

American Cancer Society recommendations for early breast cancer detection in women without breast symptoms

Women age 40 and older should have a mammogram every year and should continue to do so for as long as they are in good health.

- Current evidence supporting mammograms is even stronger than in the past. In particular, recent evidence has confirmed that mammograms offer substantial benefit for women in their 40s. Women can feel confident about the benefits associated with regular mammograms for finding cancer early. However, mammograms also have limitations. A mammogram can miss some cancers, and it may lead to follow up of findings that are not cancer.
- Women should be told about the benefits and limitations linked with yearly mammograms. But despite their limitations, mammograms are still a very effective and valuable tool for decreasing suffering and death from breast cancer.
- Mammograms should be continued regardless of a woman's age, as long as she does not have serious, chronic health problems such as congestive heart failure, end-stage renal disease, chronic obstructive pulmonary disease, and moderate to severe dementia. Age alone should not be the reason to stop having regular mammograms. Women with serious health problems or short life expectancies should discuss with their doctors whether to continue having mammograms.

Women in their 20s and 30s should have a clinical breast exam (CBE) as part of a periodic (regular) health exam by a health professional preferably every 3 years. Starting at age 40, women should have a CBE by a health professional every year.

- CBE is done along with mammograms and offers a chance for women and their doctor or nurse to discuss changes in their breasts, early detection testing, and factors in the woman's history that might make her more likely to have breast cancer.
- There may be some benefit in having the CBE shortly before the mammogram. The exam should include instruction for the purpose of getting more familiar with your own breasts. Women should also be given information about the benefits and limitations of CBE and breast self-exam (BSE). The chance of breast cancer occurring is very low for women in their 20s and gradually increases with age. Women should be told to promptly report any new breast symptoms to a health professional.

Breast self-exam (BSE) is an option for women starting in their 20s. Women should be told about the benefits and limitations of BSE. Women should report any breast changes to their health professional right away.

- Research has shown that BSE plays a small role in finding breast cancer compared with finding a breast lump by chance or simply being aware of what is normal for each woman. Some women feel very comfortable doing BSE regularly (usually monthly after their period) which involves a systematic step-by-step approach to examining the look and feel of one's breasts. Other women are

more comfortable simply feeling their breasts in a less systematic approach, such as while showering or getting dressed or doing an occasional thorough exam.

- Sometimes, women are so concerned about “doing it right” that they become stressed over the technique. Doing BSE regularly is one way for women to know how their breasts normally look and feel and to notice any changes. The goal, with or without BSE, is to report any breast changes to a doctor or nurse right away.
- Women who choose to use a step-by-step approach to BSE should have their BSE technique reviewed during their physical exam by a health professional. It is okay for women to choose not to do BSE or not to do it on a regular schedule such as once every month. However, by doing the exam regularly, you get to know how your breasts normally look and feel and you can more readily find any changes. If a change occurs, such as development of a lump or swelling, skin irritation or dimpling, nipple pain or retraction (turning inward), redness or scaliness of the nipple or breast skin, or a discharge other than breast milk (such as staining of your sheets or bra), you should see your health care professional as soon as possible for evaluation. Remember that most of the time, however, these breast changes are not cancer.

Signs and symptoms of breast cancer

Widespread use of screening mammograms has increased the number of breast cancers found before they cause any symptoms. Still some breast cancers are not found by mammograms, either because the test was not done or because even under ideal conditions mammograms do not find every breast cancer.

The most common symptom of breast cancer is a new lump or mass. A mass that is painless, hard, and has irregular edges is more likely to be cancerous, but breast cancers can be tender, soft, or rounded. They can even be painful. For this reason, it is important to have any new breast mass or lump, or breast change checked by a health care professional experienced in diagnosing breast diseases.

Other possible signs of breast cancer include:

- Swelling of all or part of a breast (even if no distinct lump is felt)
- Skin irritation or dimpling
- Breast or nipple pain
- Nipple retraction (turning inward)
- Redness, scaliness, or thickening of the nipple or breast skin
- A nipple discharge other than breast milk

Sometimes a breast cancer can spread to lymph nodes under the arm or around the collar bone and cause a lump or swelling there, even before the original tumor in the breast tissue is large enough to be felt.

Although any of these symptoms can be caused by things other than breast cancer, if you have them, they should be reported to your doctor so that he or she can find the cause.