



LET'S END THE CONFUSION

A new campaign from the Society of Breast Imaging seeks to set the record straight on mammography screening.

IN THE LAST FIVE YEARS, we at the Society of Breast Imaging (SBI) have been fighting an uphill battle to carry out our mission: "to save lives through early detection, quality education, and trusted information provided to patients, physicians, and organizations worldwide." Despite the obvious advantages of mammography as a key component of health care for women, many patients (and their referring physicians) are frustrated and confused by widespread variance in guidelines on when and how frequently women should get mammograms.

And we don't blame women for being confused. On a regular basis, they are receiving mixed messages from respectable experts and organizations. In addition,

Many patients (and their referring physicians) are frustrated and confused by widespread variance in guidelines on when and how frequently women should get mammograms.

the media do not always relay the information on mammography screening in a clear, understandable manner, choosing instead to stoke controversy and further muddy the waters. The two biggest points of contention are when to begin screening and how often to screen.

The confusion began to heat up in 2009, when the U.S. Preventive Services Task Force recommended that women ages 40 to 49 not receive screenings and, furthermore, that women ages 50 to 74 be screened every other year. This was followed by academic journal articles arguing that annual mammograms lead to overdiagnosis and overtreatment of breast cancer. Regardless of these studies' flaws, the research has received a great deal of media attention. The resulting confusion has undermined women's ability to take control of their health care decisions.

SBI strongly believes it is dangerous to let the confusion surrounding mammography continue. To cut through the noise and set the record straight on mammography, SBI created End the Confusion, a campaign to inform and engage providers, stakeholders, and the public about the benefits of breast cancer screening. End the Confusion arms women with clear and accurate information on mammography screening so they are prepared to make informed decisions in partnership with their health care providers.

On the End the Confusion website (endtheconfusion.org), patients, the media, and health care providers can access a host of resources, including multimedia presentations, fact sheets, and relevant articles. You can help spread the word by sharing the site with your physician colleagues (especially those outside of radiology), technologists and administrators at your practice, your patients, and other members of your network.

Breast cancer remains the second leading cause of deaths among women in the United States.¹ In 2015, according to the National Cancer Institute, 231,840 women will be



What should you tell your patients about mammography screening?

Women look to their physicians to provide appropriate, evidence-based recommendations. Here is a list of talking points to get the conversation started.

- Mammography screening is not perfect. It does not find all cancers and does not find all cancers early enough to cure. But when used by women beginning at the age of 40, screening has been shown to markedly reduce the number of women who die from breast cancer and brings a greater chance that treatment will be successful.
- For every 1,000 women who have a screening mammogram, we see the following:
 - 100 are recalled to get more mammography or ultrasound images.
 - 80 are advised to return for follow-up in 6 months.
 - 20 are recommended for a needle biopsy.
 - 5 are diagnosed with breast cancer.^{1,2}
- Research shows that nearly all women who experienced a false-positive exam still support screening.³
- The decision whether or not to undergo mammography lies with the patient. However, experts on breast cancer believe mammography can detect cancer early, when it's most treatable and can be treated less invasively — which not only saves lives but also helps preserve quality of life.

ENDNOTES

1. Kopans DB. *Breast Imaging*. 3rd Ed. Lippincott Williams and Wilkins; 2006.
2. Rosenberg RD, et al. Performance benchmarks for screening mammography. *Radiology*. 2006 Oct;241(1):55–66.
3. Schwartz LM, et al. Enthusiasm for cancer screening in the United States. *JAMA*. 2004;291(1):71–78. bit.ly/JAMA2004. Accessed Aug. 14, 2015.

diagnosed with the disease and 40,290 will die from it.² The death rate is highest among women who are not screened regularly and present with advanced cancers.³

From my own experience with patients, I have read mammograms that detected cancers early, when treatment is most effective. I have patients who are alive today because they followed the advice of respected organizations like SBI and the ACR when it comes to preventive screening. I have also had to read mammograms of patients who did not have routine screenings and presented with more advanced, harder-to-cure cancers. Ultimately, this is why SBI's Board of Directors launched End the Confusion. It goes back to our mission: we want to save lives through early detection.

We also want to hear from you. If you have questions about End the Confusion, have ideas for resources, or want to get involved, please contact SBI at info@sbi-online.org. In the meantime, visit the website and pass the message along. And, most importantly, continue to discuss breast cancer screening with your patients and provide them with the appropriate recommendations. **B**

By Elizabeth A. Morris, MD, FACC, president of the Society of Breast Imaging, chief of the Breast Imaging Service at Memorial Sloan Kettering, and professor of radiology at Weill Cornell Medical College

ENDNOTES

1. Centers for Disease Control and Prevention. Breast cancer statistics. cdc.gov/cancer/breast/statistics. Accessed Aug. 14, 2015.
2. American Cancer Society. Cancer Facts & Figures 2015. bit.ly/CancerRpt2015. Accessed Aug. 14, 2015.
3. Kopans DB. Beyond randomized, controlled trials: organized mammographic screening substantially reduces breast cancer mortality. *Cancer*. 2002;94:580–581.

©iStock/Saahinw; ©iStock/ZaragonDesign; ©iStock/ScottKyria; ©iStock/DorianGay



DRAWING CONCLUSIONS ABOUT MAMMOGRAPHY SCREENING

Share this whiteboard animation with your patients to end the confusion around when and how often women should get mammography screening. Visit the SBI-created video at bit.ly/SBIWhiteboard.