



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

Breast cancer is the second most common form of cancer in women and affects 1 in 8 adult females. Although we can't prevent breast cancer, we can treat it more effectively if it is caught early. The best way to detect breast cancer early is by screening. Screening means being tested regularly so the cancer can be caught when it is still small and is easiest to treat.

There are three ways of screening for breast cancer. They work best when used together:

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

We organize our screening guidelines by age and level of risk. Factors that can increase your risk of breast cancer are shown in the "High-risk screening guidelines" section on this page. If you have any of these, talk to your doctor or other health care professional.

If you have a new lump, nipple discharge, redness, or another change in your breasts, call us immediately. Don't wait to be screened. Most lumps or changes to the breasts 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 not having high-risk factors and following the guidelines below:

Mammography

We recommend:

- **Age 75 and over.** Talk with your doctor about when to get screened.
- **Age 50 to 74.** Routine mammogram screening every 1 to 2 years.
- **Age 40 to 49.** Women at average risk of developing breast cancer should consider the risks and benefits of routine mammogram screening before deciding.
- **Age 39 and before.** Routine mammogram screening is not recommended.

It is important to remember that these guidelines are only about routine screening mammograms for women of average risk.

Clinical Breast Exam (CBE)

We may do a clinical breast exam, looking for any abnormalities or changes in your breasts. We recommend that you talk to your doctor or other health care professional about CBE during your regular checkups.

Breast Self-Exam (BSE)

Knowing your own body helps you 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 to check your breasts.

High-risk screening guidelines

You might be at **higher risk** of breast cancer if you have one or more of these risk factors:

- Personal history of breast cancer.
- First-degree relative (mother, daughter, or sister) with breast cancer.
- You or a first-degree relative tested positive for a breast cancer gene.
- Second-degree relative (aunt, niece, grandmother, granddaughter) with breast cancer before age 50.
- First- or second-degree relative with ovarian cancer.
- Prior chest radiation therapy.

Mammography

If you have any of these risk factors, you should talk to your doctor about when to begin getting mammograms, no matter what your age.

Clinical Breast Exam (CBE)

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

(continued on next page)

Breast Self-Exam (BSE)

Knowing your own body helps you 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 to check your breasts.

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.

If you are unsure or have any areas of concern, contact your medical professional by phone or email. The important thing is to learn what is normal for you and to report changes to your doctor.

How to do a breast self-exam

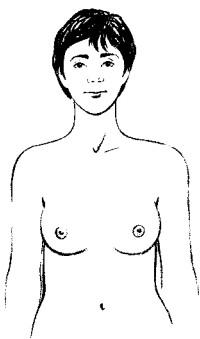
The breast self-exam takes place in two phases.

Phase 1: In front of the mirror

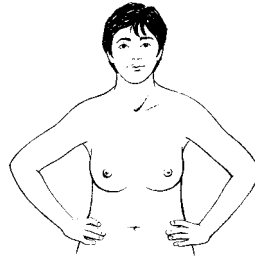
Look at your breasts in a mirror. It is normal for one breast to be slightly larger than the other. Learn what is normal for you.

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

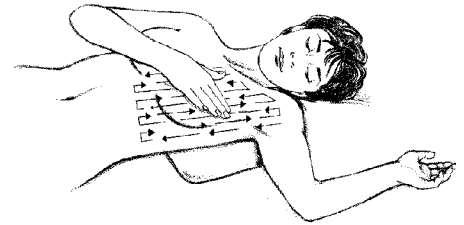
To examine your left breast, place a pillow or folded towel under your left shoulder. Use your right hand to examine your left breast. If your breasts are large, lie on your right side and turn your left shoulder back flat so that the breast tissue spreads more evenly over your chest wall.

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).

Pay attention to 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



Move the pillow or towel to the other shoulder and repeat the steps 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 find any unusual lumps, thickening, discharge from the nipple, or changes of any kind, call or email your doctor immediately. Remember, most lumps are not cancer, but you will need your doctor to make a diagnosis.

Other resources

- Visit your doctor's home page at kp.org/mydoctor. You can also search the Health Encyclopedia at kp.org/health for more in-depth information on this and many other topics.
- 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.

© 2008, The Permanente Medical Group, Inc. All rights reserved. Regional Health Education. This information sheet was developed by the Kaiser Permanente Northern California Breast Cancer Task Force, February, 2008.

011061-390 (Revised 04/15) RL 7.0