

Ontario Breast Screening Program

Information for Healthcare Providers

OCTOBER 2015

The Ontario Breast Screening Program (OBSP) assists healthcare providers with:

- Sending screening invitation, recall and reminder letters to eligible women;
- Arranging for genetic assessment (if appropriate) for referrals to the High Risk Screening Program;
- Informing women of normal screening results;
- Arranging follow-up of abnormal screening results; and
- Navigating from abnormal screen result to final diagnosis at OBSP breast assessment centres.



Promoting patient health through proper screening

What is the Ontario Breast Screening Program (OBSP)?

- The OBSP is a province-wide organized breast cancer screening program managed by Cancer Care Ontario that offers eligible Ontario women the benefits of organized screening.
- In operation since 1990, the program aims to decrease mortality from breast cancer by early detection when treatment can be more successful.
 - The OBSP provides screening mammography every two years for most women ages 50 to 74 years.
 - The OBSP includes screening mammography and breast magnetic resonance imaging (or, if appropriate, screening ultrasound) every year for women ages 30 to 69 years who are at high risk for breast cancer.
- Breast cancer screening is provided through OBSP sites and a mobile screening coach in northwestern Ontario and Hamilton.
- As of May 2015, the OBSP has provided more than 6.3 million mammograms to over 1.6 million women age 50 and over, and has detected more than 33,000 breast cancers, the majority in early stages.¹
- OBSP screening sites ensure that women with abnormal screens are followed up to diagnosis to determine the final test result and screening recall recommendation.
- The OBSP facilitates services; however, primary care providers retain the main responsibility for managing women throughout the screening processes.

What does the Ontario Breast Screening Program (OBSP) offer?

- The OBSP provides high-quality screening for women at average and high risk of developing breast cancer through the use of mammography and magnetic resonance imaging (MRI) (for women at high risk).
- **Communication to women and healthcare providers:**
 - Women eligible for screening through the OBSP average risk program are sent invitations to be screened in the OBSP, along with information about breast cancer screening and details on how to find an OBSP site.
 - Normal result letters are sent to women after their screening visit.
 - Women screened in the OBSP are sent recall and reminder letters when they are due for their next round of screening.
 - OBSP sites follow up on abnormal screening results and communicate both normal and abnormal results to a woman's healthcare provider.
- **Coordination and navigation:**
 - Arrange genetic assessment (if appropriate) for referrals to the OBSP High Risk Screening Program.
 - Book mammography and breast MRI (or, if appropriate, screening ultrasound) appointments via OBSP sites.
 - Suggest an appropriate screening recall interval based on a woman's screening result and risk factors.
 - OBSP assessment sites coordinate follow-up tests, track test results and provide navigation from abnormal screen to final diagnosis for women with abnormal screening results.

Why screen for breast cancer in women at average risk?

- Breast cancer is the most common cancer in Canadian women. Every year in Ontario, about 9,800 women will develop breast cancer and 1,900 will die from it.²
- A greater reduction in risk of death from breast cancer is seen with mammography screening for women at average risk ages 50 to 74 years.³
- Breast cancer mortality in the Ontario population declined by roughly 42 per cent for women ages 50 to 74 between 1990 and 2012.⁴ The decline in mortality rates is likely due both to improved breast cancer treatment and to increased participation in mammography screening.
- Screening mammography has the ability to detect breast cancers when they are small, less likely to have metastasized to the lymph nodes, and more likely to be successfully treated with breast-conserving surgery and without chemotherapy.⁵
- There are still many women who would benefit from regular breast cancer screening because only 59 per cent of Ontario women ages 50 to 74 were screened for breast cancer with mammography between 2012 and 2013.⁶

Why screen for breast cancer in women at high risk?

- The Ontario Breast Screening Program screens women ages 30 to 69 who are at high risk for breast cancer using a combination of mammography and magnetic resonance imaging (MRI).
- Less than one per cent of women in the general population are estimated to be at high risk.⁷
- Women at high risk have a greater estimated lifetime risk of developing breast cancer (up to 85 per cent) than the general population (10 per cent to 12 per cent).⁸
- The sensitivity of mammography and MRI combined is greater than for mammography or MRI alone.⁸

What are the limitations of screening?

- Mammography may miss some breast cancers or may produce abnormal results, raising the suspicion of cancer, when, in fact, additional imaging or biopsies show there is no cancer.
- For every 200 women screened in the Ontario Breast Screening Program, about 17 are referred for further tests and one will have breast cancer.⁹
- Some breast cancers that appear on a mammogram may never progress to the point where a woman has symptoms during her lifetime. Therefore, some women may have surgery or treatment for a breast cancer that would never have been life-threatening.
- Not all people with cancers caught at screening can be cured.
- Some cancers develop in the time between screens. This is why regular screening is important.

How can you play a role in supporting a woman's decision to screen for breast cancer?

- We recommend an active discussion with women about the benefits and limitations of breast screening.

What can I expect if my patient has an abnormal screening result?

- Results are communicated to a woman's healthcare provider by Ontario Breast Screening Program (OBSP) sites.
- Booking of follow-up tests recommended by the screening radiologist following an abnormal screen may be arranged by OBSP sites.
- Most average risk women (85 per cent) needing follow-up tests have non-invasive procedures, such as special mammographic views and/or ultrasound.⁹ Non-invasive procedures exclude any biopsies done for definitive diagnosis (fine needle aspiration, core or open surgical biopsies).
- Up to 94 per cent of abnormal screens in average risk women have a final diagnosis of being benign.⁹



Learn how MyCancerIQ can help support patient education. It can save you time by providing patients with personalized assessments of their cancer risk factors and how they can take action to reduce them, including cancer screening. Visit **MyCancerIQ.ca** for more information.

What type of reporting is available for my practice?

Patient enrolment model physicians have access to their patients' screening information through the Screening Activity Report (SAR) available via **cancercare.on.ca/SAR**. The SAR provides information on the screening status of enrolled patients, identifies patients requiring follow-up and presents physicians' screening rates in comparison to their peers. Reporting on request regarding patient Ontario Breast Screening Program activity is no longer available.

What about quality assurance and evaluation?

- Evidence shows that image quality is increased and variability is decreased in facilities participating in a province-wide screening program.¹⁰
- There is a rigorous quality assurance program involving all aspects of the Ontario Breast Screening Program.
 - Sites are required to have Canadian Association of Radiologists Mammography Accreditation Program (CAR-MAP) accreditation;
 - Regular inspection of mammography equipment by medical physicists;
 - Regular mammography equipment quality control testing;
 - Radiologist performance monitoring and annual reporting;
 - Technologists performance monitoring.

REFERENCES

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For further information, including details about eligibility and screening site locations:

Visit: cancercare.on.ca/pcresources

Call: 1-866-662-9233

Email: screenforlife@cancercare.on.ca

For key OBSP performance metrics, visit the Cancer Quality Council of Ontario website: cqco.ca.