

Making Sense of the Mammogram Controversy

By *Thomas S. Chang, M.D., FACR*

The U.S. Preventive Services Task Force made headline news with their November 2009 report recommending routine biennial mammograms only for women aged 50-74. The American Cancer Society disagreed and reiterated their existing recommendations for yearly mammograms starting at age 40.

Given these conflicting recommendations, women everywhere were confused. This article examines some of the key issues.

Why no screening for women under 50?

The Task Force acknowledged that mammograms reduce breast cancer deaths for women in their 40s at the same rate as for older women. But because younger women have denser breast tissue that can hide cancers on mammograms or increase the number of additional tests and benign biopsies, they felt that not enough lives would be saved to justify the added cost of screening women under 50.

The surprising reality is that more women in their 40s (over 33,000) get breast cancer than any other decade of life and mammographic screening would save the lives of 3-4,000 of them. Moreover, while they account for 16% of all breast cancers, they suffer disproportionately with 30% of the years of life lost to it. Losing a woman to breast cancer is tragic at any age, but is even more so in her 40s when so much of childrearing and family life revolve around her.

Although women in their 40s do get more biopsies for shadows that turn out to be benign, is that enough reason for them to avoid mammograms? In my mind, the consequences of not detecting a potentially curable cancer far outweigh the disadvantages of additional tests and biopsies.

Why every other year for women aged 50-74?

The Task Force found that most (but not all) of the benefits of mammography could be achieved at half the cost by cutting the frequency of mammographic screening in half.

Despite the fact that yearly mammograms were better, they recommended biennial mammograms for economic reasons.

What about women over 74?

The Task Force had insufficient data to make any recommendations for older women. The value of mammography for this group really depends on each individual's health status. A frail 75-year-old may be harmed more by the treatment for cancer than by the cancer itself, while cancer treatment for a robust 85-year-old may enable her to enjoy many more years of quality life. So, it does not make sense to have an arbitrary upper age limit for routine mammograms.

We all know mammography is not a perfect test. But it's still the best test available for early detection of breast cancer. Until a better test comes along, it's the one I will continue recommending to all my patients: Yearly mammograms starting at age 40 or earlier if there is a strong family history of premenopausal breast cancer.



Dr. Thomas S. Chang

“THE SURPRISING REALITY IS THAT MORE WOMEN IN THEIR 40S (OVER 33,000) GET BREAST CANCER THAN ANY OTHER DECADE OF LIFE AND MAMMOGRAPHIC SCREENING WOULD SAVE THE LIVES OF 3-4,000 OF THEM.”



Dr. Thomas S. Chang is one of four specialized radiologists at **Weinstein Imaging Associates**, with offices in Shadyside (412-441-1161), North Hills (412-630-2649), and South Hills (412-440-6999). For more information, visit weinsteinimaging.com.