Breast Screening for Women with a Family History of Breast Cancer
What is the purpose of screening?
The purpose of breast screening is to detect breast cancer as early as possible by picking up changes to the breast that often cannot be seen or felt. In the UK, around one in every 8 women will develop breast cancer at some point in their lifetime. Women with a family history of the disease have a higher risk. Early diagnosis of breast cancer offers the best chance of a successful recovery.

How does screening work?
X-ray pictures called mammograms are taken of the breast. Usually, two views of each breast are taken at every screening appointment. Sometimes more views will be required, for example due to a technical problem, or to view a part of the breast more clearly. Women having a mammogram are asked to undress to the waist, so wearing a separate top rather than a dress may be preferable. The actual X-ray only takes a few minutes and the level of radiation is very low.

Who can have screening?
The NHS Breast Screening Programme provides free breast screening every three years to around one-and-a-half million women in the UK each year. Women aged between 50 and 70 are now routinely invited, and a national pilot study is underway to extend the invitation to women between 47 and 73 years. Screening from 40-49 years is available to women with an increased risk due to their family history of breast cancer.

If you receive an invitation from Avon or Wiltshire NHS Breast Screening Programme, you will not need to attend if you are part of our family history screening programme and are advised to let them know this.

Why am I being offered screening before I am 50?
For younger women who have an increased risk of developing breast cancer on account of their family history, the experts in the UK currently think that the benefits of screening are likely to outweigh the harm. Evidence from some studies (such as the FH02 study) is starting to emerge that it may be effective but more time is needed to see if this improves survival.
How reliable is screening?
Mammography is currently the best way of detecting breast cancer early.

However, like other screening tests it is not perfect:

- Some cancers are very difficult to see on the X-ray
- Some cancers, even though they are there, cannot be seen on the X-ray at all
- The person reading the X-ray may miss the cancer (this will happen occasionally, no matter how experienced the reader is).

In some cases where a women, or a close relative has had genetic testing which shows a gene fault such as BRCA1 or BRCA2 mutation, screening with MRI scanning may be offered in addition.

Does screening hurt?
Each breast needs to be held firmly in position and compressed as the X-ray is taken, in order to obtain a clear picture. Some women describe a mammogram as uncomfortable, while others describe it as painful. Any discomfort only lasts for a brief period of time.

At what age does screening start for women with a family history?
In women with a family history, screening usually starts at age 40 as advised by national screening guidelines (NICE CG164 Updated March 2017).

In some cases where a women, or a close relative has had genetic testing which shows a gene fault such as BRCA1 or BRCA2 mutation, screening with MRI scanning may be offered from the age of 30yrs

How often would I have a mammogram?
Screening is currently recommended every year for younger women with a family history. This is because breast cancer in younger women may appear more quickly than in older women.

How would I get my results?
When you have had the mammogram, a member of the screening team will tell you how and approximately when you will get your result.
What does it mean if I am called back for more tests?

Some women (about 1 in every 20 who goes for screening) are asked to come back for a further appointment because the appearance of the X-ray is not completely normal. It may be necessary for you to have further mammograms, or other investigations such as ultrasound or a biopsy. In the majority of cases, these further tests will show there is nothing to worry about.

What should I do if I notice any breast symptoms?

As breast cancer can occur between screens it is important you see your doctor immediately if you notice any unusual changes in your breasts, even if you have just had a normal screen or are due for a screen in a month or so.

So should I go for screening or not?

To help you decide whether or not you want to attend for breast screening, the main advantages and disadvantages of regular mammography in women with a family history of breast cancer are outlined below:

- Screening is currently believed to provide the best chance of detecting cancers at an early stage when treatment can offer the best chance of a successful recovery.

- Around seventy per cent of the cancers found at screening are still small enough to be removed from the breast. This means that the whole breast does not have to be removed.

- Screening will not detect all breast cancers, so some cancers will be missed at screening and some women may be falsely reassured.

- Screening will not prevent breast cancer from developing.

- Approximately one in every 20 women who go for screening will be called back for further investigations. Most of the women who have further tests will turn out not to have cancer. However, women who are called back often find this a very anxious time.

- Each mammogram gives a small dose of radiation. However, despite this it is possible that regular mammography in younger women could actually promote the development of a breast cancer. The experts believe that the risk of the x-rays causing cancer is much less likely than you developing cancer naturally. For women having mammograms annually for 5 years from 35 to 39 years of age, 1 woman in 4700 may develop cancer due to the radiation dose. This very small potential risk is less for women in their forties and will be outweighed...
by the benefits of early detection in women with a significant family history of breast cancer.

- Many women find mammography uncomfortable or painful.

**What if I may be/am pregnant or have recently given birth?**

We will not offer you a mammogram until three months after delivery or after completing breast feeding. This is because it is harder for doctors to interpret the results before this, due to the influence of hormonal changes on the breast tissue.

**What if I do not want regular mammography?**

You do not have to choose screening now. You will be invited automatically for screening after the age of 50, or in some cases from 47 years by the NHS Breast Screening Programme. If you change your mind before then and decide that you do wish to have screening please contact the Breast Clinic to let us know.

**Further Information**

Information on the FH02 Trial is at


**Further Information and contact details**

If you have any questions or need to contact us, please call

**Alison Smith** or **Katherine Knight** (Senior Radiographers)

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