

# Breast Cancer Screening is a Choice

## Should my patient be screened for breast cancer?

**Being screened for breast cancer is a personal choice.** Discuss the potential benefits and potential harms with your patient to help them make an informed decision that fits with their values and preferences.

To make an informed decision about whether or not to have regular screening mammograms, it can be helpful to think about:

- ✓ How will having a mammogram help my patient?
- ✓ How might having a mammogram harm my patient?
- ✓ If my patient chooses to have mammograms, at what age should they start?

### Considerations...

- **Each year in Manitoba, over 900 women are diagnosed with breast cancer and about 150 will die from the disease. Breast cancer incidence increases with age.**

Age Group	Number of Breast Cancer Cases (2022)
39 years of age and younger	38
40-49	131
50-59	189
60-69	254
70 years of age and older	379

CancerCare Manitoba (2022). Cancer in Manitoba: 2022 Annual Statistical Report.

- **Fewer people die from breast cancer when they have regular screening mammograms.** Cancer screening works best when it is done on a regular basis. A meta-analysis of randomized controlled trials showed an approximately 20% reduction in breast cancer mortality attributed to regular mammography screening in females who were invited to participate in breast cancer screening.<sup>i</sup> The mortality benefit of breast cancer screening increases with age.

Routine screening mammograms for 1000 people over 10 years	Age 40-49	Age 50-59	Age 60-69	Age 70-79
Lives saved (participated in screening)	Up to 1	Up to 2	Up to 2	Up to 3
Lives saved (no screening participation)	0	0	0	0

Canadian Taskforce on Preventive Health Care (2024). Breast Cancer (Update) – Draft Recommendations 2024 Tools & Resources.

- **Having regular screening mammograms may help find cancer early when it is easier to treat.** Regular mammograms can find breast cancer 2 to 3 years before it can be felt by the patient or their healthcare provider. When breast cancer is found early, there may be more treatment options and a better chance of a cure.

<b>Routine screening mammograms for 1000 people over 10 years</b>	<b>Age 40-49</b>	<b>Age 50-59</b>	<b>Age 60-69</b>	<b>Age 70-79</b>
Women diagnosed with breast cancer who participated in screening	19	27	34	37
Women diagnosed with breast cancer who did not participate in screening	17	20	28	39
Additional women diagnosed with breast cancer because of screening	2	7	6	NA

Canadian Taskforce on Preventive Health Care (2024). Breast Cancer (Update) – Draft Recommendations 2024 Tools & Resources.

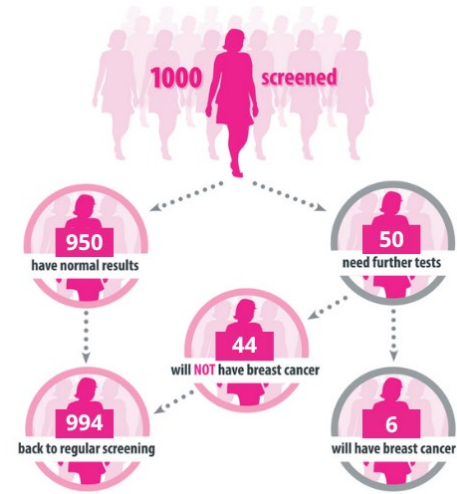
- **The risk of breast cancer increases with age.** Eighty-three percent of breast cancers happen in females age 50 and over. Screening mammograms are not guaranteed to save lives. Not all breast cancers can be cured. Some people will die of breast cancer even if their cancer was found through screening.

<b>Routine screening mammograms for 1000 people over 10 years</b>	<b>Age 40-49</b>	<b>Age 50-59</b>	<b>Age 60-69</b>	<b>Age 70-79</b>
Number of people who will die from breast cancer (participated in screening)	1-2	1-2	2-3	2-5
Number of people who will die from breast cancer (no screening participation)	2	3	4	6

Canadian Taskforce on Preventive Health Care (2024). Breast Cancer (Update) – Draft Recommendations 2024 Tools & Resources.

- **You may experience distress.** Getting screened for breast cancer and participating in follow-up testing can be stressful for people. People often feel anxious going for medical tests. It may help to know ninety-four percent of breast cancer screening results are normal. In those age 45-49, we anticipate there will be more people who have to go for follow-up testing.
- **Mammograms are not perfect.** Sometimes a person will not be referred for more testing when they have cancer, which can delay diagnosis and treatment. Most people who are referred for more testing do not have breast cancer. Of 1000 clients aged 50-74 screened at BreastCheck, 50 will need further testing.

- **If your mammogram result is abnormal, you will be referred for more testing.** Cancer screening only works if your patient attends all follow-up appointments. It is important to know that the patient will be referred for more tests if their screening mammogram result is abnormal. Of 1,000 clients screened at BreastCheck, 50 will need further testing. Of those, 44 will not have breast cancer and will return to regular breast cancer screening mammograms and six will have breast cancer. For those aged 45-49, it is expected that more patients will be referred for follow-up testing. They are less likely to receive a cancer diagnosis.



<b>Routine screening mammograms for 1000 people over 10 years</b>	<b>Age 40-49</b>	<b>Age 50-59*</b>	<b>Age 60-69</b>	<b>Age 70-79</b>
Will have more tests but not be diagnosed with breast cancer (participated in screening)	368	366	257	110
Number of biopsies	55	27	33	15
Will have more tests but not be diagnosed with breast cancer (no participation in screening)	0	0	0	0

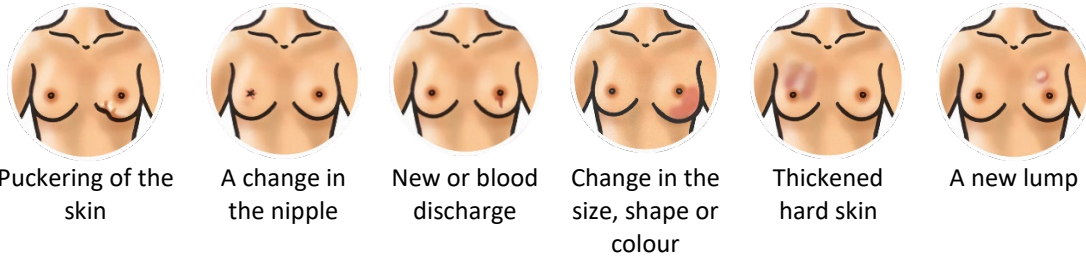
\*Assumes they initiate screening at age 50. If they started screening earlier (e.g. in 40s), it would be 286 people. Canadian Taskforce on Preventive Health Care (2024). Breast Cancer (Update) – Draft Recommendations 2024 Tools & Resources.

- **Some people will die of something else before they would die of breast cancer (overdiagnosis).** For these people, their quality and length of life may decrease by finding breast cancer. There is no way to know which of the people diagnosed with breast cancer would truly be helped by breast cancer screening versus those who will be treated for breast cancer that would not have caused problems.

<b>Routine screening mammograms for 1000 people over 10 years</b>	<b>Age 40-49</b>	<b>Age 50-59</b>	<b>Age 60-69</b>	<b>Age 70-79</b>
Will be treated for breast cancer that would not have caused problems (overdiagnosis) (participated in screening)	2	2	1 to 2	At least 5
Will be treated for breast cancer that would not have caused problems (overdiagnosis) (no participation in screening)	0	0	0	0

Canadian Taskforce on Preventive Health Care (2024). Breast Cancer (Update) – Draft Recommendations 2024 Tools & Resources.

- **Breast cancer can happen in-between mammograms.** It is important for a patient to know how their breasts normally look and feel so they can notice changes between mammogram appointments. Tell your patient to make an appointment with you if they notice any changes or have any new breast signs or symptoms:



**When should I get screened?**

AGE	TELL YOUR PATIENT
<b>39 years of age and under</b>	Regular screening mammograms are not recommended. If you feel you might be at increased risk of breast cancer, let's talk about it.
<b>Age 40-44</b>	Screening mammograms will be an option at the end of 2026. If you feel you might be at increased risk of breast cancer, let's talk about it.
<b>Age 45-49</b>	Some may benefit from a screening mammogram every 2 years at BreastCheck.  Let's talk about the potential benefits and potential harms of screening so you can determine whether to screen. If you decide to screen you can call and book an appointment at BreastCheck.
<b>Age 50-74</b>	Having regular mammograms in this age group has the greatest potential benefit for most people. It is recommended that you get a mammogram every two years. You should call and book an appointment with BreastCheck.
<b>75 or over</b>	You may still benefit from regular mammograms. Let's figure out what is best for you. If you want to be screened for breast cancer, you can call BreastCheck for an appointment.

To make a BreastCheck appointment for a screening mammogram at any of the clinic locations, or to talk to a health educator about the potential benefits and potential harms of getting a mammogram, call 1-855-952-4325. If you decide not to get screened for breast cancer now, you can change your mind in the future.

**[cancercare.mb.ca/breastcheck](https://cancercare.mb.ca/breastcheck)**  
**[screening@cancercare.mb.ca](mailto:screening@cancercare.mb.ca)**  
**1-855-952-4325**

<sup>1</sup> Canadian Partnership Against Cancer (2025, December). *Key statistics on breast cancer screening.*  
<https://www.partnershipagainstcancer.ca/topics/breast-indicators-2018-2021/key-statistics/>