

Supporting Patients Aged 75 and Older with Breast Screening Decision-Making: Information for Health Care Providers

In BC, screening mammograms are **available** to women and many Two-Spirit, transgender and non-binary individuals **aged 75 and older if they are in good general health**. While the BC Cancer Breast Screening Program does not send reminder letters to patients aged 75 and older, patients **can** get a screening mammogram every 1 or 2 years based on their risk level:

Average Risk	Higher than Average Risk	High Risk
<p>For asymptomatic women aged 75 and older with no family history of breast cancer or other high-risk factors, screening mammograms are available every 2 years if the patient is in good general health.</p>	<p>Screening mammograms are available every year for patients aged 75 and older who are in good general health, and who:</p> <ul style="list-style-type: none"> • Have a family history of breast cancer; OR • Been diagnosed with Atypical Ductal Hyperplasia (ADH), Atypical Lobular Hyperplasia (ALH) or Classical Lobular Carcinoma in Situ (LCIS). Annual mammography through diagnostic testing is available. 	<p>Screening mammograms are available every year for patients aged 75 and older who are in good general health, and who:</p> <ul style="list-style-type: none"> • Have two biological relatives (parent, child, sibling, grandparent, aunt, uncle, great-aunt, great-uncle) on the same side of the family diagnosed with breast cancer before age 50²; • Had thoracic radiation between ages 10 to 30; OR • Are a known pathogenic gene variant³ carrier or an untested family member of a known pathogenic gene variant carrier.

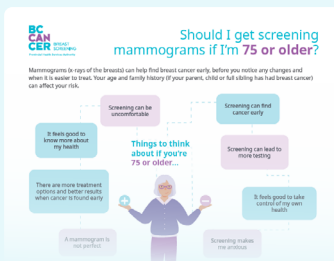
A **referral is not required**, but we encourage patients aged 75 and older to discuss with a health care provider about whether screening is beneficial for them and their health before booking a mammogram. This is because after the age of 75, screening and any recommended follow-up procedures or treatment may no longer benefit their health or quality of life as much as when they were younger.

Is screening beneficial for my patient and their health?

After the age of 75, the decision to get screened requires a comprehensive individualized approach. When supporting patients aged 75 and older with their decision-making, it's important to consider their health and any co-morbidities they may have, the benefits and limitations of screening that matter most to them, their preferences, and their quality and quantity of life.

Before the patient books their mammogram, encourage them to:

- 1 Review the Decision Aid: "Should I Get Screening Mammograms If I'm 75 or Older?" This resource guides patients to think about the benefits and limitations of breast screening that matter most to them, while reflecting on their health.



View online: www.bccancer.bc.ca/screening/Documents/Breast_Decision-Aid-75.pdf



Order print copies for your clinic: www.screeningbc.ca/order-materials

- 2 Discuss whether screening is beneficial based on their general health and the impact it will have on the rest of their life. To help guide your assessment of the patient's health, consider the following questions:

Does the benefit of screening and resulting treatment if needed outweigh the risks and potential impact on quality of life?

Specific considerations to determine this are:

- Does the patient have any serious health condition(s) that might shorten their life expectancy to less than 10 years?
- Would the patient be able to withstand a mammogram and any recommended follow-up tests?
- Will screening and finding breast cancer change the management of the patient?
- Is the patient undergoing any other treatments that would interfere or not be compatible with breast cancer treatment?
- Do you or your patient consider them to be strong enough to consider ongoing mammography screening appropriate?

See the next page for sample scenarios illustrating how and when these questions may be taken into consideration.

Sample Scenarios: Supporting Patients Aged 75+ with Breast Screening Decision-Making

While a patient aged 75 or older may meet the eligibility criteria for breast screening, there are many factors that could affect whether they would continue to benefit from screening. These include their health condition(s), the benefits and harms of screening that matter most to them, preferences, and quantity and quality of life.

In the following sample scenarios, all of the patients are over the age of 75 and eligible for breast screening. They are seeking input from you, their primary care provider, about whether they should get screened. As you review each scenario, think about:

- What questions about the patient's health, preferences and values will you ask or consider to assess whether screening may still be beneficial and appropriate?
- How will you discuss these topics with the patient in a patient-centered and compassionate way?



Miranda

Miranda is a 77-year-old woman with a history of falls and who recently started showing signs of dementia, including short-term memory loss, confusion and difficulty with everyday tasks. She is currently living on her own while she waits for a spot to become available at a long-term care home. Her daughter visits occasionally to help with chores and to take her to appointments. Miranda feels most relaxed and oriented when she has a routine.

Miranda is seeing you for a check-up. Her daughter remembers that Miranda's last mammogram was 2 years ago and asks you whether Miranda should get screened.

Questions you may consider to assess whether screening is appropriate for Miranda are:

- How does Miranda feel about getting a mammogram?
- Is Miranda strong enough to withstand a mammogram and any recommended follow-up tests or treatments?
- If Miranda needed any recommended follow-up tests or treatment, would her progressive memory problems, confusion and need for routine cause her to feel more anxious or stressed, and/or prevent her from attending follow-up appointments?



Wei

Wei just celebrated her 76th birthday. She has congestive heart failure, which makes it difficult for her to be mobile, and she is learning to manage her new diabetes diagnosis.

During her phone appointment for a medication refill, Wei asks if it is time for her annual mammogram. She says, "I don't want to die from breast cancer like my mother and sister did."

While Wei has serious health conditions that may make it harder for her to go for a mammogram and tolerate any follow-up tests or treatments, you wonder:

- How would not knowing whether she has breast cancer affect Wei's quality of life? Is peace of mind enough to outweigh the risks of screening for Wei?
- Would screening and potential breast cancer treatment change how Wei's congestive heart failure and diabetes are managed?



Kiran

Kiran is your new 80-year-old patient, who joined your clinic after her primary care provider retired. During her intake appointment, she shares that she is very active in the community, lives with her son and his family, and enjoys going for walks everyday with her friends. Her main health concern is increasing pain in her knee due to arthritis but she is scheduled for a knee replacement surgery in 2 months.

Kiran recently attended a community workshop about cancer screening, which reminded her that her last mammogram was 6 years ago. She's wondering if she still needs to get screened.

To help Kiran make an informed decision, questions that may come to your mind are:

- How important is getting screened to Kiran?
- What does Kiran know about the benefits and limitations of screening after age 75?
- Depending on the timing of the mammogram, would Kiran be able to withstand the mammogram and any follow-up tests or treatments while recovering from her knee replacement?

Remember:

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