

## RSNJ Position on Breast Cancer Screening

Despite recent changes issued by the American Cancer Society (ACS) guidelines regarding breast cancer screening, the Radiology Society of New Jersey (RSNJ), along with the American College of Radiology (ACR), the Society of Breast Imagers (SBI), and the American College of Obstetrics and Gynecology (ACOG) continue to recommend annual screening mammograms starting at 40 years of age.

In the United States, 1 in 8 women will develop breast cancer in their lifetime, resulting in more than 230,000 women diagnosed in 2015 alone. Screening mammography plays a crucial role in the prompt detection, diagnosis and treatment of breast related malignancy, accounting for decreases in cancer related deaths and improved outcomes. Despite the known importance of early detection, the frequency and benefits of mammography has been under scrutiny in recent years. The newly released 2015 Guideline update from the American Cancer Society for “Breast Cancer Screening for Women at Average Risk” has provided little clarity for the situation and instead has created confusion for the vast majority of patients and providers.

The new ACS Guidelines still provide many of the same guidelines regarding the need for screening mammograms, however puts many women’s lives at risk by allowing the patients to choose to begin mammograms at age 40 or wait until age 45 as well as deciding to have annual or biennial screening after age 55. While the new guidelines state that patients CAN begin annual screening exams at age 40 or continue annual after age 55, it places the burden on the patient and physician to decide rather than establishing firm guidelines. While the patient can rely on some risk factors (family history, hormonal factors such as age of menarche and age of first pregnancy, and obesity) in the decision process, many of women diagnosed with breast cancer do not have significantly elevated risks. By neglecting women age 40-45, the ACS guidelines are ignoring at least 6% of the diagnosable cancers accounting for more than 12% of the person-years of life lost due to breast cancer. The diagnosis of breast cancer in younger women (age 40-45) can result in a longer quality of life with early detection and treatment.

The new ACS guidelines also highlight areas of improvement in the current mammographic screening system. The anxiety women feel when asked to return for additional images is a real concern the radiologists reading the mammograms face each day. In many cases, these false-positive results require additional images to clarify areas of summation or overlapping tissue which can mimic a possible malignancy. However, with improved mammographic technology such as Digital Breast Tomosynthesis (DBT), the radiologists call backs rate can be reduced by greater than 25%, preventing unnecessary anguish. The use of this new and emerging technology was not addressed by the new ACS guidelines

The new ACS guidelines, while providing transparency in its process, only create more confusion for the American women over age 40. The RSNJ, as well as the ACR, SBI and ACOG, continue to recommend annual screening mammograms beginning at age 40 and continuing annually.