

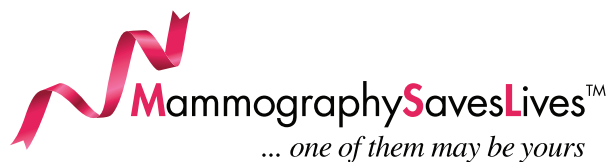
# Breast Density

## Breast cancer screening

The American Cancer Society, American College of Radiology, Society of Breast Imaging and American College of Obstetricians and Gynecologists, among others, recommend that all women have yearly mammograms beginning at age 40. Women at high risk may benefit from starting earlier.

### Resources:

For more information on breast cancer screening, visit [MammographySavesLives.org](http://MammographySavesLives.org) or [RadiologyInfo.org](http://RadiologyInfo.org).



[acr.org](http://acr.org) | 1-800-227-5463 | [t](#) [f](#) [in](#) [You Tube](#)

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**Not sure if you have dense breasts?  
Why does it matter?**

Ask your doctor which breast cancer screening options are right for you.

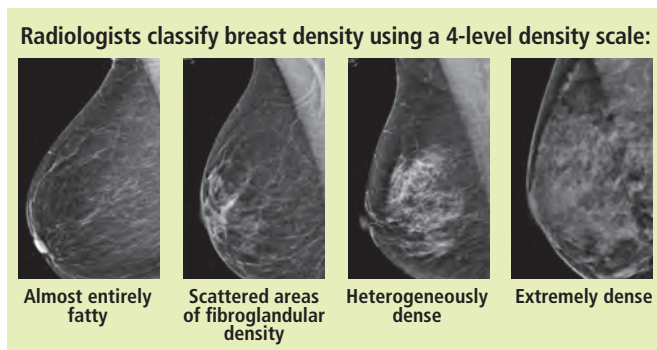


## What is breast density?

Breasts are made up of a mixture of fibrous and glandular tissue and fatty tissue. Your breasts are considered dense if you have a lot of fibrous or glandular tissue but not much fat. Density may decrease with age, but there is little, if any, change in most women.

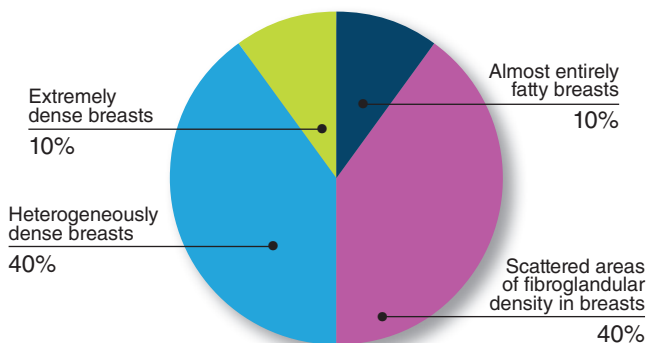
## How do I know if I have dense breasts?

Breast density is determined by the radiologist who reads your mammogram. There are four categories of mammographic density. The radiologist assigns each mammogram to one of the categories. Your doctor should be able to tell you whether you have dense breasts based on where you fall on the density scale. (See scale below.)



### Breast density in the U.S. (See pie chart)

- 10% of women have almost entirely fatty breasts
- 10% have extremely dense breasts
- 80% are classified into one of two middle categories



## Why is breast density important?

Having dense breast tissue may increase your risk of getting breast cancer. Dense breasts also make it more difficult for doctors to spot cancer on mammograms. Dense tissue appears white on a mammogram. Lumps, both benign and cancerous, also appear white. So, mammograms can be less accurate in women with dense breasts.

## If I have dense breasts, do I still need a mammogram?

Yes. A mammogram is the only medical imaging screening test proven to reduce breast cancer deaths. Many cancers are seen on mammograms even if you have dense breast tissue.

## Are there any tests that are better than a mammogram for dense breasts?

In breasts that are dense, cancer can be hard to see on a mammogram. Studies have shown that **ultrasound** and **magnetic resonance imaging (MRI)** can help find breast cancers that can't be seen on a mammogram. However, both MRI and ultrasound, show more findings that are not cancer, which can result in added testing and unnecessary biopsies. Also, the cost of ultrasound and MRI may not be covered by insurance.

## What should I do if I have dense breasts? What if I don't?

If you have dense breasts, please talk to your doctor. Together, you can decide which, if any, additional screening exams are right for you.

If your breasts are not dense, other factors may still place you at increased risk for breast cancer — including a family history of the disease, previous chest radiation treatment for cancer and previous breast biopsies that show you are high risk. Talk to your doctor and discuss your history.

Even if you are at low risk, and have entirely fatty breasts, you should still get an annual mammogram starting at age 40.

## Sample Lay Letter for Negative or Benign Finding(s) (to be used with BI-RADS® 1-2)

**Name of Facility, Address and Phone Number**  
**Name of Patient/ID**  
**Date of Breast Imaging**

Dear Patient:

We are pleased to let you know that the results of your recent [mammogram **or** breast ultrasound **or** breast MRI] shows no sign of breast cancer.

Even though mammograms are the best method we have for early detection, not all cancers are found with mammograms. If you feel a lump or have any other reasons for concern, you should tell your health care provider.

*[Optional, if the woman has dense breasts] The mammogram shows that your breast tissue is dense. Dense breast tissue is very common and is not abnormal. But dense breast tissue can make it harder to find cancer on a mammogram. Also, dense breast tissue may increase your breast cancer risk. This information about the result of your mammogram report is given to you to raise your awareness. Use this report when you talk to your doctor about your own risks for breast cancer, which includes your family history. At that time, ask your doctor if more screening tests might be useful, based on your risk.*

A report of your results was sent to: [referring health care provider].

Your images will become part of your medical record at [facility name]. They will be on file for your ongoing care. If, in the future, you change health care providers or go to a different location for a mammogram, you should tell them where and when this mammogram was done.

## Appendix A – Sample Lay Letters

Thank-you for allowing us to help meet your health care needs.

Sincerely,

Jane Smith, M.D.  
Interpreting Radiologist

### **American Cancer Society Guidelines for Early Breast Cancer Detection in Women without Symptoms**

**Mammogram:** Yearly mammograms are recommended starting at age 40 and continuing for as long as a woman is in good health.

**Clinical breast exam:** a clinical breast exam is recommended every 3 years for women in their 20s and 30s and every year for women 40 and over.

**Breast awareness and breast self-exam:** Women should know how their breasts normally look and feel and report any breast change promptly to their health care provider. Breast self-exam (BSE) is an option for women starting in their 20s.

**Breast MRI:** Some women, because of their family history, a genetic tendency, or certain other factors, should be screened with MRI in addition to mammography. (The number of women who fall into this category is small: less than 2% of all the women in the US.) Talk with your doctor about your history and whether you should have additional tests at an earlier age.