

Mammography Tips

- Do not wear deodorant the day of your mammogram. Some of the ingredients used in deodorant can be misinterpreted in your images.
- Wear a two-piece outfit. You will need to undress from the waist up to have your mammogram.
- Schedule your mammogram shortly after the end of your period. Since many women experience discomfort in the week prior to their period, having your breasts compressed during this time could increase that discomfort.
- If you do not hear from your health care provider within 10 days of your mammogram, call to confirm the status of your exam.

Resources

American Cancer Society: www.cancer.org 800-227-2345

Food and Drug Administration: www.fda.gov

Komen Foundation: www.komen.org
800-462-9273

National Cancer Institute: www.nci.nih.gov
800-4CANCER 800-422-6237

National Alliance of Breast Cancer Organizations:
www.nabco.org 888-806-2226

Y-ME Breast Cancer Advocacy Organization:
www.y-me.org 800-221-2141

Informational site about digital mammography:
www.HerSource.com

National Consumers League

Founded in 1899, the National Consumers League's mission is to identify, protect, represent, and advance the economic and social interests of consumers and workers.



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MAMMOGRAMS

A Consumer Guide to Breast Cancer Detection

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Breast cancer is the second most common cancer in women and the leading cause of cancer-related deaths in women ages 40-55.

Don't become a statistic. Breast cancer is highly detectable through mammography screening. The earlier it is discovered, the greater a woman's chance for survival. This brochure will help you understand the process of mammography and will answer common questions about mammograms and breast cancer. But it should not replace advice from your health care professional. If you have further questions or concerns about breast cancer or mammograms, please consult your health care professional.

Breast Cancer Facts

- Every three minutes, a woman is diagnosed with breast cancer, and every 13 minutes, a woman dies from the disease.
- The American Cancer Society estimates more than 193,000 women will be diagnosed with breast cancer this year, and more than 40,000 will die from the disease.
- Early diagnosis and treatment are key to surviving breast cancer.
- Less than one-third of American women follow doctors' guidelines for having a mammogram, according to the breast cancer advocacy group Y-ME.
- Studies from the National Cancer Institute show that 96 percent of women whose breast cancer is detected early live five or more years after treatment.

Screening Methods

SELF-EXAM: A breast self-exam is important for observing and examining your breasts for any changes in their normal texture and appearance. You should do a self-exam once a month, about the same time every month. The best time to do the self-exam is right after your monthly period. It is recommended women begin self-exams by age 20. To find out more about a self-exam, go to the "How to perform a self-breast exam" section of the American Cancer Society's Web site, www.cancer.org.

CLINICAL EXAM: Your health care provider will conduct a clinical breast exam to check for changes or abnormalities in your breasts. You should have an annual check-up by your primary care professional or a gynecologist to have your clinical breast examination.



MAMMOGRAM: Images of the breast, i.e. mammograms, are taken to help detect abnormalities or lumps that may indicate early stages of breast cancer. There are two types of mammography systems: conventional and digital.

Conventional: Conventional mammography takes an x-ray image of the breast tissue. The image is developed into printed images that allow the radiologist to examine for any abnormalities.

Digital: Digital mammography uses x-rays to create an image of the breast on a computer screen. In a matter of seconds, the image is analyzed from the computer picture, printed, and stored as a reference for your future mammograms.

Breast Cancer Risk Factors

A risk factor is something that increases a person's chances of getting a disease. Although the cause of breast cancer is unknown, the American Cancer Society lists the following as possible risk factors:

- **Gender:** Breast cancer is about 100 times more common in women than men.
- **Age:** A woman's risk for breast cancer increases with age.
- **Prior history of breast cancer.**
- **Family history:** Women with a close blood relative who has had breast cancer are more susceptible to the disease.
- **Race:** White women are the most likely to develop breast cancer of any racial group; however, the mortality rate is higher among African-American women.
- **Early menstruation:** Before age 12.
- **Late menopause:** After age 55.

Frequently Asked Questions

Who is at risk for breast cancer?

Every woman is at risk for breast cancer. According to the National Cancer Institute, one in eight American women will develop breast cancer in her lifetime. The risk for breast cancer increases with age and for women with a family history of the disease. However, women with no history of breast cancer are also diagnosed with the disease.

What causes breast cancer?

The cause of breast cancer is not known. That's why screening is critical. Early detection of breast cancer significantly improves a woman's chances for proper treatment and a full recovery.

Who should have a mammogram?

Medical and health professionals agree every woman starting at age 40 should have a mammogram taken on a regular basis, usually every one or two years. If you have a family history of breast cancer, your physician may suggest that you begin having annual mammograms taken at an earlier age.

If I conduct a self-exam every month and don't feel anything different, do I still need a mammogram?

Yes. Abnormalities in a woman's breast can be detected by mammography years before they can be discovered in a self- or clinical exam. They also give the radiologist a way to compare images and look for minor changes. Continuous technological advances are improving detection, which is crucial for proper diagnosis and increases a woman's chance of survival. Talk to your health care provider and ask if you should begin having regular mammograms.

Does having a mammogram hurt?

A mammogram can be uncomfortable. The breast is positioned between rigid plates to reduce the radiation dose and eliminate motion so the radiologist will attain a clear image. Advances in technology promise to make the mammogram more comfortable, use less radiation, and take less time.

Reduce Your Risk of Developing Breast Cancer by:

- *Having children before 30*
- *Breast-feeding*
- *Limiting alcohol intake to one drink per day*
- *Maintaining a healthy weight*
- *Exercising regularly*



How long does it take to get a mammogram?

It takes about 10 to 15 minutes to have the images taken. With conventional mammography, you will have to wait in the exam room for five to 10 minutes while the technologist develops the x-ray film in a dark room to ensure the pictures are clear and do not need to be retaken. If you have a digital mammogram, the images are available almost instantly for the technologist to assess and adjust your positioning, if needed.



How many images will be taken?

The standard screening takes two images of each breast. However, depending on the size and density of your breast, you may need more. If the radiologist has a concern about a certain area on your pictures, you may be asked to return for a diagnostic exam. More pictures will be taken at that time. Improvements in digital technology allow the radiologists to manipulate the breast image on the screen: to zoom in and zoom out, and add or reverse the contrast; aiding the readability and interpretation of the image. These advancements minimize the number of times you may be called back for another exam, thus reducing the need for additional radiation exposure.

What if they find something wrong?

In a few instances your diagnostic test may show that you need a biopsy to determine whether the abnormality is cancerous. A biopsy is the removal of a very small sample of tissue, either by a small syringe or ultrasound-guided needle. It is important to know that most biopsy results come back normal.

Callbacks Are Not Uncommon

Out of 1,000 women, approximately 100 will be called back for additional exams. However, only eight to 10 of those women will need a biopsy, and 80 percent of those biopsies will not be cancerous. Digital technology makes mammograms clearer, thereby reducing the number of callbacks by 20-30 percent.

Who will perform the exam?

All mammographers are highly trained medical professionals and need to be certified, according to the Food and Drug Administration's 1992 Mammography Quality Standards Act. Most of the mammography technologists are women. A doctor of radiology interprets the images — film or digital.

Will the radiation from the mammography cause breast cancer?

No. The level of radiation used during a mammogram is very low. According to the American Cancer Society, a woman receiving treatment for breast cancer would receive several thousand "rads" of radiation. However, a woman who receives a mammogram each year from age 40 to 90 would only receive a total of 10 rads.

Do I take my pictures with me when I leave?

It's unnecessary for you to keep copies of your mammogram. However, your physician will keep copies for year-to-year comparisons and will have the images to send to another radiologist in the event you want a second opinion. Digital mammography machines now allow radiologists to store images on disk and to transfer images via email or satellite from mobile screening facilities to hospitals around the world, if additional consultations or a second opinion are needed. If you do not go to the same facility year after year for your mammogram, you should bring your previous images with you. It is important for your doctors to compare them to prior mammograms.