

Breast Density Mammogram Guideline

For women age 40 and older.

Annual Mammogram Screening & Clinical Breast Exam for the Early Detection of Breast Cancer

Assess Patients for Breast Cancer Risk (A or B)

(A)

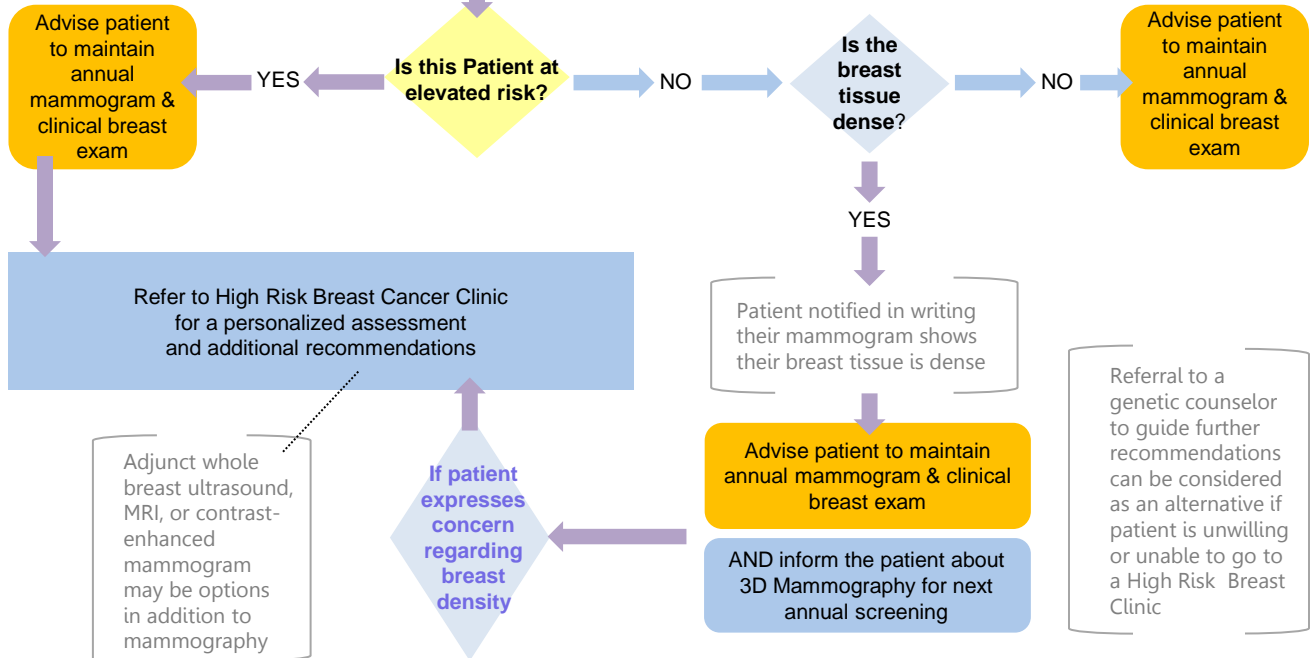
CLICK HERE:
For the National Cancer Institute Breast Cancer Risk Assessment Tool.

Intermediate Risk 15-20%
and/or
High Risk > 20%

(B)

Assessing Genetic Risk:

- Known mutation in a cancer susceptibility gene within the family
- 2 or more breast cancer primaries in a 1st, 2nd, or 3rd degree relative
- Ovarian cancer primary
- 1st or 2nd degree relative with breast cancer ≤ 45
- Personal and/or family history of 3 or more of the following: pancreatic cancer, prostate cancer, sarcoma, adrenocortical cancer, brain tumors, endometrial cancer, thyroid cancer, kidney cancer, dermatologic manifestations
- Male breast cancer
- Received chest radiation between the ages 10-30 years old
- History of atypia (ADH, LCIS, ALH, SEA)



Many states have passed breast density notification legislation, some within the Sanford footprint. Thus, Sanford Health is notifying patients in writing if mammography identifies their breast tissue as dense.

All patients (regardless of state of service) with either **heterogeneously dense** or **extremely dense breast** tissue on mammogram will receive notification in writing. The full text is on the next page.

Laws in many states now mandate reporting breast density.

Breast density incidence and impact.

Description	Almost entirely fat	Scattered fibroglandular	Heterogeneously dense	Extremely dense
Population Percentage	10%	40%	40%	10%
Relative Risk to Average	Average	Average	1.2x	2.0x
Mammogram Sensitivity	Regular	Regular	Decreased 10-20%	Decreased 10-20%

Mammograms have been shown to be effective in lowering breast cancer mortality for all breast densities.

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Clinical Pearls

1. **Mammography is recommended for all women of screening age, independent of breast density and breast cancer risk.**
2. Stopping annual mammography should be a personal decision between a patient and her primary clinician and should be based upon her health and life expectancy. Generally, stopping annual mammography can be considered when life expectancy is not expected to exceed 5-10 years and/or when the patient would not elect or could not tolerate further treatment if a breast cancer was detected.
3. Breast density affects mammographic screening in two primary ways: breast density has a masking effect on underlying cancers and also is an independent risk factor for breast cancer.
4. Breast density is not a fixed entity but may vary over time because of interpreter variability and physiologic changes.
5. Data suggest that the masking effect of dense breasts on cancer detection is greatly reduced with the use of digital mammography vs film-screen mammography.
6. Although there are no current guidelines that recommend screening with 3D mammography, early results are suggesting that a similar reduction in the masking effect will occur with it.
7. Supplemental screening of women with dense breasts who are of average or low risk is not currently recommended by most major medical societies or evidence-based review studies.
8. There is currently no formal recommendation from the radiology community regarding adjuvant screening tools in average or intermediate risk women including whole breast ultrasound, MRI, contrast enhanced mammography or molecular breast imaging.
9. If patient has had mastectomy with or without reconstruction it is not recommended to do screening breast imaging routinely. Imaging may also be warranted if the mastectomy patient is symptomatic. If patient has breast implants without mastectomy this screening algorithm applies.

Many states have passed breast density notification legislation, some within the Sanford footprint. Thus, Sanford Health is notifying patients in writing if mammography identifies their breast tissue as dense. All patients (regardless of state of service) with either **heterogeneously dense** or **extremely dense breast** tissue on mammogram will receive the following:

"The mammogram shows that your breast tissue is dense. Dense breast tissue is very common and is not abnormal. But dense breast tissue can make it harder to find cancer on a mammogram. Also, dense breast tissue may increase your breast cancer risk. This information about the result of your mammogram report is given to you to raise your awareness. Use this report when you talk to your doctor about your own risks for breast cancer, which includes your family history. At that time, ask your doctor if more screening tests might be useful, based on your risk. More information on breast density can be found at the <http://www.breastdensity.info/> website."

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