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AMWA endorses uniform mammography screening

Mary Guinan, MD, PhD



Breast cancer is gaining on us at an increasing rate each year. In 1990 in the United States alone we expect about 145,000 new cases and 45,000 breast cancer deaths in women. What are we doing about it? What is AMWA doing, and what are women physicians doing—for themselves and their patients? *Can we do anything?* The answer is yes, we can. We can reduce mortality considerably if the cancer is detected early. The five-year survival rate for women with breast cancer diagnosed in its early (localized) stages is 90%, but for women with cancer diagnosed after it has spread to distant sites the survival rate is only 18%. Therefore, early detection is the major weapon for fighting breast cancer deaths. The methods that we have for early detection are monthly self-examination, yearly examination by a clinician, and screening mammography. If one were to ask which of these will diagnose breast cancer earliest, the answer is undoubtedly screening mammography.

Until recently, a variety of different professional organizations had issued recommendations on screening mammography that were inconsistent and confusing. This may be one of the reasons why so few women who should have screening mammographies actually have them. In fact, fewer than 30% of American women over 40 have ever had a mammogram, and fewer than 20% have one annually. When asked why they have not had mammograms, women most often answer, "I didn't know I needed one," or "My doctor didn't tell me I needed one." Both physicians and the public have been either unaware of or confused about mammography screening

and its potential for saving women's lives.

In an extraordinary attempt to clarify, support, and promulgate recommendations for breast cancer screening, 11 professional organizations have agreed on a uniform set of screening recommendations. On the basis of a position paper written by Janet Rose Osuch, MD, AMWA has joined these organizations (listed be-

at increased risk and should discuss screening schedules with their doctors.

The intent of these uniform recommendations is very clear. We need to ensure that all women age 40 and over are aware of their risk of breast cancer and the need to have regular screening mammograms. If these screening recommendations are followed, it is estimated that mortality

Organizations Supporting the Uniform Guidelines:

American Academy of Family Physicians
American Association of Women Radiologists
American Cancer Society
American College of Radiology
American Medical Association
American Osteopathic College of Radiology
American Society for Therapeutic Radiology and Oncology
American Society of Internal Medicine
College of American Pathologists
National Cancer Institute
National Medical Association

low) and endorsed the following Uniform Mammography Screening Recommendations to Prevent Breast Cancer Mortality:

1. For women with no signs or symptoms of breast cancer and who have no increased risk of breast cancer, the recommendations are:
 - A) Women aged 40 to 49 should have a physical examination of the breasts by a clinician and a screening mammogram every 1–2 years.
 - B) Women aged 50 and over should have a physical exam and a mammogram every year.
2. Women who have a family history of breast cancer, especially in a mother or a sister, are at increased risk and should discuss earlier and more frequent screening with their doctors. Women who have had a previous history of breast cancer and who have remaining breast tissue are also

from breast cancer can be reduced by 30%. Let us do our part for our patients, ourselves, family, and friends. AMWA is committed to improving women's health. We are joining the leaders and providing leadership on this very important initiative to reduce breast cancer mortality. We need to start immediately by implementing these recommendations in our practices and in our personal lives.

Many issues will surface concerning who will pay, how to ensure good quality mammograms, and whether the medical community is capable of responding to the demands of these recommendations. These are serious issues but let us not be sidetracked from the main one. More and more women are dying needlessly each year from breast cancer. We can make a difference. Let us begin the process and implement these recommendations. We can save women's lives.