

Breast Cancer Screening:Recommendations for women who have no breast symptoms

Breast cancer is the most common form of cancer in women. Although we can't prevent breast cancer, it can be treated effectively if caught early. Screening means routine testing, to detect breast cancer when it is small and easiest to treat.

There are currently three methods of screening (testing) for breast cancer. They work best when used together:

- 1. **Mammography:** Specialized X-ray of the breast.
- 2. Clinical breast examination:
 Physical examination of the breast by your doctor or nurse practitioner.
- 3. Breast self-examination: Checking your own breasts for lumps or changes to the tissue. (See tips on page 2.)

Kaiser Permanente's screening guidelines are organized by age and level of risk. For most women, the average risk guidelines apply. Factors that can increase your risk of breast cancer are outlined in the high risk screening guidelines on the right. If you have any of these, be sure to discuss them with your doctor or other health care professional.

If you have any **symptoms**, such as a new lump, nipple discharge, redness, or another change in your breast tissue, call your doctor or other health care professional immediately. Don't wait to be screened. Most lumps are not cancer, but you do need to have them checked as soon as possible.

Average risk screening guidelines

Most women are average risk. That means you do not have high risk factors and can follow the guidelines below:

Mammography

- Before age 40, there are no specific recommendations for screening mammograms since breast cancer is very rare at this age
- Between ages 40–69, a mammogram is recommended every 1-2 years
- Over age 70, there are no specific recommendations for screening mammograms. Discuss when to stop screening with your doctor or other health care professional.

Clinical Breast Exams (CBE)

We offer clinical breast exams every 1-2 years. We recommend that you talk to your doctor or other health care professional about CBE during your regular check-ups.

Breast Self Exam (BSE)

We recommend that you check your breasts every month. This helps you to know your own body and to notice if there are any new changes in your breast tissue. If you are menstruating, the week after your period is the best time for BSE.

High risk screening guidelines

High risk refers to a woman with one or more of these risk factors:

- breast cancer herself
- a breast biopsy showing atypical or carcinoma-in situ (ADH, ALH, DCIS or LCIS)
- her mother, sister, or daughter developed breast cancer before the age of 40
- two or more close relatives (mother, sister, or daughter) had breast cancer, one or more occurring before the age of 50
- her mother, sister, or daughter had ovarian cancer
- known BRCA gene mutation, in either herself or her close family members
- prior chest radiation therapy

Mammography

If you have any of these risk factors, you should begin yearly mammograms at age 35, or 5 years before the youngest person in your family was found to have cancer.

Clinical Breast Exam

If you have any of these risk factors, we recommend that you have a clinical breast exam by a doctor or other health care professional every 1-2 years.

Breast Self Exam (BSE)

We recommend that you check your breasts every month. That way, you can get to know your own body and so that you will notice any new changes in your breast tissue. If you are menstruating, the week after your period is the best time for BSE.



Breast self-exam

Establish a regular time each month to examine your breasts, such as a few days after your period when your breasts are not swollen or tender. Women who do not menstruate can examine their breasts the first day of each month.

Most women's breast tissue has some lumps or thickening. When in doubt about a particular lump, check the other breast. If you find a similar lump in the same area on the other breast, both breasts are probably normal. Be on the lookout for changes, thickening, or new lumps.

Have any areas of concern checked by your medical professional. The important thing is to learn what is normal for you and to report changes to your doctor.

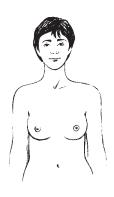
The breast self-exam takes place in two phases.

Phase 1: In front of the mirror

Examine your breasts visually in a mirror. Few women have breasts that match exactly. It is normal for one breast to be slightly larger than the other. Learn what is normal for you.

Look at your breasts in three positions:

• Stand with your arms at your sides



• With your hands on your hips



With your arms raised overhead



In each position, look for changes in the contour and shape of your breasts, the color and texture of the skin and nipple, and any discharge from the nipples.

Phase 2: Lying down

To examine your left breast, place a pillow or folded towel under your left shoulder. Use your right hand to examine your left breast. If your breasts are large, lie on your right side and turn your left shoulder back flat to spread the breast tissue more evenly over your chest wall. Use the pads of your middle three fingers to examine your breast. Move the fingers in small, dime-sized circles. Don't lift your fingers away from the skin. Use light, medium, and deep pressure in each spot to feel the full thickness of the breast tissue. You are feeling for lumps, thickening, or changes of any kind.

Examine your entire breast using a vertical strip pattern (see illustration).



Examine all tissue from the collarbone to the armpit and from the bra line to the breastbone. Start in the armpit and work down to the bottom of the bra line. Move one finger width toward the middle and work up to the collarbone. Repeat until you have covered all the breast tissue.

Move the pillow or towel to the other shoulder and repeat this procedure for the other breast.

If you examine your breasts monthly, you will learn what is normal for you and quickly recognize if something changes. The breast self-exam takes some practice. You can learn more about breast self-exams at your Kaiser Permanente Health Education Center.

When to call Kaiser Permanente

If you discover any unusual lumps, thickening, discharge from the nipple, or changes of any kind, report them to your doctor immediately. Remember, most lumps are not malignant, but you will need your doctor to make a diagnosis.

Other resources

- Visit your doctor's Home Page at kp.org/mydoctor. Also, you can search the Health Encyclopedia at kp.org/health for more in-depth information on this and many other topics.
- Check your Kaiser Permanente Healthwise Handbook.
- Contact your Kaiser Permanente Health Education Center or Department for health information, programs, and other resources.

This information is not intended to diagnose or to take the place of medical advice or care you receive from your physician or other health care professional. If you have persistent health problems, or if you have additional questions, please consult with your doctor.

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