

# In women under 50 years, mammography detects smaller tumors than clinical examination does

📌 New data reveals that mammographically identified tumors are smaller and less likely to have nodal involvement in women 40 to 49 years old

Janelle Yates, Senior Editor

In women younger than 50 years, screening mammography detects smaller tumors that have less nodal involvement than the tumors detected by clinical exam. That's a principal finding of a study presented this spring at the annual meeting of the American Society of Breast Surgeons in Washington, DC. The study also found that women whose tumors were identified through mammography generally had better outcomes after treatment than women whose tumors were found through a clinical exam, said researcher Paul Dale, MD, chief of surgical oncology at the Ellis Fischel Cancer Center at the University of Missouri School of Medicine in Columbia, Missouri.

The 10-year retrospective study, conducted at the University of Missouri, involved patients treated for breast cancer at the Ellis Fischel Cancer Center between 1998 and 2008. Of these 1,581 women, 20% were 40 to 49 years old. Forty-seven percent of these patients were given a diagnosis on the basis of mammography, and 53% were given a diagnosis on the basis of a clinical exam or other non-mammographic method.

In the group whose diagnosis was based on mammography, the mean tumor diameter was 20 mm; tumors identified by non-mammographic methods, on the other hand, had a mean diameter of 30 mm. This

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## Survey: 57% of women believe that mammographic screening should start at 40

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A new Harris Interactive/HealthDay poll found that women in their 40s want their mammograms, regardless of the latest USPSTF guidelines, which recommend against routine screening mammography in this population. In fact, **two thirds of women polled were unaware of the task force's recommendation.**

About 57% of women surveyed believe screening mammography should start at age 40, according to the poll of 1,083 US women 18 years and older. Just 12% thought 50 years was the right age to begin imaging.

When women were apprised of the USPSTF guidelines, 45% of them said the task force had pushed back the recommended age to begin screening to reduce health-care costs and avoid administering unnecessary tests. Thirty percent believed the task force made the recommendation because excessive screening produces too many so-called false-positive results, leading women to think they had cancer when they did not.

New recommendations notwithstanding, many women in their 40s are still getting mammograms—77% of women in their 40s have already had at least one mammogram, and 64% report annual screening, the poll found.

The American Cancer Society continues to recommend annual mammograms for women starting at 40 years.

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tumor size differential is “highly significant,” said Dr. Dale.

The study also found that lymph-node involvement among women whose diagnosis was based on non-mammographic methods was about twice as common as that of patients whose tumors were found by mammography.

Five-year disease-free survival was estimated to be 94% for the women receiving mammograms; 78%, for those who did not.

“This study found that 20% of women diagnosed with breast cancer in our institution are under age 50, and almost half of their tumors were detected through mammography,” said Dr. Dale. Under the new US Preventive Services Task Force (USPSTF) guidelines, which recommend against routine mammography screening in women under 50, “younger breast cancer patients not undergoing screening and early detection may miss out on important therapy that could significantly impact their survival.”

Many of the studies the USPSTF evaluated before issuing the new guidelines were published before the availability of digital mammography, observed Dr. Dale. He noted that full-field digital mammography has recognized benefits over plain film exams in younger patients who have dense breast tissue that may be difficult to image.

“One concern underlying the new recommendations is that mammography in younger women is less effective and results in too many biopsies that are unnecessary and potentially traumatic for patients,” said Dr. Dale. “Perhaps today’s advancing imaging technologies, as well as less invasive biopsies, will help to eliminate those concerns.”

**FAST TRACK**

**5-year disease-free survival was about 94% for women whose tumors were identified by mammography, versus 78% for women whose tumors were identified by other methods**

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