

Breast cancer will affect about
1 in 8 women
in the United States.

Nearly
40,000 women
die of breast cancer
each year.

SPOTLIGHT ON

mammograms

The best way to beat
breast cancer is to
detect and treat
it early.

Along with conducting
monthly self-breast exams,
women should follow the recommended
guidelines for mammograms.

Mammograms are used to
evaluate symptoms
of breast disease, including
a lump, nipple discharge,
breast pain, dimpling of the
skin on the breast, changes of
the nipple or other findings.

**October is
Breast Cancer
Awareness
Month**

A mammogram is an X-ray picture of the breasts used to find breast tumors and cancer. When and how often to have a mammogram is a choice you must make. Different expert groups do not fully agree on the best timing for this test. Before having a mammogram, talk to your provider about the pros and cons of having the test. Ask about your risk for breast cancer, whether screening decreases your chance of dying from breast cancer and if there is any harm from breast cancer screening, such as side effects from testing or overtreatment of cancer when it's discovered.



Who should get a mammogram?

- Women starting at age 40, repeated every 1 to 2 years (this is not recommended by all expert organizations)
- All women starting at age 50, repeated every 1 to 2 years
- Women with a mother or sister who had breast cancer at a younger age, repeated every year (they should begin earlier than the age at which their youngest family member was diagnosed)
- Women who have had a previous abnormal mammogram

Are you at risk?

Factors that may raise your risk for breast cancer include:

- Never giving birth or having your first child after age 30
- Being overweight after menopause or not exercising regularly
- Getting older – your risk increases with your age
- Drinking alcohol – your risk increases with increased use
- A previous diagnosis of breast cancer or non-cancerous breast disease
- Beginning menstruation before age 12 or beginning menopause after age 55

Types of mammography

Digital mammography is the most common technique because it allows the X-ray image of the breast to be viewed and manipulated on a computer screen.

Three-dimensional (3D) mammography is a type of digital mammography that takes multiple images of breast tissue to re-create a 3D image of the breast. Because this advanced technology gives doctors a clearer image of breast masses, doctors can detect breast cancer earlier and more easily. It also helps doctors see more types of cancers and get a more accurate idea of cancer size. Although 3D mammography may be especially beneficial for women with dense breast tissue, all women should check with their doctor and insurance provider to find out if 3D mammography is the right choice for them.



How a mammogram is performed

All mammograms are performed the same way. You will be asked to undress from the waist up and given a gown to wear. Depending on the type of equipment used, you will sit or stand.

One breast at a time is rested on a flat surface that contains the X-ray plate. A device called a compressor will be pressed firmly against the breast. This helps flatten the breast tissue. The compressor surfaces may feel cold. When the breast is pressed down, you may have some pain. This needs to be done to get good quality images. The X-ray pictures are taken from several angles. You may be asked to hold your breath as each picture is taken.

The level of radiation from mammography is very low, and a 3D mammogram releases the same amount of radiation as a traditional mammogram.

How to prepare for a mammogram

Do not use deodorant, perfume, powders or ointments under your arms or on your breasts on the day of the mammogram. These substances may hide a portion of the images. Remove all jewelry from your neck and chest area.

Tell your provider and the X-ray technologist if you are pregnant or breast-feeding, or if you've had a breast biopsy. If you are pregnant and need to have an abnormality checked, your belly area will be covered and protected by a lead apron. Routine screening mammography is not done during pregnancy or while breastfeeding.



Understanding the results

Normal: Breast tissue that shows no signs of a mass or calcifications – tiny deposits of calcium – is considered normal.

Abnormal: Most abnormal findings on a screening mammogram turn out to be benign (not cancer) or nothing to worry about. New findings or changes must be further evaluated.

A radiologist may see the following types of findings on a mammogram:

- A well-outlined, regular, clear spot (this is more likely to be a noncancerous condition, such as a cyst)
- Masses or lumps
- Dense areas in the breast that can be breast cancer or hide breast cancer
- Calcifications (most are not a sign of cancer)

At times, other tests are also needed to further examine mammogram findings. Comparing your current mammogram to your past mammograms helps the radiologist tell whether you had an abnormal finding in the past and whether it has changed.

Suspicious: When mammogram or ultrasound results look suspicious, a biopsy is done to test the tissue and see if it is cancerous.



Statistics for MEN and breast cancer

Although routine mammograms are not recommended for men, they *can* develop breast cancer.

About 2,620 new cases of invasive breast cancer are diagnosed in men in the United States each year.

If you suspect you may have breast cancer or have a strong family history of breast cancer, talk with your doctor.

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<https://www.surveymonkey.com/r/RRCM8VM>

