

NHS breast screening



What is the aim of this leaflet?

This leaflet tells you about screening for breast cancer. It aims to help you choose whether or not you take part in the NHS Breast Screening Programme.

What is breast screening in the NHS?

- Breast screening uses X-rays to look for breast cancers when they are too small to be seen or felt.
- The X-rays are called mammograms.
- Breast cancer is the most common cancer in women and it is more likely as you get older. Breast screening reduces deaths from breast cancer.

Who is offered breast screening and how often?

We currently invite all women between 50 and 70 years old for breast screening. We offer breast screening every three years and you should get your first invitation before your 53rd birthday. We do not send you an invitation if you are over 70 but you are still welcome to come for screening every three years. Just phone your local screening unit and ask for an appointment.

We have started to extend our programme to invite women in their late 40s and up to 73 years.

Whether or not you go for breast screening, you should speak to your GP straightaway if you are worried about a breast problem.

What are the benefits of breast screening?

- Regular screening prevents deaths from breast cancer.
- Screening can find cancer early, before you know it's there. The earlier breast cancer is found, the better your chance of surviving it.
- If a breast cancer is found early, you are less likely to have a mastectomy (your breast removed) or chemotherapy.

Does breast screening find every cancer?

No. Some cancers don't show up on a mammogram and sometimes a cancer isn't spotted. This can happen no matter how skilled the people reading the mammograms are.

Does screening prevent breast cancer?

No. Screening only finds cancer if it is already there, but it can find cancers at an early stage.

What are the downsides of being screened?

- Having a mammogram means your breasts are exposed to a small amount of radiation.

- Sometimes a mammogram will look normal, even if a cancer is there. This is called a false negative result. You should remain *breast aware* (see page 8).
- Sometimes a mammogram will not look normal and you will be recalled for more tests, but cancer is not there. This is called a false positive result.
- Screening can find cancers which are treated but which may not otherwise have been found during your lifetime.
- If you go for screening you may be anxious or worried. This usually only lasts for a short time.

Where do I go for breast screening?

Depending on where you live, breast screening usually happens at a local clinic, hospital or mobile screening unit. Your invitation will tell you where to go. If you need help (for example, if you are a wheelchair user) or your appointment isn't convenient, please phone the screening unit.

What happens during breast screening?

Breast screening is carried out by female staff only. You will only be asked to undress from the waist up. Please don't use talcum powder when you go for a screening.

The woman who takes your mammograms will ask you a few questions and will explain what will happen. She will place one breast at a time between two special plates on the mammogram machine and take two pictures of each breast. Your breast needs to be pressed firmly between the plates for a few seconds so that clear mammograms can be taken.

A mammogram takes a few minutes. Your breast screening visit should take about half an hour altogether.

Does having a mammogram hurt?

Most women find having a mammogram uncomfortable. Some women find it painful, but only for a few seconds. Very few women find the pain lasts longer than this.

When do I get the results?

Your results letter will be sent to your home address within two weeks. Your GP will also be told your results.

What mammogram results might I get?

Most women get a normal screening result (their mammogram shows no sign of cancer). However, this doesn't mean you can't get breast cancer, so you should still be *breast aware* (see page 8).

Around one in 20 women are called back because their mammograms show that more tests are needed. This happens more often for women having their first mammograms. This is normally because we do not have other mammograms to compare with. Something that looks unusual on your first mammograms may be completely normal for you.

We may do further tests, including more mammograms, an ultrasound scan or a needle biopsy. A needle biopsy is when we take a small sample of tissue (we may use a local anaesthetic to do this). We do these tests to show whether or not you have breast cancer.

What if I am told I have breast cancer?

You will be cared for by a specialist breast cancer team. They will talk to you about your diagnosis, the support you can get and your treatment options. Most, but not all, cancers found at breast screening can be successfully treated.

What happens to my mammograms after screening?

- We will keep your mammograms for at least eight years.
- We are starting to use digital mammography. We look at mammograms on a computer screen and save them as a computer file.
- We regularly review our screening records to make sure we offer you a good service. Staff in other parts of the health service may need to see your records for this.
- Our screening programme regularly audits (checks) screening results and follow ups. If you want to know the results of these audits, please contact your screening unit.
- If you need more information about NHS record-keeping, you can phone NHS Direct on **0845 4647**.



Be breast aware

You can develop breast cancer at any time. This includes the time in between breast screening appointments. Being breast aware is about getting to know your own body so you can spot any breast changes early. The most important things you need to know about breast awareness is what is normal for you and to tell your GP about any changes as soon as you spot them.

Changes in your breasts may be harmless, but you should get them checked straight away. Things you need to look out for are:

- any lumps, thickening or bumpy areas;
- changes in appearance, like puckered or dimpled skin;
- discomfort or pain; and
- nipple discharge, a rash, red areas that won't heal, or a change in your nipple position (pointing differently or pulled in).

If you notice any changes in your breasts that are not normal for you, please speak to your GP straight away.

Some statistics you might find helpful

Here are some statistics for women of screening age in the UK. They come from data from the NHS Breast Screening Programme in England and cancer registries. The numbers are current *best estimates* but may change over time.

- Breast cancer is the most common cancer in women. There are around 46,000 cases a year in the UK. Eight out of 10 breast cancers are found in women aged 50 and over.
- About 12,000 women die of breast cancer each year in the UK.
- For every 14,000 women screened regularly for 10 years, one woman may develop breast cancer she will die from because of the radiation from the mammograms.
- About eight out of 1,000 women screened will be found to have breast cancer.



Of these, two will be told they have an early form of cancer called ductal carcinoma in situ (DCIS). We don't know which cases of DCIS will become harmful so we offer these women treatment.

- If cancer is found by screening you will be offered treatment. Most women will be offered a combination of different treatments.
 - You may be offered surgery. Where cancer is found by screening, about seven out of 10 women will have a lumpectomy (removal of the affected tissue) with radiotherapy. About three out of 10 women will have a mastectomy (have a breast removed) and be offered breast reconstruction.
 - You may be offered chemotherapy. About two out of 10 women with breast cancer found by screening have chemotherapy.
 - For every 400 women screened regularly for 10 years, one less will die from breast cancer. This means that around 1,400 women are prevented from dying from breast cancer each year in England.

More information and support

If you have any questions you can:

- speak to your GP
- contact your local screening unit
- visit the NHS Cancer Screening Programmes website at **www.cancerscreening.nhs.uk**
- contact NHS Choices by going to **www.nhs.uk**
- contact NHS Direct by phoning **0845 4647**
- download the NHS Be Breast Aware leaflet at **www.cancerscreening.nhs.uk/breastscreen/publications/be-breast-aware.html**
- contact Health Talk Online at **www.healthtalkonline.org**
- contact Cancer Research UK by phoning **0808 800 4040** or by going to **info.cancerresearchuk.org**
- contact Breakthrough Breast Cancer by phoning **08080 100 200** or by going to **breakthrough.org.uk**
- contact Breast Cancer Care by phoning **0808 800 6000** or by going to **www.breastcancercare.org.uk**.



Published by the Department of Health in association with the NHS Cancer Screening Programmes. Written by the Cancer Research UK Primary Care Education Research Group.



© Crown copyright 2011

403722 5p 500k Jan12 (HHC) (408649)

Produced by COI for the Department of Health

Last updated February 2011

The text of this document may be reproduced without formal permission or charge for personal or inhouse use.

If you require further copies of this publication visit www.orderline.dh.gov.uk and quote *403722/Breast Screening* or contact:

DH Publications Orderline

Tel: 0300 123 1002

Minicom: 0300 123 1003

(8am to 6pm, Monday to Friday)

403722/Breast Screening can also be made available on request in Braille, audio and large print.

Language versions are available at:

www.cancerscreening.nhs.uk/breastscreen/publications/ia-02.html

www.cancerscreening.nhs.uk