

Breast Screening



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.

Average risk ages 40 to 74

- Most people in this age group 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, as occurrence varies by Indigenous identity. 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).

Potential benefits

Screening can find breast cancer early, which may mean that:

- Treatment has a better chance of working
- Fewer treatments may be needed and the treatments may be less invasive or intensive (easier to handle)
- The chance of dying from breast cancer is lower

Potential harms

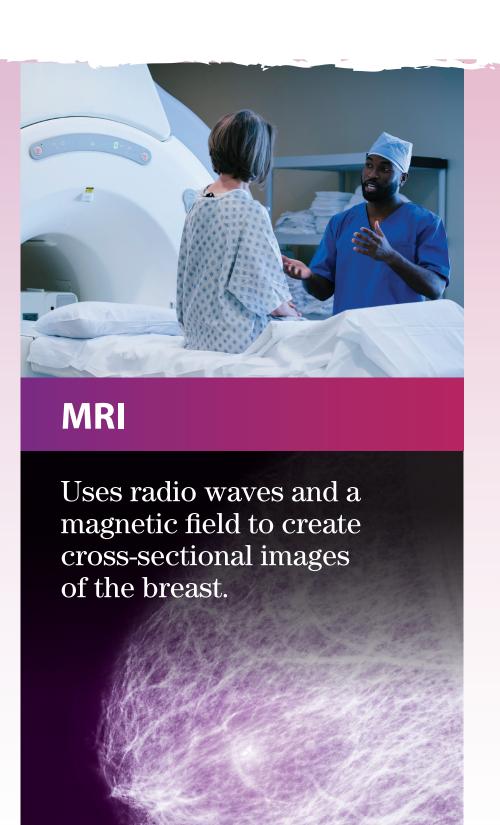
- **False-negative:** Missing a cancer on a screening mammogram, which could lead to delayed treatment.
- **False-positive:** Getting an abnormal result when there is no cancer present. It can lead to extra testing, like a biopsy (taking a small sample of tissue), that can cause anxiety and stress for some people.
- **Overdiagnosis:** Finding a cancer that would not otherwise cause health problems, that may lead to unneeded surgery or treatment.

Canadian Task Force on Preventive Health Care. (2011). Recommendations on screening for breast cancer in average-risk women aged 40–74 years. Cmaj, 183(17), 1991-2001.

Wilkinson, A. N., Ng, C., Ellison, L. F., & Seely, J. M. (2024). Breast cancer incidence and mortality, by age, stage and molecular subtypes, by race/ethnicity in Canada. The Oncologist, oyae283.

Breast Screening Tests





Breast Screening Tests



Types of Tests

There are different tests to help find breast cancer. The type of test depends on your risk level.

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.

What happens during a mammogram?

- A technologist specializing in mammography will place your breast on a special x-ray machine.
- A plastic plate will be lowered down to slowly flatten the tissue and hold it in place for a few seconds while the picture is taken.
 You will feel some pressure, but it will only last for a few seconds.
- There will be two pictures taken of each breast. The appointment will only take about fifteen minutes from start to finish.

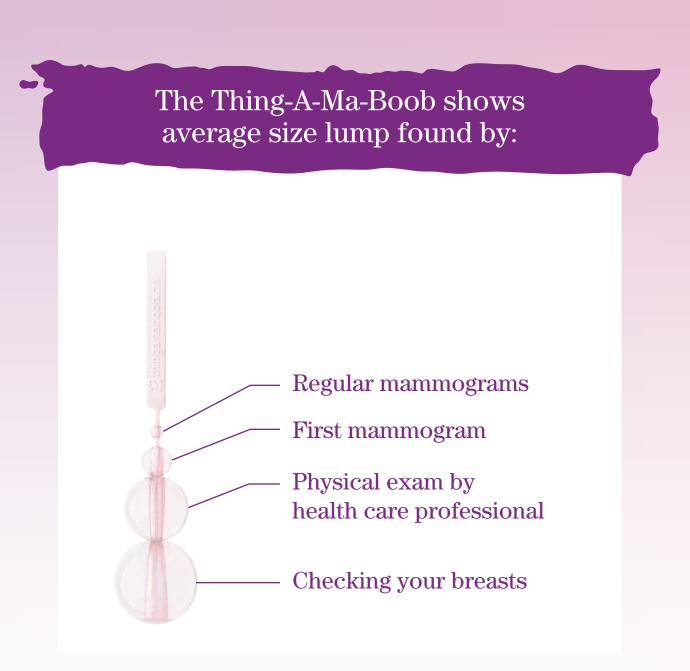
Mammograms are safe, free and you do not need an order from a health care provider to get one.

Breast magnetic resonance imaging

(MRI) (high risk people only)

- Breast MRI uses radio waves and a magnetic field to make images that can be viewed on a computer.
- Most people getting breast MRIs need to get dye put into their arm through an intravenous (IV) line as part of the test.
- During a breast MRI, people are asked to lie on their stomach.
- Appointments usually take 20 to 60 minutes.

Size of **Breast Lumps**



What happens after you get a mammogram?



A specialist doctor will look at the pictures for unusual tissue in the breasts.

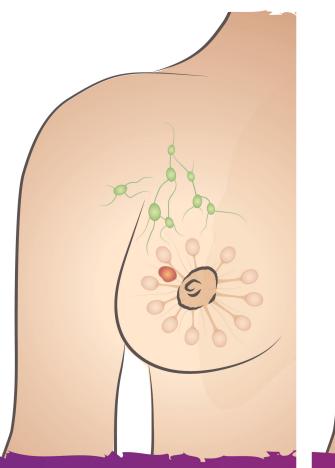
If you have a **normal result**, you will receive a letter in the mail. This letter will also let you know when you should get screened again and include breast density information.

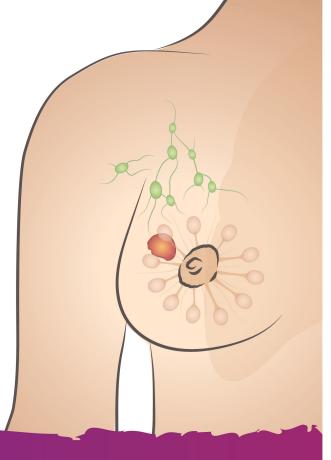
If you have an **abnormal result**, the Ontario Breast Screening Program site will notify your health care provider and may also help to schedule a follow-up appointment. If you do not have a health care provider, you will be assigned to one that can help with follow-up.

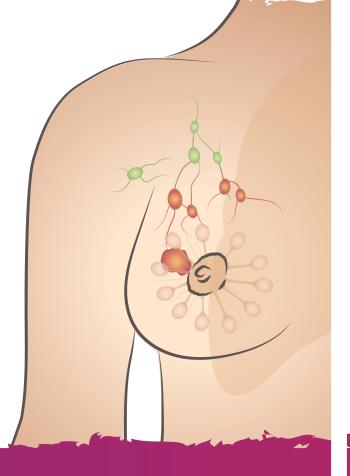
Getting an abnormal result does not necessarily mean you have breast cancer, but it does mean you need to get more tests.

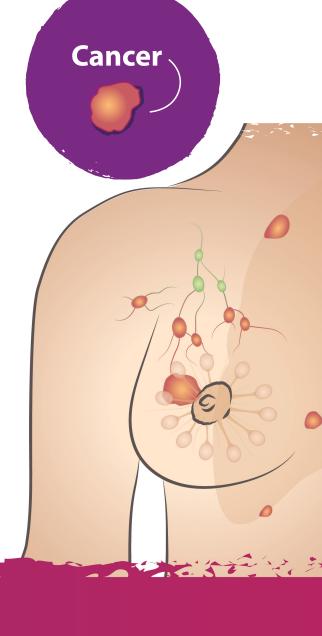
Nine out of ten people who have an abnormal result will **not** have breast cancer.

Stages of Breast Cancer









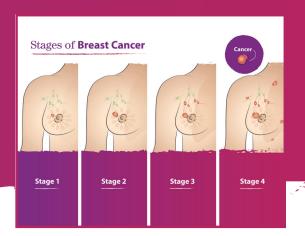
Stage 1

Stage 2

Stage 3

Stage 4

Stages of Breast Cancer



This is what breast cancer looks like.

Regular breast cancer screening can find cancer early, when it may be smaller and easier to treat.

Risk factors you cannot change or control:

- Age
- Genetics
- Breast density

- Hormone changes throughout life
- Family history
- A breast is considered dense when it has a lot of fibroglandular tissue (tissue that keeps the breast in place and helps make and carry milk to the nipple).
 Having some dense tissue is normal and very common.

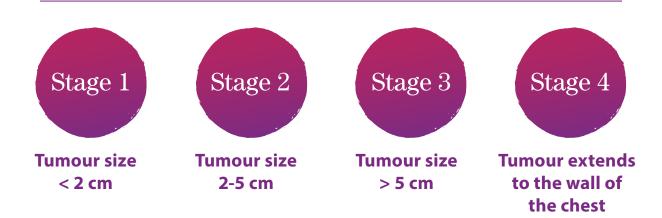
Risk factors you can change or control:

- Commercial tobacco use
- Alcohol use

- Healthy eating
- Physical activity
- Adult weight gain

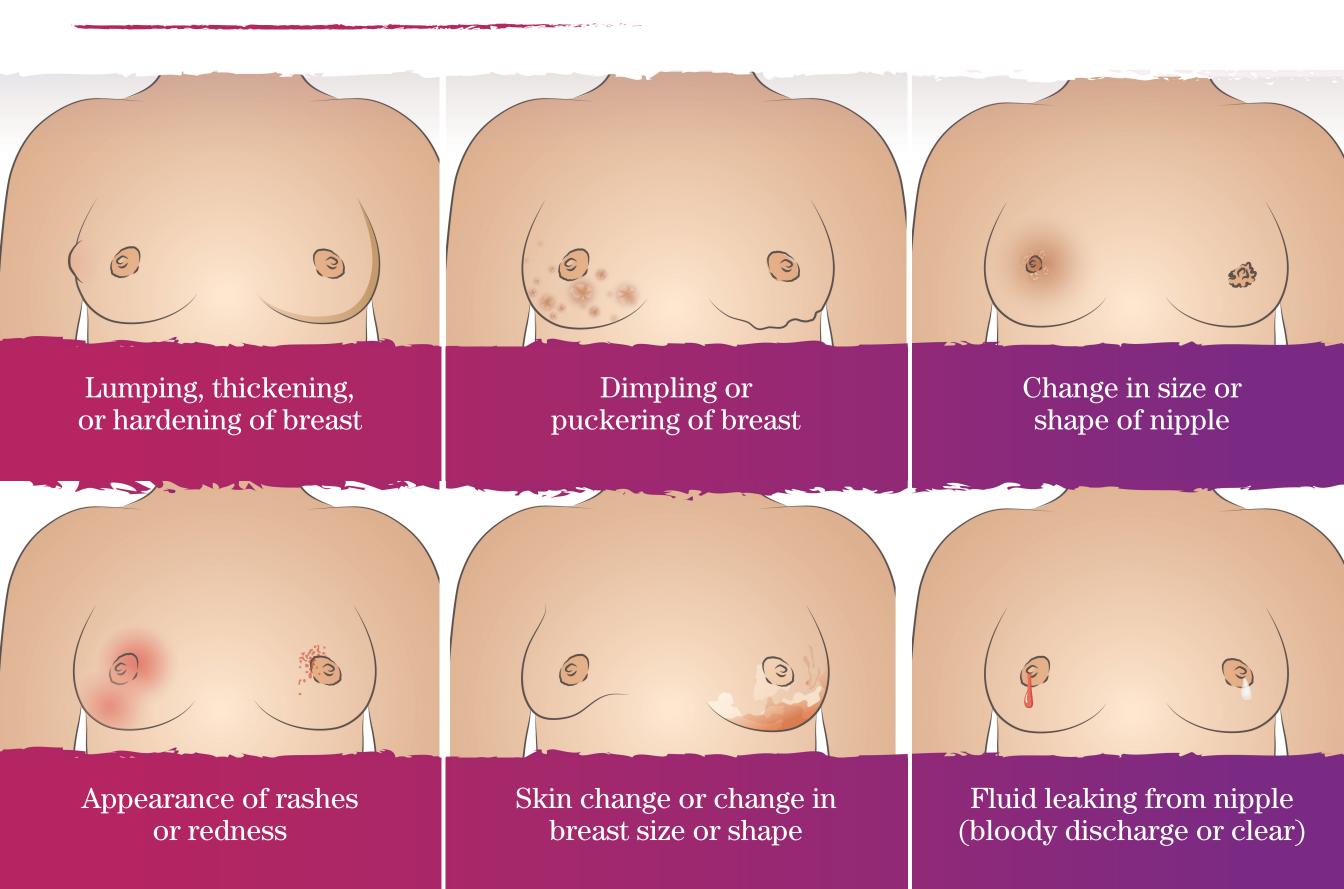
Stages

There are 4 stages of breast cancer.

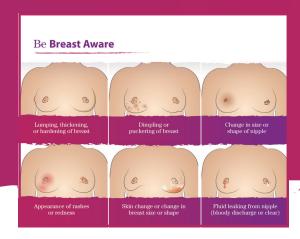


Stage 4 cancer is the most advanced form of cancer and is often the most difficult to treat.

Be Breast Aware



Be Breast Aware



Look for Changes

Know how your breasts normally look and feel so that you are more likely to notice any unusual changes.

Symptoms of Breast Cancer

- Lumps or thickening in the breast
- Fluid leaking from the nipple
- Redness
- Dimpling or puckering
- Skin change or change in breast size or shape
- Nipple change

See your health care provider right away if you have these symptoms.

