

RSNA Statement on Screening for Breast Cancer

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The Radiological Society of North America (RSNA) is committed to excellence in patient care through education and research.

- It is widely acknowledged by major organizations, including the American Cancer Society, that screening mammography saves lives. The goal of breast cancer screening is to find cancer at a small size and early stage before it is large enough to cause symptoms or has spread elsewhere in the body. By finding cancers early, we reduce morbidity and mortality from this disease.
- Large, randomized controlled trials of mammography screening have demonstrated that the progression of breast cancer can be interrupted and that the death rate can be reduced using mammography. Since 1990, the breast cancer death rate in the U.S, which had been unchanged for the preceding 50 years, has decreased by 30 percent primarily due to screening mammography.
- Cancers in younger women tend to be more aggressive and faster growing than those diagnosed in older women. The RSNA agrees with both the American College of Radiology and the Society of Breast Imaging that it is important to begin annual screening mammography at age 40 to detect cancers in time to treat these women and produce the best patient outcome with the fewest possible side effects.
- Other imaging tests such as ultrasound and MRI are not suitable by themselves for routine breast screening but may be additionally indicated depending on many factors, including breast density and other risk factors.
- Mammography is not a perfect test. It has limitations, particularly in women with dense breast tissue. Not all cancers can be detected with mammography. Some women will have additional imaging examinations or biopsies for suspicious areas detected on screening mammography that turn out not to be cancer. Despite the limitations, screening mammography is a very effective test and a valuable tool in the fight against breast cancer.
- The question of whether or not to inform patients of their breast density is being legislated on a state-by-state basis.
- Mammography uses low-dose protocols in accordance with the “As Low As Reasonably Achievable (ALARA)” principle.
- In conclusion, yearly screening mammography beginning at age 40 is a statistically proven and effective imaging method of reducing mortality from breast cancer. Patients should speak to their physicians about any concerns or questions about when and how often they undergo screening with mammography. It is important to remember that most breast cancer occurs in women with no risk factors.

RSNA is a strong advocate for quality, safety and strict adherence to appropriateness criteria in medical imaging and radiation oncology.

Through its peer-reviewed journals and education programs, RSNA continually informs radiologists, medical physicists, radiation oncologists and other radiology professionals of the latest technologies and research developments designed to optimize dose and improve patient safety.