



NOTES ON SCREENING MAMMOGRAPHY



Welcome to the BreastScreen WA clinic...

Please read this important information about mammography screening and fill in the attached consent form BEFORE your mammogram. If you have any questions the staff at the screening unit can help you. Please note that you can have a procedure stopped at any time.

About the breast screening program

The aim of the breast screening program is to reduce deaths from breast cancer. A mammogram (breast X-ray) is the best method we have at present of finding breast cancers when they are too small to feel. The earlier a breast cancer is diagnosed the better the chance of successful treatment.

The focus of the BreastScreen WA Program is on the early detection of breast cancer. Changes seen on your mammogram which are not considered to be a sign of breast cancer are not reported on.

Current medical evidence shows that screening is most useful for women aged 50-74. Your chance of having breast cancer increases with age. Almost 70% of breast cancers occur in women who are 50 or older. Regular screening mammograms can reduce the deaths among these women by about 30%. The benefits of mammography screening are less for women under 50.

How is the mammogram taken?

You will be asked to remove your bra and put your top back on, or if you require, a disposable gown is available. A specially trained female radiographer will take your mammogram.

While the mammogram is being taken the breast is compressed for a few seconds in order to get a clear picture. This may be uncomfortable.

Usually two pictures are taken of each breast, but sometimes more may be necessary.

Who reads the mammogram?

The outcome of your mammogram will be based on the agreement between at least two specialist doctors (radiologists) who are very experienced in reading mammograms. All mammograms are read independently. Occasionally, if the first two radiologists do not agree, a third radiologist will read your mammogram.

What if I need a repeat X-ray?

Very occasionally the radiologist will request a repeat x-ray if the picture produced is not clear enough. If this is necessary you will receive a phone call or letter requesting you return. These repeat x-rays will be done at the screening clinic.

Notification of results

Most women will be informed by letter within 14 days that all is well. It is not uncommon for women to be called back for further tests. If this is necessary, the **breast assessment nurse** from BreastScreen WA will telephone to discuss this with you. Mostly, these tests will not show any problem needing further investigation.

Women who are screened in the metropolitan area will be offered an appointment at a program assessment centre where further mammographic views or, if needed, other tests will be carried out.

For women screened on a country mobile unit, these further mammographic views will be done, for their convenience, at the mobile van.

Please Note: BreastScreen WA retains the mammograms to compare with future films.

How reliable is the mammogram?

Mammograms can show up to 90% of breast cancers. There are some cancers that cannot be seen on a mammogram. Younger women or women on Hormone Replacement Therapy may have much denser breast tissue than older women and this may make it more difficult to identify a cancer on a mammogram. This may result in younger women requiring more investigations, including biopsy, because of the difficulty in excluding a cancer on the basis of the mammogram.

Similarly a mammogram may initially look worrying but further investigation shows there is no serious problem.

Having a mammogram cannot prevent breast cancer but early detection ensures the best chance of successful treatment.

Can the mammogram do any harm?

Occasionally the compression used to take the mammogram may cause some temporary breast tenderness or bruising. This does not cause any long term harm to the breast tissue. Each mammogram uses a very low dose of radiation. Current evidence shows that there is very little risk associated with this radiation exposure. The benefits of screening mammography outweigh this risk.

It is not recommended that women who suspect that they are pregnant have a mammogram. If there is a chance that you may be pregnant, please inform the receptionist or radiographer.

What if I have a breast lump or breast problem now?

If you have noticed a lump in your breast, a discharge from the nipple or other changes in your breasts, please tell the radiographer before she takes your mammogram. It is also important that you see your doctor about these symptoms even if the mammogram is normal.

Why should I give you my general practitioner's details?

In order to give you the best care, your GP needs to have information about all your health care. We like to send the result of your mammogram to him/her. In the interval between mammograms, it is important that you examine your breasts regularly and that you report any changes to your doctor immediately. We would suggest you have your breasts checked regularly by your doctor.