Answers to Your Questions

Q. What is a mammogram?
A. A mammogram is an X-ray taken of your breast. This picture is used to identify breast cancer that may be too small for you or your doctor to feel. Early detection is key because the five-year survival rate for early-stage breast cancer is 98%.1

Q. Does a mammogram hurt?
A. Some women may find that mammograms can be uncomfortable. However, the entire exam usually takes only a few minutes and is very important to breast health.

Q. If no one in my family has had breast cancer, do I need a mammogram?
A. Yes. It is estimated that only 5% to 10% of breast cancer cases are related to family history. That means that 90% to 95% of women who develop breast cancer do not have a family history of this condition.3

Q. When should I have a screening mammogram?
A. The American Cancer Society recommends that women have a screening mammogram beginning at age 40, earlier if you have symptoms or a family history. You should get a screening mammogram every year thereafter.

References:

Commonly Used Terms

Benign — Non-cancerous.

Diagnostic Mammogram — Used to further evaluate a woman with a breast symptom or an abnormal finding on a screening mammogram.

Lymph Nodes — Small, bean-shaped structures found in the body that trap and remove cell waste and help fight infections. They are often examined to determine if cancer has spread.

Mammogram — A low-dose radiation X-ray technique designed to help detect breast abnormalities.

MRI (Magnetic Resonance Imaging) — An imaging technology, using magnets to detect and stage cancer.

Screening — The search for abnormalities in people without any symptoms in order to detect breast disease at a very early and more-treatable phase. Screening tests for breast cancer include breast self-exam, clinical breast exam and mammography.

Ultrasound — An imaging technology that uses sound waves to detect suspicious masses in the breast.

X-rays — A type of radiation. Low doses of X-rays are used to diagnose disease; high doses of X-rays are used to treat cancer.
I Want to be Proactive About My Breast Health

Early detection and screening is the key to surviving breast cancer. Mammography is a reliable screening tool that is widely available for detecting breast cancer at its earliest, most-treatable stages. It is quick and easy, revealing both harmless and cancerous growths that may be too small to be felt by you or your doctor.

Regular mammograms are an important part of early detection of breast cancer and other breast health concerns. If found and treated early, while confined to the breast, the five-year survival rate is 98%. Additionally, women have more treatment options if cancer is detected at an early stage.

Women have more treatment options if cancer is detected at an early stage.

Age 60 or older:
- Clinical breast exam every year
- Breast self-exam every month
- Mammogram every year

Age 20-39:
- Clinical breast exam every three years
- Breast self-exam every month

Source: American Cancer Society Guidelines for Early Detection of Breast Cancer
*Women under 40 with a family history of breast cancer or other risk concerns should consult with their doctor about when to begin screening mammograms.

Learning About Screening Mammograms

About Screening Mammography

Screening mammography is performed without signs or symptoms of breast cancer in order to detect the disease early. A mammogram takes an X-ray picture of the breast that can show growths or tumors at an early stage.

While most screening mammograms are normal, some results may require additional imaging studies, using mammography, ultrasound or Magnetic Resonance Imaging (MRI). If something suspicious is found on the mammogram, a biopsy may be required. The good news is, nearly 80% of breast biopsies return a non-cancerous diagnosis.

What to Expect

Mammograms are typically quick and easy. Usually, they are performed in an outpatient facility, like your doctor’s office, a hospital clinic or a mobile van.

When getting a mammogram, the technologist will position you at the X-ray machine.

Your breast will be firmly pressed between two plastic plates in order to flatten the breast tissue. This is an important step because it allows better visualization of the entire breast while using the lowest amount of radiation possible. Your breast should be compressed for only a few seconds.

The pictures are sent to a radiologist (a physician who specializes in interpreting X-ray images). The radiologist looks for signs of breast cancer and other changes, and usually compares your X-ray pictures from prior years to detect changes that may be more difficult to find.

Size of tumors commonly found by a mammogram and breast self-examination.

- 1.1 cm Average size lump found through regular mammograms
- 1.5 cm Average size lump found by first mammogram
- 2.1 cm Average size lump found by women practicing regular breast self-examination
- 3.4 cm Average size lump found by accident


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