

Do I Need a Mammogram Before I Turn 45? YES.

- The entire reason we screen for breast cancer is to find it EARLY, when most treatable and survivable.
- Breast cancer is the number one cause of death in women aged 35 to 54 years.
- Mammography has been proven to reduce deaths due to breast cancer in women screened beginning at age 40.
- 25% of all years of life lost to breast cancer occur in women diagnosed before the age of 45.
- Women at “**high risk**” for breast cancer due to known or suspected disease-causing mutation (such as *BRCA1* or *BRCA2*) should begin screening at least by age 30, to include MRI.

What About False Alarms (known as “False Positives”)?

- About 10% of women having a screening mammogram will be called back (recalled) for extra testing or views. THIS IS NORMAL. Among women called back, 95% do not have cancer. If a needle biopsy is necessary, even that is a simple test not much different from a dental filling.
- Newer techniques, such as 3D-mammograms, are more able to see cancer resulting in fewer recalls for extra testing.

What About Screening in Dense Breasts?

- Younger women are more likely to have dense breast tissue, which can hide cancer on mammography.
- In women who have breasts categorized as “dense” (heterogeneously dense or extremely dense), adding screening ultrasound after a mammogram can help find more breast cancers. Because ultrasound detects more areas which need follow-up, there is more to check. Ultrasound does also increase the chance of needing a needle biopsy to determine if something detected is cancerous. For more information on breast cancer screening, dense breasts and risk factors, please visit www.DenseBreast-info.org.

Is it Covered?

- Insurance is required in nearly all states to cover the full cost of *screening* mammography. *Diagnostic* mammography is performed to evaluate abnormalities on screening or when a woman has signs or symptoms of breast cancer. A deductible/co-pay will typically apply for diagnostic mammography.
- In a few states, insurance coverage is required (though not necessarily without a deductible/co-pay) for additional screening, such as ultrasound. In women at high risk for breast cancer, most insurers will cover screening MRI (regardless of density) though a deductible/co-pay will typically apply and a pre-authorization may be needed.

FOR MORE INFORMATION ABOUT THE NEW AMERICAN CANCER SOCIETY GUIDELINES AND DENSE BREASTS:
AN INTERVIEW WITH RADIOLOGICAL EXPERT, DR. WENDIE BERG