

BREAST CANCER SCREENING

Can We Make Sense of the Current Debate? (Probably not)

By Susan Cafferty

Parish Care Director

At the end of the Christmas season, I often tell myself “well, the holidays are over, it’s time to get back into the normal routine.” Among my routine duties for January are my H1N1 vaccination and my mammogram. Ever since I hit 40, the annual breast cancer screen has been a routine. But then this past November, the US Preventative Services Task Force, an agency of the federal government, listed new recommendations for breast cancer screening. The result was a big controversy. Statisticians try to explain why the recommendations were changed, and survivors of breast cancer tell emotional stories. This is the latest phase of an argument that has been going on for years, but it leaves many of us wondering “what are we supposed to do now?”

Here is a summary table that shows what has changed in the USPSTF recommendation for breast cancer screening:

Group	Previous Recommendation	New Recommendation
Women age 40-49	Mammogram every 1-2 years; monthly self-examination	No routine mammogram; no self-examination
Women age 50-74	Mammogram every year; monthly self-examination	Mammogram every 2 years; no self-examination
Women over age 74	Mammogram every year; monthly self-examination	No routine mammogram; no self-examination

When you look at this table, keep in mind that these recommendations do not apply if you are known to be at high risk for breast cancer (such as, if you have had breast cancer before, or if you have a strong family history of this illness). Also, remember that these are recommendations only. In the end, you and your doctor should be working together to decide what’s right for you. But the bottom line of these recommendations is that we don’t need routine mammograms until we are 50, then we need them every 2 years until age 74, and breast self exams are not really helpful.

The controversy has come from two groups. First, not all medical organizations agree with the new recommendations. The American Cancer Society, the American College of Radiology, the National Cancer Institute and the American College of Obstetricians and Gynecologists are all staying with the older guidelines. The other groups that are in disagreement are advocacy groups such as the Susan G. Komen Foundation, Breast Cancer Awareness Group, and others.

Why did the USPSTF suggest these changes? Breast cancer risk is low for women age 40-49. The statistics indicate that 90% of abnormal mammogram results for this age group are false positives (that is, the test result is abnormal, but no cancer is present). Therefore, many women have the stress of coping with an abnormal result and a biopsy, only to find that they do not have cancer. The estimates are that 2000 women need to be screened regularly for a decade in order to prevent one death from breast cancer. Also, 4-15 of these 2000 women will be “overdiagnosed” and will receive surgery and radiation for breast cancer that they do not need. Clearly, from a public health point of view, the government’s position makes perfect sense.

BUT on the other hand, the American Cancer Society states that the number of women under 50 who have died from breast cancer has dropped by 3.2% each year. And each one of us thinks to herself “what if I am the one in 2000?”

The argument for women over age 74 is that early detection of breast cancer may not make a difference in prolonging life for older women, and for small numbers of women; it leads to breast biopsies and cancer treatments that are not needed.

For now, insurance companies will probably continue to cover the cost of mammograms using the older guidelines. It appears that most physician groups are not going to switch to the new guidelines immediately. Each one of us needs to discuss these recommendations with her doctor, and evaluate carefully. As for myself, I look at all of these numbers and think of the old phrase "there are lies, _____ lies, and statistics." Until there is a better consensus on this issue, I think I'll stay with the routine.