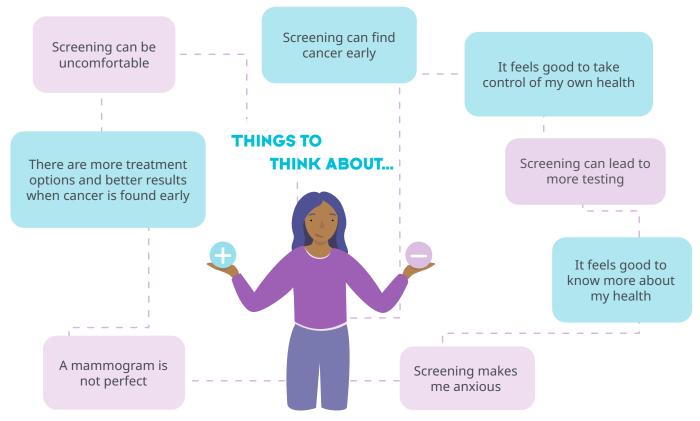


Should I start getting screening mammograms in my 40s?

Mammograms (x-rays of the breasts) can help find breast cancer early, before you notice any changes and when it is easier to treat. Your age and family history (if your parent, child or full sibling has had breast cancer) can affect your risk.



Why is it important to make an informed choice?

In BC, mammograms are available starting at age 40 to most women and many Two-Spirit, transgender and non-binary people, who have no symptoms. Generally, people between 40 and 49 have a lower risk than those over 50. So it's your choice whether to start now or wait. This guide helps you decide what's best for you.



Important: If you:

- **Have a previous history of breast cancer**: See a health care provider to arrange appropriate diagnostic breast imaging.
- **Have breast implants**: See a health care provider to arrange appropriate diagnostic breast imaging.
- Have breast cancer symptoms, such as a lump, fluid from your nipple(s) or any other changes to your breast(s): See a health care provider right away. You may need diagnostic testing.
- **Are pregnant or breastfeeding**: You can get a screening mammogram 3 months after you fully stop breastfeeding. See a health care provider right away if you notice any change(s) to your breast(s), since they can refer you for a diagnostic mammogram.
- **Have had a mammogram on both breasts in the last 12 months**: You must wait at least 1 year before having another screening mammogram.
- **Have a parent, child or full sibling who has or had breast cancer**: You should have a screening mammogram every year. Call 1-800-663-9203 to make an appointment (a referral is not required).

Benefits and risks

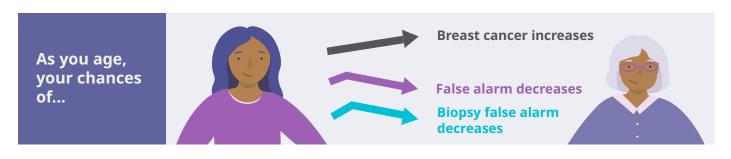
Think about the benefits and risks of mammograms. Check off the points that matter to you. Add any other points in the blank rows.

| Benefits | | Limitations | | |
|---|--|---|--|--|
| Helps find cancer earlier: A mammogram can find cancer when it is small, which means more treatment options and a higher chance of success. Finding and treating cancer early gives me more time and energy to spend with family and friends. | | A mammogram is not perfect: It can miss some cancers due to its location or the density of my breast tissue (false negative), or it can fit cancers that would not have caused problems my lifetime (overdiagnosis). Since I am younger, I may have denser breast tissue, so my screening mammogram may be | | |
| May help me live longer: Having a mammogram can help me live longer since screening can help find cancer when it is smaller and easier to treat. | | less exact. | | |
| | | Screening anxiety : I may feel anxious, worried or stressed during my mammogram and after when I wait for my results. | | |
| Feels good to take care of my health: A mammogram helps me look after my breast health so that I stay aware of my overall health. Having a mammogram lets me take care of myself and that feels good. | | Pain: Having a mammogram can be uncomfortable due to the pressure placed on my breast while the x-ray images are being taken. Compression is needed to spread the breast tissue and keep my breast in place to avoid blurry images. | | |
| Gives me peace of mind : Knowing whether or not I have breast cancer will help me better understand my health and guide my choices for the future. | | More testing : I may need more testing after my screening mammogram, such as a diagnostic mammogram, ultrasound or biopsy, to look more closely at my breast(s). | | |
| Less treatment/Faster recovery : Finding cancer earlier may mean I will need less treatment and spend less time recovering. | | Possible treatment : I may need treatment after my screening mammogram, such as surgery, medications, radiation therapy and/or chemotherapy. | | |
| | | | | |

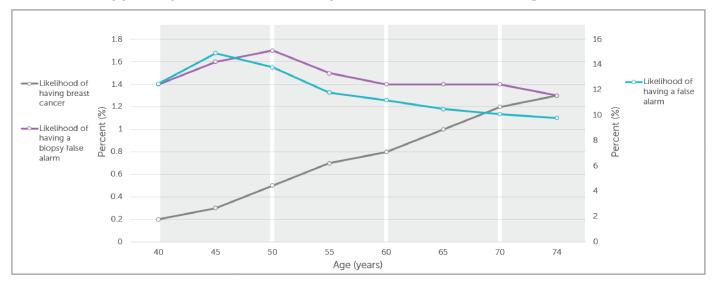
Why is screening available starting at age 40 but recommended at 50?

Your age and family history can affect the results of your next mammogram. As you get older, your risk of cancer goes **up** but your risk of a **false alarm** or **biopsy false alarm** goes **down**.

| Definitions | |
|-----------------------|--|
| False alarm | An abnormal test result that's actually normal after more testing (such as other imaging, biopsy or surgery). |
| Biopsy false alarm | An abnormal result from taking a biopsy (removing a small amount of tissue, cells or fluid from the body) that's actually normal after more testing. |



What can happen if you DO NOT have a parent, child or full sibling with breast cancer:



Understanding the graph:

If you are 45 years old, you have:

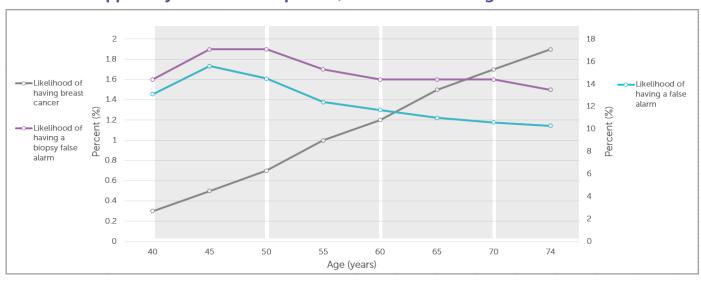
- Less than 1% chance of having cancer
- 15% chance of a false alarm
- 1.6% chance of a biopsy false alarm

Versus

If you are **70 years old**, you have:

- Over 1% chance of having cancer
- 10% chance of a false alarm
- 1.3% chance of a biopsy false alarm

What can happen if you DO have a parent, child or full sibling with breast cancer:



Understanding the graph:

If you are 45 years old, you have:

- 0.5% chance of having cancer16% chance of a false alarm
- 1.9% chance of a biopsy false alarm

Versus

If you are **70 years old**, you have:

- 1.7% chance of having cancer
- 11% chance of a false alarm
- 1.6% chance of a biopsy false alarm

Your decision

| What is your decision? | Are you sure of your choice? | | | No |
|--|--------------------------------|---|--|----|
| I want a mammogram now I want to wait until I turn 50 I'm still not sure | Sure of myself | Do you feel sure about the best choice for you? | | |
| | U nderstand information | Do you know the benefits and risks of screening? | | |
| | R isks and benefits | Are you sure about which benefits and risks matter most to you? | | |
| | Encouragement | Do you have enough support and advice to make an informed choice? | | |

©SURE test; O'Connor & Légaré 2008

Still not sure?

Take this guide to a health care provider for support. Write down any questions you may have below to ask them at your appointment:



Disclaimer

Information shared here is for informational purposes only. It should not be interpreted as medical advice, professional diagnosis, or medical opinion without first seeing a health care provider. This information should not replace the need to see a health care provider for any health-related concerns.

References

- 1. Beth Israel Deaconess Medical Center. (2022). Should I Continue Having Mammograms? For Women Age 75 to 84 Years. Boston. Available at https://eprognosis.ucsf.edu/decision_aids/Mammography_75-84.pdf.
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- 3. Légaré F, Kearing S, Clay K, Gagnon Ś, D'Amours D, Rousseau M, O'Connor A. Are you SURE?: Assessing patient decisional conflict with a 4-item screening test. Can Fam Physician. 2010 Aug;56(8):e308-14. PMID: 20705870; PMCID: PMC2920798.