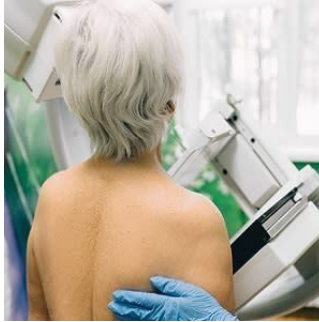

Mammography Screening Guidelines for Older Survivors of Breast Cancer



The first mammography guidelines for older survivors of breast cancer have been developed by a nationwide panel of experts. These guidelines provide a framework that would allow doctors and breast cancer survivors to discuss the pros and cons of screening in the later years.

The new guidelines recommend discontinuing routine mammograms for older survivors who had a life expectancy of less than five years. Guidelines also recommend that screening could be stopped for those who have a life expectancy of 5-10 years. Mammography should be continued for survivors who have a life expectancy of greater than 10 years.

To date, the recommendation for mammography in breast cancer survivors has been annual screening for all ages. There has been limited guidance on the screening of older survivors. That is why the use of mammography in older cancer survivors has been quite inconsistent. However, as the number of older women diagnosed with breast cancer is expected to increase in the years to come, it is important to find tools that could better guide management and treatment decisions in such patients.

The new guidelines have been developed by an 18-member panel of experts in breast cancer primary care, geriatrics, radiology, survivorship, and nursing, as well as patients. The panel took into consideration scientific literature, the subtypes of cancer, treatments that the patients have received, age and health status. The literature review confirmed that older survivors have a low risk for breast cancer. The review also showed that mammography offered very little to modest clinical benefit in older women. A major downside of mammography were false positives as well as anxiety associated with testing and risk of overtreatment.

The new guidelines have been reviewed by the International Society for Geriatric Oncology and are now finalised. It is important to note that these guidelines are not prescriptive. They serve as a starting point for older survivors of breast cancer and can offer support to clinicians for making shared, individualised decisions with their patients.

Source: [Dana-Farber Cancer Institute](#)

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