Breast Cancer Screening: Recommendations for women who have no breast symptoms

Breast cancer is the second most common form of cancer in women and affects 1 in 8 adult females. Although we can’t prevent breast cancer, we can treat it more effectively if it is caught early. The best way to detect breast cancer early is by screening. Screening means being tested regularly so the cancer can be caught when it is still small and is easiest to treat.

There are three ways of screening for breast cancer. They work best when used together:

- **Mammography**: X-ray of the breast
- **Clinical breast examination**: Breast examination by your doctor or nurse practitioner
- **Breast self-examination**: Checking your own breasts for lumps or changes to the tissue (See tips on page 2.)

We organize our screening guidelines by age and level of risk. Factors that can increase your risk of breast cancer are shown in the high risk screening guidelines on the right. If you have any of these, talk to your doctor or other health care professional.

If you have a new lump, nipple discharge, redness, or another change in your breasts, call us immediately. Don’t wait to be screened. Most lumps or changes to the breasts are not cancer, but you do need to have them checked as soon as possible.

Average risk screening guidelines

Most women are average risk. That means not having high risk factors and following the guidelines below:

**Mammography**
- Before age 40, there are no specific recommendations for screening mammograms since breast cancer is very rare at this age.
- We recommend that all women ages 40-74 have a mammogram every 1-2 years.
- If you are over age 74, talk with your doctor about when to get screened.

**Clinical Breast Exams (CBE)**

You may want to request a clinical breast exam every 1-2 years. Talk to your doctor or other health care professional about CBE during your regular check-ups.

**Breast Self-Exam (BSE)**

We recommend that you check your breasts every month. This helps you to know your own body and to notice if there are any changes in your breast tissue. If you are menstruating, the week after your period is the best time for BSE.

High-risk screening guidelines

**High risk** refers to a woman with one or more of these risk factors:
- her mother, sister, or daughter developed breast cancer before the age of 40
- two or more close relatives (mother, sister, or daughter) had breast cancer, one or more occurring before the age of 50
- her mother, sister, or daughter had ovarian cancer
- she has had chest radiation therapy

**Mammography**

If you have any of these risk factors, you should talk to your health care provider about when to begin getting mammograms, no matter what your age.

**Clinical Breast Exam**

If you have any of the risk factors, we recommend that you have a clinical breast exam by a doctor or other health care professional every 1-2 years.

**Breast self-exam (BSE)**

Check your breasts at the same time each month. If you are menstruating, a good time is a few days after your period when your breasts are not swollen or tender. Women who do not menstruate can examine their breasts the first day of each month.
Most women’s breast tissue has some lumps or thickening. When in doubt about a particular lump, check the other breast. If you find a similar lump in the same area on the other breast, both breasts are probably normal. Be on the lookout for changes, thickening, or new lumps.

If you are unsure or have any areas of concern, contact your medical professional by phone or email. The important thing is to learn what is normal for you and to report changes to your doctor.

How to do a breast self-exam

The breast self-exam takes place in two phases.

Phase 1: In front of the mirror

Look at your breasts in a mirror. It is normal for one breast to be slightly larger than the other. Learn what is normal for you.

Look at your breasts in three positions:

• Stand with your arms at your sides

• With your arms raised overhead

• With your hands on your hips

In each position, look for changes in the contour and shape of your breasts, the color and texture of the skin and nipple, and any discharge from the nipples.

Phase 2: Lying down

To examine your left breast, place a pillow or folded towel under your left shoulder. Use your right hand to examine your left breast. If your breasts are large, lie on your right side and turn your left shoulder back flat so that the breast tissue spreads more evenly over your chest wall. Use the pads of your middle three fingers to examine your breast. Move the fingers in small, dime-sized circles. Don’t lift your fingers away from the skin. Use light, medium, and deep pressure in each spot to feel the full thickness of the breast tissue. You are feeling for lumps, thickening, or changes of any kind.

Examine your entire breast using a vertical strip pattern (see illustration).

Pay attention to all tissue from the collarbone to the armpit and from the bra line to the breastbone. Start in the armpit and work down to the bottom of the bra line. Move one finger width toward the middle and work up to the collarbone. Repeat until you have covered all the breast tissue.

Move the pillow or towel to the other shoulder and repeat the steps for the other breast.

If you examine your breasts monthly, you will learn what is normal for you and quickly recognize if something changes. The breast self-exam takes some practice. You can learn more about breast self-exams at your Kaiser Permanente Health Education Center.

When to call Kaiser Permanente

If you find any unusual lumps, thickening, discharge from the nipple, or changes of any kind, call or email your doctor immediately. Remember, most lumps are not cancer, but you will need your doctor to make a diagnosis.

Other resources

• Visit your doctor’s Home Page at kp.org/mydoctor. Also, you can search the Health Encyclopedia at kp.org/health for more in-depth information on this and many other topics.

• Contact your Kaiser Permanente Health Education Center or Department for health information, programs, and other resources.

This information is not intended to diagnose or to take the place of medical advice or care you receive from your physician or other health care professional. If you have persistent health problems, or if you have additional questions, please consult with your doctor.