



• Breast Cancer Screening for Women at Average Risk

Mammography is the most effective breast cancer screening tool used today. However, the benefits of mammography vary by age. These benefits are discussed below for women ages:

- [40 to 49](#)
- [50 to 69](#)
- [70 and older](#)

Figure 3.1 shows the breast cancer screening recommendations for women at average risk from three major health organizations [[13.15.105](#)].

Learn about [screening recommendations for women at higher risk of breast cancer](#).

Figure 3.1: Breast cancer screening recommendations for women at average risk		
American Cancer Society	National Comprehensive Cancer Network	U.S. Preventive Services Task Force
Mammography		
<p>Informed decision-making with a health care provider ages 40-44</p> <p>Every year starting at age 45-54</p> <p>Every 2 years (or every year if a woman chooses to do</p>	<p>Every year starting at age 40, for as long as a woman is in good health</p>	<p>Informed decision-making with a health care provider ages 40-49</p> <p>Every 2 years ages 50-74</p>

so) starting at age 55, for as long as a woman is in good health		
Clinical Breast Exam		
Not recommended	Every 1-3 years ages 25-39 Every year starting at age 40	Not enough evidence to recommend for or against
Note: Women at higher risk may need to get screened earlier and more frequently than recommended here. Find more on screening recommendations for women at higher risk of breast cancer .		

Women Should Have Access to and Coverage for Mammography

Susan G. Komen believes all women should have access to regular screening mammograms when they and their health care providers decide it is best based on their personal risk of breast cancer. In addition, screening should be covered by insurance companies, government programs and other third-party payers. Read more from our [press release](#).

Mammography for women ages 40 to 49

[Figure 3.1](#) shows the breast cancer screening recommendations for women at average risk.

Mammography in women ages 40 to 49 may save lives, but the benefit is less than for older women.

Individual study findings on the benefits of mammography vary [\[4,16\]](#).

Findings from the U.S. Preventive Services Task Force [meta-analysis](#) (that combined the results from eight [randomized controlled trials](#)) showed that women ages 39 to 49 who got mammograms on a regular basis had a 15 percent lower risk of dying from breast cancer than their peers who did not get mammograms [\[13\]](#).

Benefits and risks of mammography for women ages 40 to 49

There are a few reasons why mammography offers less benefit for younger women than for older women. Younger women tend to have dense breast tissue, which can make abnormal findings hard to see with current mammography technology ([learn more](#)) [17].

Breast cancers in younger women also tend to grow faster than breast cancers in older women [17]. This means mammography every one to two years may be less likely to catch breast cancers in younger women early, when the chances of survival are highest.

Women ages 40 to 49 have a lower risk of breast cancer than older women. So, for younger women, there are fewer benefits and some drawbacks of screening mammography, including a high rate of false positive results. A false positive result occurs when a screening test shows there is cancer when in fact, cancer is not present.

Because so few breast cancers occur in young women, those who get mammograms are more likely than older women to have a [false positive result](#). This means they will be told they have an abnormal finding and undergo follow-up tests (such as further mammograms, [breast ultrasounds](#) or even [biopsies](#)) only to find they do not have breast cancer.

Learn more about [follow-up of an abnormal mammogram](#).

Why are there differences in screening recommendations for women ages 40 to 49?

Some major health organizations have concluded that the modest survival benefits of mammography in women in their 40s outweigh the risks of false positive results and over-diagnosis ([learn more](#)) [15,105]. The National Comprehensive Cancer Network recommends routine mammography for women starting at age 40 and the American Cancer Society recommends starting at age 45 [15,105].

Weighing the benefits and risks, the U.S. Preventive Services Task Force does not recommend routine mammography for all women 40 to 49 [13].

Instead, the Task Force, as well as the American College of Physicians, recommends that women 40 to 49 discuss the pros and cons of mammography with their health care providers. Then, together, women and their providers make informed decisions about when to start mammography screening [13,18,105]. Similarly, the American Cancer Society recommends informed decision-making for women ages 40 to 44 [105].

Informed decisions are guided by a woman's breast cancer risk profile. Women at higher risk of breast cancer are more likely to benefit from mammography [18,105]. Decisions should also be guided by a woman's preferences based on the potential pros and cons of mammography [18].

[Read more from our Chief Scientific Advisor, Dr. Eric Winer, as he comments on the issue of mammography leading to over-diagnosis and over-treatment.](#)



For a summary of research studies on mammography in women ages 40 to 49, [visit the Breast Cancer Research Studies section](#).

Trends in screening mammography among women ages 40 to 49

Between 2000 and 2005, screening mammography rates among U.S. women ages 40 to 49 declined slightly [6]. The reason(s) behind this decline are unclear at this time. Since 2005, screening mammography rates among women ages 40 to 49 have remained stable [19].

Learn about [disparities in screening mammography](#).

Mammography for women ages 50 to 69

[Figure 3.1](#) shows the breast cancer screening recommendations for women at average risk.

For women ages 50 to 69, the life-saving benefits of mammography are clear. Women ages 50 to 69 should have mammograms on a regular basis.

Individual study findings on the benefits of mammography vary. Findings from the U.S. Preventive Services Task Force [meta-analysis](#) (that combined the results from six [randomized controlled trials](#)) showed that women ages 50 to 69 who got mammograms on a regular basis had a 14 to 32 percent lower risk of dying from breast cancer than their peers who did not get mammograms [13].

The U.S. Preventive Services Task Force recommends mammography every two years for women 50 to 69 [13]. The Task Force reviewed the scientific evidence and concluded that mammography every two years gives almost as much benefit as mammography every year while cutting the risks in half [13]. These risks include false positive results, [over-diagnosis](#) and [over-treatment](#) ([learn more](#)).

The American Cancer Society recommends mammography every two years for women ages 55 and older [105]. Other health organizations recommend women 50 to 69 have mammograms every year [15].



For a summary of research studies on mammography in women ages 50 to 69, [visit the Breast Cancer Research](#)

[Studies section.](#)

Trends in screening mammography among women ages 50 to 69

Between 2000 and 2005, screening mammography rates among U.S. women ages 50 to 64 declined from about 79 to 72 percent [6]. The reason(s) for this decline are unclear. Since 2005, mammography rates among U.S. women in this age group have remained stable [6,19].

In 2010, 73 percent of women ages 50 to 64 reported having a mammogram within the past two years [6].

Learn about [disparities in screening mammography](#).

Mammography for women ages 70 and older

[Figure 3.1](#) shows breast cancer screening recommendations for women at average risk.

There are few studies on the benefits of mammography in women ages 70 and older, and none of these have been [randomized controlled trials](#).

The U.S. Preventive Task Force does not recommend routine mammography screening in women ages 75 and older [13].

However, many major health organizations, including the American Cancer Society, recommend women ages 70 and older continue to get mammograms on a regular basis as long as they are in good health [20,105]. Breast cancer risk increases with age, and mammography does not appear to be less effective in women 70 and older.

Some women ages 70 and older stop routine breast cancer screening due to poor health. Women who have a serious health problem may not benefit enough from having breast cancer found early to justify screening. However, women who are in good health and could benefit from treatment (if breast cancer were found) should continue to get mammograms.

If there is any question about whether you should continue getting screened, talk with your health care provider.

Trends in screening mammography among women ages 70 and older

Since 2005, screening mammography rates among U.S. women ages 74 and older

have remained stable [\[19\]](#).

Learn about [disparities in screening mammography](#).

Weighing the benefits and risks of mammography

Although mammography saves lives, it does have some drawbacks. Understanding your chances of having a false positive result may help ease the fear and worry over an abnormal finding on a mammogram.

The table below shows estimates of outcomes for 1,000 women who get a mammogram. For example, after one screening, 98 out of 1,000 women ages 40 to 49 will have a false positive result [\[13\]](#). In order to prevent one breast cancer death, 1,904 women ages 40 to 49 would need to get a mammogram [\[13\]](#). Among older women, there are fewer false positive results and fewer women need to be screened with mammography to prevent one breast cancer death [\[13\]](#).

Results among 1,000 women who get a mammogram (estimates for a single screening)

Age	False positive result	Need a biopsy	Diagnosis of DCIS or invasive breast cancer	Number of women needed to be screened with mammography to prevent one breast cancer death
40 to 49 years	98	9	3	1,904
50 to 59 years	87	11	5	1,339
60 to 69 years	79	12	7	377
70 to 79 years	69	12	8	Not available
80 to 89 years	59	11	2	Not available

Adapted from U.S. Preventive Services Task Force, 2009 [\[13\]](#).

Learn more about [weighing the risks and benefits of screening mammography and the debate over mammography](#).

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Access [helpful resources](#) or call:

1-877 GO KOMEN (1-877-465-6636)

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