

# Information about the Danish breast cancer screening programme

Health for all ♥+●

### **Breast cancer screening**

Every year, approximately 4,800 Danish women get breast cancer. Most of them are over 50 years old. If you are between 50 and 69 years old, you can be screened for breast cancer.

In this pamphlet, you can read more about the screening process. This pamphlet can help you decide whether to have a breast cancer screening or not.

The Danish Health Authority recommends screening for breast cancer based on an overall assessment of the benefits and harms. But it is important that you make the decision yourself.

If you are already in treatment or control for a disease in the breast, you should talk to your doctor about when breast cancer screening is relevant for you.

If you do NOT wish to accept an offer of screening for breast cancer, you can decline the offer. See how to do this in the invitation letter from your Region.

If you change your mind, you can always register again. If you choose not to participate in the breast cancer screening programme, this will not affect your opportunities to be examined or treated for breast cancer or other diseases.

### What is a breast cancer screening?

Screening for breast cancer is an examination of women who do not have symptoms of breast cancer. The purpose of the screening is to find the disease early, so that there are better treatment options and that fewer will die from breast cancer.

A screening is not the same as a full examination for breast cancer. Even if you are screened, you could still have or develop breast cancer. **Therefore, you should always see your doctor if you have symptoms.** 

### How is the screening performed?

#### X-ray examination of your breasts

The screening is performed as an X-ray examination of both breasts (mammography)<sup>1</sup>. If the examination does not raise suspicion of breast cancer, you will be offered a screening appointment again after two years.

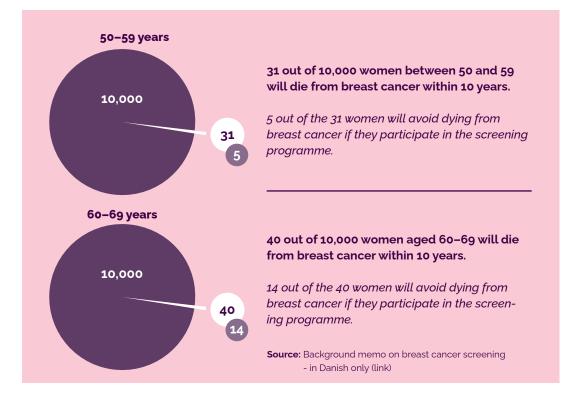
If, on the other hand, the screening indicates that you may have breast cancer, you will be offered further examinations (clinical mammography).

<sup>1</sup>If you have breast implants that are placed behind the muscle, there are usually no problems with participating in the screening. If the implant is located in front of the muscle, or if there is a capsule formation around the implant, there may be special conditions. Read more about this at **www.sst.dk/screening**.

### What is my risk?

#### Breast cancer is the most common cancer in Danish women

Every year, approximately **4**,**800** Danish women get breast cancer. Most are older than 50 years old. About **1**,**100** die from the disease.



### Facts about the screening

Data from the Danish screening programme show that every time 10,000 women are screened for breast cancer



pating in the screening, you therefore risk receiving unnecessary – and possibly harmful – treatment.

Six women are overdiagnosed for every 10,000 women screened for breast cancer.

### **Pros and cons of screening**

#### What are the pros of screening?

#### Lower risk of dying from breast cancer

There are better treatment options if cancer is detected early. By taking part in the screening, you can reduce your risk of dying from breast cancer.

#### Less invasive treatment

If the cancer is detected early, there is a better chance that you can be offered breast-conserving surgery and avoid having lymph nodes in the armpits removed. You may also have a lower risk of needing medical treatment such as chemotherapy.

#### What are the cons of screening?

#### Overtreatment

In some cases, the screening may detect breast cancer that will not affect you during your lifetime. By participating in the screening, you therefore risk receiving unnecessary – and even harmful – treatment.

#### Worries and false alarm

If the screening indicates that you may have breast cancer, you will be offered further examinations, but it is not certain that you have breast cancer. The suspicion may turn out to be benign changes or dense breast tissue for example. The time spent waiting for further examinations may cause anxiety.

#### False reassurance

Even if the screening does not indicate breast cancer, you could still have or develop breast cancer.

#### Discomfort

Some women find the screening uncomfortable or painful as the breasts are squeezed during the examination.

### **Further examinations**

If your X-ray examination indicates cancer, your Region will offer you an appointment for further examination (clinical mammography) within 14 days. Here, you will be examined by a doctor, often by the use of an ultrasound scan. It may also be necessary with additional X-rays and to take a tissue sample, also called a biopsy.

If you don't want a clinical mammography, you will still be offered a new breast cancer screening after about two years.

#### There are two possible results of the examination (clinical mammography):

#### There are no signs of cancer

Nothing abnormal was found in your breasts. The cause of the suspicion may have been, for example, benign changes or dense breast tissue. You will be offered another screening again in about two years.

#### You have cancer

If you are diagnosed with breast cancer, you will be offered a specifically designed treatment plan.

#### Possible symptoms of breast cancer:

- A hard, not sore lump
- Retraction of the skin or of the nipple
- Clear or bloody fluid from the nipple
- Swollen, hard lymph nodes in the armpit

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### Where can you get help?



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If you have questions about the screening, contact your Region. You can see who to contact in your invitation.



**If you have symptoms of breast cancer**, you should always contact your doctor for an examination. This also applies even if you participate in the screening programme.



**You can read more about** breast cancer, screening and the numbers in this pamphlet on the Danish Health Authority's website: **www.sst.dk/screening**.

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