right away and don’t wait for a screening test.
**What is a screening mammogram?**

A mammogram is an X-ray of the breast. Screening mammograms are done to check for breast cancer in women who have no signs or symptoms of the disease. Mammograms can show changes in the breast up to two years before a patient or physician can feel them.

**Should I start having regular screening mammograms at age 40 or age 50?**

**Confluence Health Recommendation:**

Whether to start regular screening mammography at age 40 or age 50 should be an individual decision between you and your primary care provider.

**Before you decide when to start regular screening mammograms:**

1. Have a baseline mammogram at age 40 to determine if you have dense breasts, which can affect your breast cancer risk.
2. Understand your personal breast cancer risk.
3. Weigh the benefits and potential harms of screening mammography.
4. Discuss this decision with your primary care provider.

**Key Points**

- For women ages 40-49 with AVERAGE risk for breast cancer, the harms from screening mammograms may outweigh the benefits.
- For women ages 40-49 with HIGHER risk for breast cancer, regular screening mammograms starting at age 40 may be beneficial.
- Dense breast tissue increases risk for future breast cancer. Whether you have dense breasts can only be known by having a mammogram.
- There may be a slightly higher chance of finding cancer at a later and less curable stage with mammograms starting at age 50 instead of 40.
- Starting regular mammography at age 50 instead of 40 reduces the possible harms of mammography.
- Women may differ in their feelings about breast cancer and the possible benefits and harms of mammography.
What are the benefits of screening mammograms?

Screening mammograms can find breast cancer early, before you have symptoms. Finding a cancer earlier may make it easier to treat. This might mean avoiding chemotherapy, radiation, or surgery that could be needed for more advanced cancer. A cancer found earlier is also more likely to be cured. However, breast cancer is not common in women ages 40-49 who have average risk. If 10,000 women get regular mammograms between the ages of 40-49, about 5 of these women will have their lives saved because of screening mammograms finding cancer early. The benefits of screening mammograms become higher as women get older. If 10,000 women get regular mammograms between the ages of 60-69, about 42 of these women will have their lives saved because of screening mammograms (from the Journal of the American Medical Association, April 2014).

Likelihood of a Mammogram Saving You from Dying of Breast Cancer as You Age

<table>
<thead>
<tr>
<th>Average Number of Women Saved (out of 10,000)</th>
<th>40-49</th>
<th>50-59</th>
<th>60-69</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (yrs)</td>
<td>5</td>
<td>10</td>
<td>42</td>
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Radiation Exposure

Some women are worried about radiation from mammograms. Screening mammography is considered a very low risk examination. It is important to understand that we are exposed to radiation from natural sources all the time. The amount of radiation that a woman receives from a digital mammogram is about one seventh of the total dose that we are exposed to yearly from natural sources.
In deciding whether to start screening mammograms at age 40, there are two problems with mammograms you should know about:

1. **False positives**
   You may have a “false positive” on a mammogram. This happens when a mammogram shows a spot that looks worrisome for cancer, but further testing shows there was no problem after all.

2. **Overdiagnosis and overtreatment**
   Although it seems strange, some cancers found by screening mammograms will never cause any health problems in the future. This is called “overdiagnosis.” This is especially true of a certain type of cancer called “ductal carcinoma in situ”, or DCIS. It is not possible to predict which cancers found by mammogram will never become a problem, so all cancers found are generally treated. **This means some women will get surgery, chemotherapy, or radiation treatment they don’t need.**

How often do these harms occur for women ages 40-49?

1. **False positives**
   More than half of women who have a mammogram over the course of 10 years will have a “false positive” and need further testing. Of these women, 1 in 5 will need a biopsy.

2. **Overdiagnosis and overtreatment**
   Studies have shown a wide range of how often overdiagnosis of cancer may happen. Middle-ground estimates suggest that in every 5 women diagnosed with breast cancer by mammogram, 1 is overdiagnosed. About 7 women will receive unneeded cancer treatment for every 1 life saved by mammograms.

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**Out of 10 women** who receive regular mammograms over the course of 10 years...

- ...5 women will receive false positives.
- Of those 5 women...
  - ...1 woman will need a biopsy.

**Out of 5 women** diagnosed with breast cancer from a mammogram...

- ...1 woman is overdiagnosed.

**For every 1 woman** saved from a screening mammogram...

- ...7 women will receive unneeded treatment.
Who is at increased risk for breast cancer?

Many women are at average or “standard” risk for breast cancer. Some women are at increased risk. Some factors that increase your risk are:

- A first degree relative, such as a mother or sister, who has had breast cancer
- A previous biopsy not showing cancer but with abnormal result (called “atypia”)
- A previous but normal (called “benign”) breast biopsy
- Dense breasts on mammogram. This is not something you can determine without a mammogram
- Previous radiation treatments to the chest

Other risk factors may play a role as well.

A Breast Cancer Risk Assessment Tool is available through the NCI (National Cancer Institute). This link will take you to the web site:

www.cancer.gov/bcrisktool

You can use this tool to estimate your personal risk of developing breast cancer. Your mammography result letter will also inform you of your lifetime risk of breast cancer using this same tool.

Should women at increased risk for breast cancer start having screening mammograms at age 40? If so, how often should they be performed?

Women at increased risk for breast cancer should consider routine screening mammograms starting at age 40, or earlier if you are at higher risk.

Experts do not know how often women at increased risk should have mammograms. Some expert groups recommend that women at increased risk should start screening at age 40 and should have mammograms every year. You should discuss this with your primary care provider.
What if my mammogram shows that I have dense breasts?

Breast “density” refers to the composition of the breast tissue. This varies among women. Your breasts are considered dense if you have a lot of fibrous tissue, but not much fatty tissue. You may think that because your breasts are firm, they are dense. But breast density can only be determined by a mammogram. Dense breast tissue makes it harder for doctors to spot a cancer on a mammogram. Women with dense breasts also have a higher lifetime risk of cancer compared to women with low breast density. We recommend a baseline mammogram at age 40 to help you better understand your overall breast cancer risk. Your mammography result letter will inform you of your breast density category.

Radiologists classify breast density using a 4-level density scale:

1. Almost entirely fatty
2. Scattered areas of fibroglandular density
3. Heterogeneously dense
4. Extremely dense

I am very worried about breast cancer. Should I have yearly mammograms starting at age 40?

This is a conversation you should have with your primary care provider. It is very reasonable to consider having regular mammograms if you feel that without them you will be extremely worried. Your own values and preferences can help you decide if you want to start having mammograms before age 50 and how often you should have them.
REFERENCES


