

PROGRAMME QUÉBÉCOIS DE **DÉPISTAGE** DU **CANCER** DU **SEIN**



Taking part in the

QUÉBEC BREAST CANCER SCREENING PROGRAM:

It's Your Decision



Québec 👪

NOTICE: The information in this brochure is no substitute for your doctor's advice. Don't delay any examinations or treatment that your doctor or specialized nurse practitioner (SNP) recommends.

You have received a letter inviting you to take part in the Québec Breast Cancer Screening Program (PQDCS, Programme québécois de dépistage du cancer du sein) offered by ministère de la Santé et des Services sociaux du Québec. While Québec's National Director of Public Health recommends that all women between 50 and 69 years of age participate in PQDCS, he recognizes that you need information on all aspects of the screening to help you decide whether to participate or not. The first section of this brochure contains information on how mammograms are used to screen for breast cancer. The second section describes the services offered in conjunction with this program.

Mammography is the only screening method that can help reduce the number of deaths from breast cancer. Recent data has clearly shown the significant advantages, as well as the limitations or drawbacks, of screening mammograms. You can read about this new data here.

Who gets invited to join the Québec Breast Cancer Screening Program (PQDCS)?

In Québec, every woman between the ages of 50 and 69 receives a letter inviting her to take part in PQDCS. As part of this program, you are offered a free screening mammogram (x-ray of your breasts) every 2 years while you are between 50 and 69 years of age.

If you have previously had breast cancer, you cannot participate in the program since you will need more frequent checkups from a doctor. Please advise your Regional Services Coordination Center if this applies to you.

If you are worried because there is a history of breast cancer in your immediate family, ask your doctor if you need to undergo a particular type of follow-up examination.

BREAST CANCER IN QUÉBEC

Each year there are more than **6,000 new cases** of breast cancer.

Nearly 80% of those affected are **women** age 50 or older.

Almost **1,500 women die** from breast cancer in Québec each year.

Deciding whether or not to have screening mammograms

What are screening mammograms?

A type of screening done to detect signs of breast cancer in women who are healthy. Mammography, the examination method used for this screening, involves x-raying the breasts to look for the presence of cancer.

Can mammography detect all cancers of the breast?

Unfortunately, it is impossible to detect all breast cancers by the use of screening mammograms. Sometimes breast cancer is discovered just months after a normal mammogram.

How many mammograms will I need to have if I take part in the program?

Women who decide to take part in the breast cancer screening program will be invited to undergo a mammogram every 2 years while between 50 and 69 years of age, so you could receive a minimum of 10 mammograms over a 20 year span.

Is it true that mammography can cause cancer?

Mammography does involve x-rays, and like all x-rays, gives off radiation. Studies show that the risk of new breast cancer due to radiation exposure of the breasts during screening mammograms is extremely low in women ages 50 to 69.

Are screening mammograms painful?

The answer varies from one woman to another. During mammography, the breasts must be compressed between two plates for a few seconds. Many women find this uncomfortable, while others may say it's painful. Breast discomfort or pain generally goes away as soon as the compression stops.

What happens after the screening mammogram?

A radiologist will analyze your results, at which point two outcomes are possible:

- The radiologist does not detect any abnormality. This
 means that no sign of cancer was detected in your
 breasts at the time of the screening mammogram.
 However, you should know that it is possible for cancer
 to be present—but not visible—at the time of a
 mammogram, or for cancer to develop after a mammogram.
- 2. The radiologist detects an abnormality or has concerns about the results from reading your mammogram. This means that you will need to undergo additional testing to confirm whether breast cancer is present. While results like this can cause stress and worry, abnormal mammograms occur relatively often at this stage.

What does additional testing involve?

Often it requires another mammogram or a breast ultrasound, sometimes a biopsy. Ultrasound examination is used to reveal more detail within the breast; biopsy involves removing breast tissue or cells for further analysis.

What will additional testing show?

The results may be normal or abnormal. Additional testing results are normal 95% of the time. In other words, there is nothing that indicates the presence of cancer in the breast at the time the test is performed. In 5% of cases, additional tests do confirm the presence of cancer. But the chance of recovery is often better with such cancers because they are generally detected early, when the disease is in a less-advanced stage.

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Possible effects of agreeing or declining to take part in the Breast Cancer Québec Screening Program (PQDCS)

When 1,000 women who would take part in screenings over a 20 year period were compared to 1,000 others who did not, differences were noted in several areas.

Effects of screening on	1,000 participants over 20 years	1,000 non-participants over 20 years
the number of additional tests	495	325
the number of breast cancers detected	77	54
the number of deaths due to breast cancer	13	20
the number of cases of overdiagnosis*	10	0

Sources : Ministère de la Santé et des Services sociaux (MSSS) and Institut national de santé publique du Québec (INSPQ)

Stated another way, the group of 1,000 women ages 50 to 69 who received screening every 2 years over a 20 year period had:

- 170 more additional tests administered
- 23 more cancers discovered
- 7 fewer deaths
- 10 cancers found and treated needlessly (overdiagnosis)*

*What is overdiagnosis?

The term refers to cancer that is discovered and treated needlessly—in other words, there is detection and treatment of a cancer that would not have been diagnosed without screening, and that would not have had any effect on the health of the individual.

Overdiagnosis can therefore occur only among individuals who take part in screening, and it basically involves the detection and treatment of any types of cancer, some of which are harmless. Why would harmless cancers be treated? Because we are unable to distinguish between harmless and lethal cancers and we don't want to take any risks.

Screening mammograms have advantages and drawbacks or limitations

The advantages of screening every 2 years over a 20 year period:

- The risk of breast cancer mortality is reduced:
 For every 1,000 women who take part in screening,
 7 will not die because of the disease.
- Breast health can be better documented: Most women (nearly 98%) whose mammograms or additional tests do not reveal any sign of breast cancer will not have the disease.
- Reduced chance of needing chemotherapy: With screening, fewer late-stage cancers that require chemotherapy are found.

The drawbacks of screening every 2 years over a 20 year period:

- Additional testing causes waiting and worrying: Over a 20 year screening period, nearly half of women (495/1,000) will undergo at least one additional test.
- There will be treatment of cases of cancer that would have never caused any problem without screening (overdiagnosis): This was the case for 10 of 77 women with breast cancer.

Limitations of screening every 2 years over a 20 year period:

- There is no guarantee that all breast cancers will be detected: Among 77 women with breast cancer out of 1,000 women who were screened, 21 will have cancer discovered after a normal mammogram; their cancers were either invisible or not yet developed at the time of their mammograms.
- Breast cancer survival cannot be guaranteed: It is estimated that 13 of every 1,000 women will die of breast cancer even if they take part in screening.

The decision to participate or decline screening depends on how much importance you assign to each of the effects described in this brochure.

If you are still unsure whether you should have breast cancer screening mammograms after reading the information in this section, we encourage you to speak with a doctor or specialized nurse practitioner.

Whether or not you participate in the program, see a doctor immediately if you notice any of the following conditions—even if you recently had a normal screening mammogram:

Changes to a breast:

- You notice a lump (mass) within the breast
- The skin appears puckered
- The skin appears dimpled, like an orange peel
- 1/3 or more of the skin surface becomes unusually red

Changes to a nipple:

- Spontaneous discharge of liquid from the nipple
- The nipple becomes inverted (as if it is being pulled inward)
- A change appears on the skin of the nipple (persistent eczema)

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Learn more about the services offered as part of the Québec Breast Cancer Screening Program (PQDCS)

The Québec Breast Cancer Screening Program (PQDCS, Programme québécois de dépistage du cancer du sein) offers women between the ages of 50 and 69 the opportunity to undergo a screening mammogram every 2 years and receive necessary follow-up from a doctor or specialized nurse practitioner (SNP). To take part in the program, you must sign a consent form each time you have a screening mammogram.

What services can I receive from the program in terms of mammography?

- You will be able to use the program invitation letter to receive a mammogram without needing a prescription from a doctor or SNP.
- You can have your mammogram at a screening center that complies with PQDCS quality standards.

What follow-up care can I receive through the program?

- You will receive a letter notifying you of the results of your screening mammogram.
- Your doctor or SNP will receive a detailed report of your screening mammogram.
- If you need to undergo additional testing, your doctor or a regional program coordinator will contact you.
 If no additional testing is needed, you will receive an invitation letter for a screening mammogram in 2 years.
- If you don't have a family physician, the regional program coordinator will ensure that a doctor receives your screening mammogram results and provides additional testing if it is needed.
- If additional testing is needed after your screening mammogram, it will be available at a designated program center.
- Psychosocial support may be available as needed, as long as you remain in the program.

Can I have a mammogram without taking part in the program?

You can receive a mammogram at no charge at a recognized PQDCS screening center as long as you present a prescription from your doctor or specialized nurse practitioner, but you will not receive any of the other services offered by the program.

If you decide not to take part in the program but later change your mind, you can always join the PQDCS. You will then need to request a prescription for a screening mammogram from your doctor or SNP and sign the consent form when you go to the screening center.

Practical advice to prepare for your mammogram:

 If you have sensitive breasts, ask to schedule your appointment within 10 days of the onset of your period or when your breasts are less likely to be sensitive.



 Avoid using the following products the evening before and on the day of your appointment: Antiperspirant, deodorant, powder, lotion, or perfume. These products can cause false images to appear on your mammogram.



 You'll need to remove your clothing from the waist up, so wear a two-piece outfit instead of a dress.



 Before the screening, it's also a good idea to remove jewelry like necklaces, earrings, and any other piece that could interfere with the test.

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To learn more about the Québec Breast Cancer Screening Program or to reach the programme CCSR (Regional Services Coordination Center) in your area, visit www.msss.gouv.qc.ca/mammographie

You can also phone Services Québec for contact information for your regional CCSR:

Québec City area: 418-644-4545 Greater Montréal area: 514-644-4545

Elsewhere in Québec: 1-877-644-4545 (toll free)

PQDCS data is regularly reviewed and published on www.inspq.qc.ca/groupes/pqdcs

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Masculine pronouns are used generically in this document.

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