Dear Alice,

If there is a strong family history of breast cancer in the family on the mother's side (including the mother), then how often should the daughters get mammograms and when should they start?

Answer

Dear Reader,

Family history can certainly impact a person's risk for breast cancer and knowing more about your own can help inform any appropriate preventative steps. As such, the American Cancer Society (ACS) recommends two key steps that can be taken by people with a family history of breast cancer similar to what you describe. Specifically, it's recommended that those at high-risk begin yearly mammogram screenings and an MRI at age 30. Those who are considered at high-risk for breast cancer include folks that:

- Have a lifetime breast cancer risk of 20 to 25 percent or greater based on family history risk assessments (more on that in a bit)
- Know they have the BRCA1 or BRCA2 gene mutation [2]
- Have a first-degree relative (i.e., parent, sibling, or child) with a BRCA1 or BRCA2 gene mutation (and who have not had genetic testing themselves)
- Underwent radiation therapy between the ages of 10 and 30
- Have either Li-Fraumeni syndrome, Cowden syndrome, or Bannayan-Riley-Ruvalcaba syndrome (or have a first-degree relative with one of these conditions)

List adapted from the ACS [3].

Although the ACS recommends screening begin at age 30, there's limited evidence to inform the best age to start screening and therefore it may be helpful to speak with a health care provider to decide on a personalized plan. S/he may have access to risk-assessment tools, such as the Claus model [4], which can provide an approximate breast cancer risk based on family history. In addition, s/he can also help you decide if and when a mammogram and MRI are needed. If a mammogram and MRI are recommended, a provider will help determine when it would be a good idea to have an initial screening and how often to have additional screenings (such as every one to two years). The ACS also recommends that women in the...
20s and 30s have a regular clinical breast exam (CBE) performed during a medical visit at least once every three years, increasing to once a year starting at age 40.

In addition to knowing about appropriate clinical screenings, it may be worth performing regular breast self-exams (BSE), starting at age 20. It's a great way to get familiar with your breasts so you know what feels normal and will be more likely to notice if anything changes. To get started, it's recommended that the self-exam be done around the same time each month (for those who have a menstrual period, try performing BSE five to seven days after your period). It's good to note before you get started: even though a bump may be felt, not all changes in the breast are indicative of cancer.

If you have lingering questions or would like more information on screening guidelines or risk factors, the American Cancer Society [5] and the National Cancer Institute [6] are great resources.

Alice!
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