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Sue Ann Says: Talk with Your Health Care Provider about Mammogram Guidelines

Our job at the Wisconsin Women's Health Foundation is to help Wisconsin women become advocates for their own health and the health of their families through education, prevention and early detection. So it probably comes as no surprise that our phones were ringing off the hook when new mammography screening guidelines were released this past November. "What are we supposed to do?" was the question of the day.

It was clear that this topic needed to be addressed in a Sue Ann Says column.

Frankly, I think the guidelines, or at least how they were communicated, are confusing, unnerving, and conflicting. In a nutshell, the U.S. Preventive Services Task Force (USPSTF) is recommending against routine screening mammography in women age 40-49 years; that women age 50-74 should have mammograms every two years rather than every year; and, that doctors should stop spending their office time advising women to regularly examine their own breasts.

This was hard to swallow. After all, a mammogram detected my breast cancer when I was in my 50s, and my daughter, Tommi, found her cancer during a breast self exam in her early 30s.

On the other hand, the American Cancer Society continues to recommend annual mammography for women age 40 and over.

I asked members of our Scientific Advisory Committee to set me straight about the conflicting information. Dr. Beth Burnside, Dr. Gloria Sarto, and Dr. Molly Carnes all agreed that it highlights the fact that the decision to get screening mammography or do breast self exams is complex. According to Dr. Burnside, "Any decision should take into consideration each woman's unique characteristics, risk factors, and values, and be the result of a discussion between her and her health care provider."

Mammograms are the best tests we have right now to detect breast cancer, so it's alarming that only 50% of women who are eligible to receive a mammogram actually get one. Many women who have no family history believe that they won't get breast cancer. However, for all women diagnosed with breast cancer, 70% of them had no risk factors. Will these new guidelines cause women to believe that they do not need mammograms at all? I hope not; we have seen mammograms change in a one year period and early detection is best achieved by having regular mammograms. They can detect microcalcifications, which can be the earliest sign of breast cancer.

WWHF and those in the breast cancer community have made great strides with breast cancer awareness, reminding women to have mammograms and clinical breast exams yearly, along with self-breast exams monthly. These recommendations came about after decades of research which shows that early detection is the key to surviving breast cancer. When breast cancer is contained in the breast and has not spread outside to the lymph nodes or to other parts of the body, the survival rates are greater. Until there's a known cure, we have to be proactive and fight breast cancer as aggressively as possible.

So, what should you do? You must not let the USPSTF guidelines discourage you from getting mammograms. Guidelines should never replace a dialogue with your own health care provider that considers your individual risk. [The USPSTF is not a policy setting committee. In other words, standard medical procedures and your insurance company mammogram coverage will probably not be affected by their findings.]

Finally, do everything you can to help prevent breast cancer (mammograms detect cancer, but YOU can help reduce your risk). For example: lose weight if you're overweight, and don't drink more than two alcoholic beverages a day (or quit all together).

Because it all begins with a healthy woman.



Sue Ann Thompson
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The Wisconsin Women's Health Foundation (WWHF) is a statewide non-profit organization whose mission is to help Wisconsin women and their families reach their healthiest potential. WWHF provides programs and conducts forums that focus on education, prevention, early detection, and connecting individuals to resources; produces and distributes the most up-to-date health education and resource materials; and, awards grants and scholarships to women health researchers and related community non-profits. Your donations help WWHF reach women all over Wisconsin with the information, resources and tools they need to be healthy. To make a donation or to learn more, visit wwhf.org or call 1-800-448-5148.

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Talk to your health care provider about the following breast cancer risk factors and protective factors. (National Cancer Institute, Oct. 2009)

Risk factors that may increase the risk of breast cancer:

- Estrogen (endogenous)
- Hormone replacement therapy/hormone therapy
- Exposure to radiation
- Obesity
- Alcohol

- Inherited risk

Protective factors may decrease the risk of breast cancer:

- Exercise
- Estrogen (decreased exposure)
- Selective estrogen receptor modulators
- Aromatase inhibitors
- Prophylactic mastectomy