Breast Cancer Screening

FREQUENTLY ASKED QUESTIONS

Q. What is a mammogram?
A. A mammogram is a special type of x-ray exam used to create detailed images of the breast. Mammograms are the only FDA-approved test for screening breast cancer. Mammography plays a major role in the early detection of breast cancers, which increases the chances of successful treatment and survival.

Q. What is the difference between a screening mammogram and a diagnostic mammogram?
A. A screening mammogram is performed when there are no clinical signs or symptoms of breast cancer. They are interpreted later by the radiologist with results sent to the patient by mail.

A diagnostic mammogram is performed when there are signs or symptoms of breast cancer, such as a lump, nipple discharge, skin changes, etc. They are also used when patients have a past history of breast cancer, for follow-up of an abnormal screening mammogram, or for short term follow-up of findings that are probably benign.

Q. Is a mammogram painful?
A. The pressure caused by spreading the breast tissue to get a good image may be uncomfortable, but it should not be painful. If you experience pain, tell the technologist. The quality of your mammogram depends on the compression of the breast.

Q. Is the radiation exposure from getting a mammogram harmful?
A. Modern mammogram equipment designed for breast x-rays uses very low levels of radiation. The level of radiation used in modern mammograms does not significantly increase the risk for breast cancer.

Q. Should I do a regular breast self-exam?
A. Once considered essential for early detection of breast cancer, breast self-exams (BSE) are now considered optional. However, it is still important to be familiar with your breasts and what they normally look and feel like, so if there is a change you will notice it.

Q. Do most women die of breast cancer?
A. Many women fear breast cancer more than any other disease. And many people believe that most women die of breast cancer. But that’s not the case. In the U.S., breast cancer is the fifth-leading cause of death for women. Heart disease is first.

Q. How do you know if you are at high risk for breast cancer?
A. High risk factors for breast cancer include:
   - Family history of breast cancer: Two or more first degree relatives with breast cancer, especially if they were diagnosed when premenopausal.
   - Personal history or family history of the breast cancer gene BRCA 1 or BRCA 2.
   - Personal history of radiation therapy (not an x-ray) to the chest between the ages of 10 and 30 years.
   - Lifetime risk of breast cancer scored at 20%-25% or greater based on one of several accepted risk assessment tools that look at family history and other factors. This category often requires consultation with a genetic counselor who can assess breast cancer risk using various computer models.

Health First Health Plans is an HMO plan with a Medicare contract. Enrollment in Health First Health Plans depends on contract renewal.