

Should I get a mammogram? AGES 40-49

Many women want to know when they should start having screening mammograms and how often they should have them. For women between the ages of 40-49, national guidelines offer differing recommendations; some organizations recommend starting screening mammograms at age 40 while others recommend starting routine screening at age 50. To decide what is best for you, you should consider the benefits and possible harms that can result from getting mammograms. You should also understand your personal risk of breast cancer.

Screening mammograms are done to check for breast cancer in women who have no concerning symptoms with their breasts. **If you currently have any breast symptoms, such as pain or lumps, please see your primary care provider right away and don't wait for a screening test.**

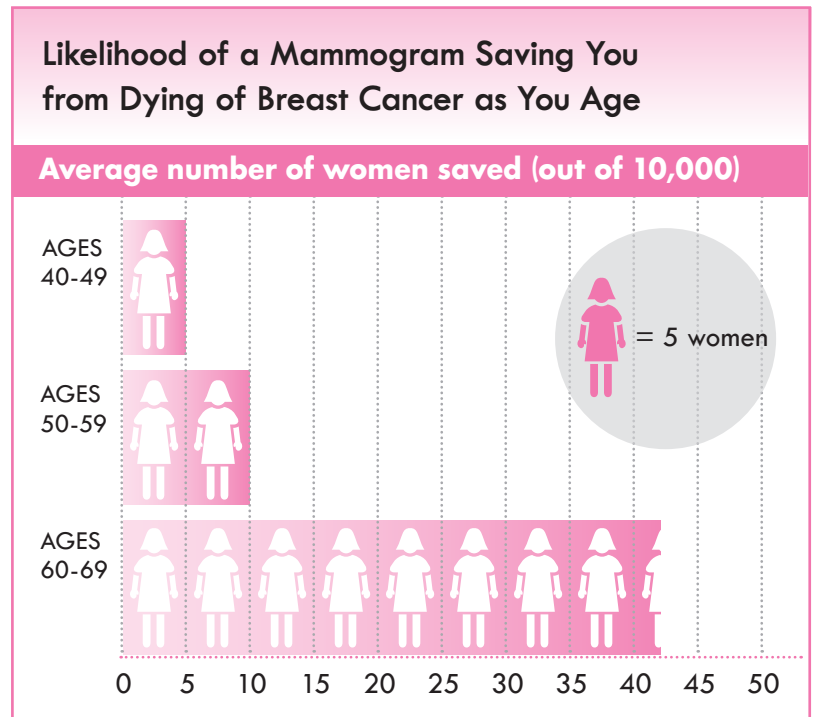
What age to start mammograms?

- For women ages 40-49 with an **AVERAGE** risk of breast cancer, the harms from screening mammograms may outweigh the benefits.
- For women ages 40-49 with a **HIGHER** risk of breast cancer, regular screening mammograms starting at age 40 may be beneficial (see risk factors on next page).

There may be a slightly higher chance of finding cancer at a later and less curable stage with mammograms starting at age 50 instead of 40. However, starting regular mammography at age 50 instead of 40 reduces the possible harms of mammography.

Benefits of Mammograms

Screening mammograms can find breast cancer early, before you have symptoms. When found earlier, cancer may be easier to treat. However, breast cancer is rare in women ages 40-49 who have average risk. If 10,000 women get regular mammograms between the ages of 40-49, about



five of these women will have their lives saved because of screening mammograms. The benefits of screening mammograms increase as women get older.

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Possible Harms of Mammograms

Mammograms are not a perfect test. Some breast cancers will not show up on mammograms. A few women will die of breast cancer even if they have regular mammograms.

You may have a **“false positive”** on a mammogram. This happens when a mammogram shows a spot that looks worrisome for cancer, but further testing shows there was no problem after all. Over the course of 10 years, women who have mammograms every year have a 60 percent chance of a false positive result.

Some cancers found by screening mammograms will never cause any health problems in the future. This is called **“overdiagnosis.”** Even after further examination, providers cannot be sure which cancers will be harmless. This means some women will have surgery, chemotherapy or radiation treatment they don't need. Estimates suggest that 1 in 5 women diagnosed with breast cancer are over-diagnosed.

Increased Risk

Some women are at increased risk for breast cancer. Risk factors include:

- A first degree relative, such as a mother or sister, who has had breast cancer
- A previous biopsy not showing cancer but with an abnormal result (atypia)
- A previous but normal breast biopsy (benign)
- Previous radiation treatments to the chest
- Dense breasts found on mammogram

Women at increased risk of breast cancer may benefit from starting breast cancer screening earlier.

Talk to your provider about how often you should have a mammogram based on your values, preferences and risk factors.

Out of 5 women
diagnosed with breast cancer
from a mammogram...



... 1 woman
is overdiagnosed.

Out of every 10 women who
receive regular mammograms
over the course of 10 years...



... 6 women will receive
false positives.

Of those 6 women...



... 1 woman will need a biopsy.

To estimate your personal risk of developing breast cancer visit: breastscreeningdecisions.com

Reference: Pace LE et al. A systematic assessment of benefits and risks to guide breast cancer screening decisions. JAMA. 2014;311(13):1327-1335.