

Statement

May 15, 2023

The USPSTF Recommendations Should Not Apply to Women with Dense Breasts

The United States Preventive Services Task Force (USPSTF) breast cancer screening draft recommendations for “average” risk women now align with other national guidelines to begin mammography screening at age 40. This is particularly important as Black women are both more likely to get and die from deadly cancers at an earlier age. It is disappointing, however, that the task force recommends only biennial screening, as their *own* modeling studies conclude an even greater benefit from *annual* screening mammography. The task force did not consider that annual screening is particularly important in women with dense breasts. In women with dense breasts, annual screening mammography reduces the chance of an interval cancer. An “interval cancer” is one not found on screening but found because of symptoms, usually a lump, after a “normal” mammogram, in the time period before the next scheduled mammogram. Widening that gap to two years gives those cancers more time to develop and grow and interval cancers tend to be more aggressive with worse outcomes than those found on the screening mammogram.

The draft recommendations address screening for women at “average” risk for breast cancer, and include women with dense breasts. But, women with dense breasts are at higher-than-average risk. And, the task force incorrectly concludes there is “inadequate” evidence to support adding screening MRI or ultrasound after a mammogram for many women with dense breasts.

Dense Breasts and Higher Risk

The task force recommendations are only for women at average risk. The task force states the recommendations apply to women with dense breasts or with a family history of breast cancer. Yet, women with dense breasts are at increased risk. Further, the task force did not consider combinations of risk factors. Many women with dense breasts also have a family history of breast cancer or other risk factors and meet current “high-risk” criteria (greater than 20% lifetime risk). In high-risk women, annual screening with MRI is recommended, in addition to *annual* mammography, by the American Cancer Society (ACS), National Comprehensive Cancer Network (NCCN) guidelines, American College of Radiology (ACR) Appropriateness Criteria, and the 2023 ACR Screening Recommendations for Women at Higher-than-Average Risk. **MRI, or ultrasound if MRI is not possible, should be recommended in women where annual mammography alone is inadequate, and this includes all women at higher risk.** Contrast-enhanced mammography or molecular breast imaging may be offered at some centers.

FDA Final Rule

A new **FDA rule going into effect in September 2024** will require all women be told that dense tissue makes it harder to find breast cancer on a mammogram and also raises the risk of developing breast cancer. In women with the densest breasts, about 40% of cancers are missed on a mammogram. About 40% of women of mammography age have dense breasts.

FDA, Additional Testing and Insurance Coverage

With the FDA final rule, women with dense breasts will *also* be informed that “in some people with dense tissue, other imaging tests in addition to mammography may help find cancers.” **Women with dense breasts will be told other imaging tests are helpful, but, because the USPSTF does not recognize the benefit of this additional testing, their insurance may not cover such testing.**

Why it Matters

Insurance, Medicare, and the Affordable Care Act rely on USPSTF recommendations to determine coverage of screening tests. **Additional testing may not be covered by insurance if *not* recommended by the USPSTF.** Women who need additional breast imaging tests may not be able to afford them due to lack of insurance coverage.

Need for the Find It Early Act

Many women with dense breasts are at higher risk for breast cancer and for missed cancer on a mammogram. Therefore, the USPSTF recommendations should not be applied to these women. The current USPSTF recommendations may cause confusion and prevent women who need additional screening from being able to access and afford it. The proposed bipartisan insurance coverage bill, the Find It Early Act (introduced by Reps. DeLauro and Fitzpatrick), may help. **Insurance coverage should be consistent with NCCN Guidelines and ACR Appropriateness Criteria, and the Find It Early Act would ensure this for all women.**

PLEASE TAKE ACTION

- **Support the Find It Early Act, details about contacting your congressperson [HERE](#).**
- **Submit a comment with the USPSTF [HERE](#) (due by midnight June 6th, 2023).**