

Breast Screening for Métis People

What is breast cancer?

Breast cancer is a cancer that is found in the breast. It starts when abnormal cells grow in an uncontrolled way in the breast. Breast cancer is the most common cancer among Métis women in Canada.¹

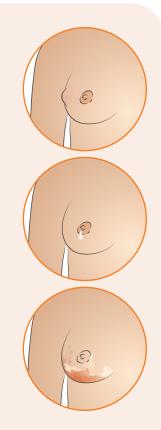
What is cancer screening?

Cancer screening is testing done on people who have a chance of getting cancer but have no symptoms and generally feel fine.

Contact your health care provider if you notice any changes in your breasts, such as a lump or redness that does not go away, or changes to your nipple.

Also, the effects of pregnancy or breastfeeding can hide the symptoms of breast cancer or cause them to be overlooked, so it is important to be aware of them.

Changes to the breast are not always caused by cancer, but they should be checked right away.



The Ontario Breast Screening Program (OBSP) is a province-wide organized screening program that aims to reduce breast cancer deaths through regular screening for women, Two-Spirit people, trans people and nonbinary people ages 40 to 74. The OBSP screens two different groups of people: those at average risk and those at high risk.

Who should get screened for breast cancer?

Average risk ages 40 to 74:

- Most people who qualify for the OBSP can get a mammogram every 2 years.
- People ages 40 to 49 are encouraged to make an informed decision about whether screening is right for them. Generally, people in this age group have a lower chance of getting breast cancer than people ages 50 to 74. People can talk to their health care provider or call Health811 for help deciding whether to get screened.

High risk ages 30 to 69:

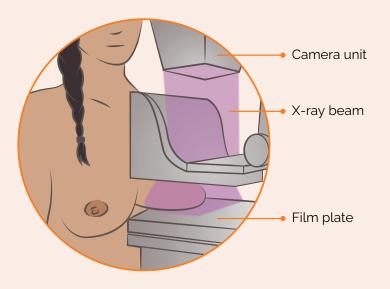
• People may qualify for the High Risk OBSP if they are age 30 to 69 and have certain gene changes, a higher chance of getting breast cancer based on their family or personal health history or had radiation therapy to the chest. People in this group are screened once a year with mammogram and magnetic resonance imaging (MRI).



What happens during a mammogram?

The most common breast cancer screening test is a mammogram. Mammograms are safe and use a low dose x-ray to take images of the breasts.

A health care provider will place one breast at a time on the mammogram machine. A plastic plate will move down slowly to press and hold the breast tissue in place, while images of the breast tissue are taken. There will be some pressure for a few seconds, which does not harm the tissue. Mammogram appointments usually take about 15 minutes.



Potential benefits of breast cancer screening

Getting screened for breast cancer regularly with a mammogram (a type of X-ray) can find cancer early, when treatment has a better chance of working and can be less intensive or invasive (easier to handle). Screening regularly also lowers the chance of dying from breast cancer.

Potential harms of breast cancer screening

You may get an abnormal result when you do not have cancer, which can lead to unneeded testing, like a biopsy (taking a small sample of tissue). A mammogram may miss a cancer, which could lead to delayed treatment. A mammogram may also find a cancer that would not otherwise cause health problems, which may lead to unneeded surgery or treatment.

What happens after my mammogram appointment?

If you have a normal result, you will receive a letter in the mail. This letter will also let you know when you should get screened again. If you have an abnormal result, the OBSP site will tell your health care provider and may also help make an appointment for you to get more testing. If you do not have a health care provider, you will be connected to one who can help with your next steps. Nine out of ten people who have an abnormal result will not have breast cancer².

How to make a mammogram appointment

Contact an OBSP location to get a mammogram. To find a location, call **1-800-668-9304** or visit <u>ontariohealth.ca/breastscreeninglocations</u>.

Mammograms are safe, free and you can get one without an order from a health care provider.

For more information on breast cancer screening, please visit: ontariohealth.ca/breast



1 Mazereeuw MV, Withrow DR, Nishri ED, Tjepkema M, Vides E, Marrett LD. Cancer incidence and survival among Métis adults in Canada: results from the Canadian census follow-up cohort (1992–2009). CMAJ Can Med Assoc J [Internet]. 2018 Mar 19 [cited 2025 Jan 24];190(11):E320–6. Available from: ncbi.nlm.nih.gov/pmc/articles/PMC5860893/

2 Ho, T. Q. H., Bissell, M. C., Kerlikowske, K., Hubbard, R. A., Sprague, B. L., Lee, C. I., ... & Miglioretti, D. L. (2022). Cumulative probability of false-positive results after 10 years of screening with digital breast tomosynthesis vs digital mammography. JAMA network open, 5(3), e222440-e222440

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