

Breast Screening Life Plan

Follow this guide to help you know what screening steps to take throughout your lifetime.

Women 20 to 39

- Know what looks and feels normal for you.
- Report any unusual changes in your breasts to your healthcare provider.
- See your healthcare provider regularly for a health checkup.

Women 40 to 44

- Speak with your healthcare provider about your risk of breast cancer and the risks and benefits of screening mammograms.
- Ask your healthcare provider about having a breast exam during your regular health checkup.
- Check your breasts regularly for unusual changes

Women 45 to 74

- Have a screening mammogram every 2 years or as often as you and your healthcare provider have decided is best for you.
- Ask your healthcare provider about having a breast exam during your regular health checkup.
- Check your breasts regularly for unusual changes.

Women 75+

- Talk to your healthcare provider about the benefits of screening mammograms. You may still benefit from regular screening mammograms.
- Ask your healthcare provider about having a breast exam during your regular health checkup.
- Check your breasts regularly for unusual changes.

Knowing what looks and feels normal for you

The breast changes listed below do not always mean you have breast cancer. If you notice these changes, see your healthcare provider right away:

- a lump in your breast or armpit
- nipple turned inward, if it isn't usually
- crusting, bleeding or a rash on your nipple
- unusual fluid coming from your nipple
- dimpling or thickening of skin in one area of your breast

Remember

- 80% of women with breast cancer have no family history.
- Living a healthy lifestyle can reduce your chance of getting breast cancer.
- Treatment may work better when breast cancer is found early.
- Screening mammograms are the best way to find breast cancer early. If you are eligible, book an appointment now!

About the Alberta Breast Cancer Screening Program

The Alberta Breast Cancer Screening Program (ABCSP) is part of Alberta Health Services (AHS) and works together with the Alberta Society of Radiologists. The ABCSP mails your screening mammogram results to you via the radiology clinic.

To get letters from the ABCSP, your name and address must be up to date with Alberta Health. If you need to update your information, call 310-0000 (toll free) then dial 780-427-1432.

Cancer Screening

Screening is the best way to find breast cancer early, when treatment has the best chance of working. Breast, cervical, and colorectal cancer screening saves lives.

For more information, please contact the AHS Cancer Screening Programs

- Call 1-866-727-3926
- Fax 1-888-944-3388
- Visit screeningforlife.ca

Breast003
April 2022



Alberta Breast Cancer
Screening Program



MIX
Paper from
responsible sources
FSC® C019002

BREAST SCREENING

The Basics of Breast Cancer



SCREENING FOR LIFE.CA

What is breast cancer?

Breast cancer begins when abnormal cells grow in the breast. These cells may form lumps called tumours. Some tumours are cancerous (malignant) and some are not cancerous (benign). A benign tumour does not spread to other parts of the body and isn't usually life-threatening. A malignant tumour can spread to other parts of the body and can be life-threatening.

How common is breast cancer?

Breast cancer is the most common cancer found in women. It's the second leading cause of female cancer deaths. About 1 in 7 Alberta women will have breast cancer in their lifetime. Screening and better treatments have lowered breast cancer deaths in Alberta over the last few decades.

Why is it important to find breast cancer early?

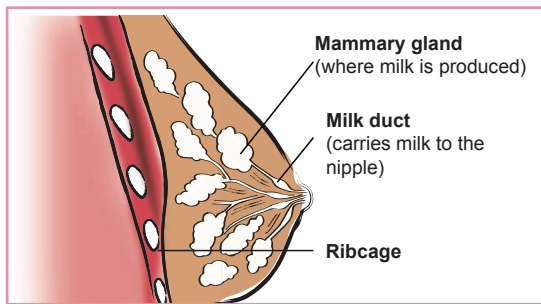
When cancer is found early, it's usually very small and has not spread from where it started. Treatment for cancer that's found early may work better than for cancer that has already spread.

What are the common types of breast cancer?

There are 2 common types of breast cancer, ductal carcinoma and lobular carcinoma.

Most breast cancer starts in the milk ducts (ductal carcinoma) although some start in the mammary glands (lobular carcinoma). Cancer in other parts of the breast is less common.

Cancer that is "in situ" has not spread into the surrounding breast tissue. Cancer that has spread into the surrounding breast tissue is called "invasive".



What are the risk factors for breast cancer?

Not all people have the same risk (chance) of getting breast cancer. Certain factors may change how likely a person is to get breast cancer. Some risk factors can't be changed but others related to lifestyle may be changed.

Risk factors you can't change

Sex: Women are about 100 times more likely to develop breast cancer than men.

Age: The risk of breast cancer increases with age. About 75% of women who have breast cancer in Alberta are 50 years or older.

Family History: If a woman has a mother, sister, or daughter who had breast cancer, her risk of getting breast cancer increases. But, 8 out of 10 (80%) of women who get breast cancer don't have any family history.

Genetic Changes: Changes in some genes, such as the breast cancer gene 1 (BRCA1) and the breast cancer gene 2 (BRCA2) can increase a woman's risk of breast cancer. These changes are thought to be passed from parents to their children. These genetic changes are very uncommon and make up less than 10% of all breast cancer cases.

Personal History of Breast Cancer: Women who had cancer in one breast have a higher risk of getting a new cancer in the other breast.

Breast Density: Women with dense breasts have a slightly higher risk of getting breast cancer. Dense breasts can also make it harder to see a breast cancer tumour on a mammogram.

Menstrual History: Women who started menstruating (having their periods) before age 12 or start menopause after age 55 have a higher risk of breast cancer.

Radiation Therapy to the Chest: Women who had radiation to the chest to treat a different cancer have a higher risk of breast cancer. The younger a woman was when she had radiation treatment, the higher her risk of breast cancer later in life.

Risk factors related to lifestyle

Reproductive History: Women who never had any children or who had their first child after age 30 have a higher risk (chance) of getting breast cancer.

Long-term Hormone Replacement Therapy: Women who use combination estrogen plus progestin menopausal hormone replacement therapy (HRT) for more than 5 years have a higher risk of getting breast cancer. Within about 2 years of stopping combination estrogen-progestin therapy, a woman's risk of breast cancer lowers to that of the general population.

Body Weight: The risk of getting breast cancer after menopause is higher in women who are overweight or obese.

Physical Activity: Not being physically active throughout life increases a woman's risk of breast cancer.

Alcohol: The more alcohol a woman drinks, the greater her risk of breast cancer.

Tobacco: Women who smoke have a higher risk of breast cancer. Second-hand smoke also increases breast cancer risk for women who have not yet been through menopause.

What can you do to reduce your risk of developing breast cancer?

- Be physically active
- Stay at a healthy weight
- Limit the amount of alcohol you drink
- Don't smoke
- Speak with your healthcare provider about limiting the long-term use of combined estrogen-progestin HRT

	YES	NO
Be physically active	✓	
Stay at a healthy weight	✓	
Limit the amount of alcohol you drink	✓	
Don't smoke	✓	
Speak with your healthcare provider about limiting the long-term use of combined estrogen-progestin HRT	✓	

Follow the Breast Screening Life Plan (see reverse).