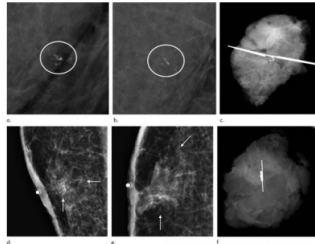

Screening Mammography for Men at Risk



A recent study in *Radiology* showed that selective mammography can help identify breast cancer for men with a high-risk. The rarity of breast cancer in men has led to little research on the outcomes in this cohort despite the high rates of mortality. Out of the 2670 cases of invasive breast cancer estimated to be diagnosed in 2019, the American Cancer Society predicts that around 500 of these will be men who will ultimately die as a result of breast cancer.

Yiming Gao, MD, lead author of the study, noted how screening has helped improve outcomes for women, however, no formalised screening guidelines have been implemented for men. This has resulted in a lack of information on outcomes and breast cancer being diagnosed at a later stage in the male population.

The study, led by Gao, assessed the utilisation of breast imaging patterns and their outcomes in men over 12 years. 1869 men were included in the study, with a median age of 55.

Findings revealed 2304 identified breast lesions in the male cohort using mammography. This led to 149 biopsies, 27.5% of which were found to be malignant. Researchers determined a cancer detection rate of 18/1000 exams for men, which is significantly more than the 3-5/1000 rate found for women. Additionally, the cancers detected in men were found in the early stages, improving outcomes for survival as it had not yet spread to the lymph nodes.

As men lack the fibroglandular tissue in the breasts, researchers found a 100% mammographic screening sensitivity. It is this fibroglandular tissue in women often allows a prognosis to be evaded. Also, researchers found a 95% mammographic screening specificity in the men studied.

Risk factors for breast cancer in men were also identified, the most significant being if there had been a personal history of breast cancer. First-degree family history, being of Ashkenazi Jewish descent and genetic mutations were also identified as risk factors.

The current recommendations from the National Comprehensive Cancer Network (NCCN) do not support breast cancer screening in men due to the lack of evidence, even for those with increased risk. This new study could support earlier NCCN guidelines which suggest baseline mammograms based on each patient.

Gao hopes that this research could lead the way for larger, multi-institutional studies in the future to give more detail on risk factors for men. Findings from this study could spearhead further talks on how we strategize male cancer diagnoses in the future.

Source: [RSNA](#)

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