

2

The number of breast cancers discovered is higher among participants in the screening program than nonparticipants.

Out of every 1,000 participants 77 cancers are detected

Out of every 1,000 nonparticipants 54 cancers are detected

Effect of screening: 23 more cancers are detected, 10 of which are cases of overdiagnosis

Advantages

Better chances of cure

Because screening generally detects cancers at an early stage, they can be treated more effectively, thereby reducing the number of deaths due to breast cancer among participants.

Less chemotherapy

Because screening generally detects cancers at an early stage, they can be treated without using chemotherapy.

Disadvantage

Risk of overdiagnosis

Since screening can detect cancers in the early stages of development, some of them may be cases of overdiagnosis. This means these cancers would not have had consequences for the woman's life, because they would have remained inoffensive or would have developed very slowly. Since it is impossible to differentiate inoffensive cancers from deadly cancers, all cancers are treated. Thus, the woman may:

- receive needless treatments
- suffer the side effects of these treatments
- have to live with a cancer diagnosis
- have more frequent medical appointments to ensure the cancer does not reappear

3

The number of deaths due to breast cancer is lower among participants in the screening program than nonparticipants.

Out of every 1,000 participants 13 deaths are recorded

Out of every 1,000 nonparticipants 20 deaths are recorded

Effect of screening: 7 deaths are prevented

Limitations of mammography

- Mammography does not detect all cancers. Some are invisible on the mammogram or may develop between two mammograms.
- Having a screening mammogram does not guarantee that you will survive a breast cancer.
- Treatment does not always lead to survival, even when a cancer is detected at an early stage.
- Screening mammography does not prevent breast cancer from developing.

IT'S YOUR DECISION!

The decision whether or not to have a screening mammogram as part of the PQDCS is for you to take. The decision will depend on what is important for you and on your values. If, after reading this flyer, you still do not know whether you should take part in the program, we encourage you to talk about it with a doctor or a specialized nurse practitioner.

Visit the Portail santé mieux-être at sante.gouv.qc.ca/depistage-cancer-du-sein for more information about:

- the PQDCS and its services;
- mammography and follow-up;
- hints on preparing for a mammogram;
- additional tests and their results.

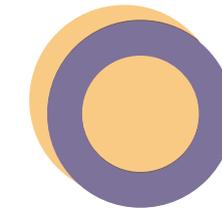
Call Services Québec

for more information on the PQDCS or to obtain the contact information of the screening centre nearest you:

- **Québec City region:**
418-644-4545
- **Montréal region:**
514-644-4545
- **Elsewhere in Québec:**
1-877-644-4545 (toll-free)
- **Persons with a hearing or speech impairment (TTY):**
1-800-361-9596 (toll-free)



PROGRAMME
QUÉBÉCOIS
DE DÉPISTAGE
DU CANCER
DU SEIN



**Taking part in the
QUÉBEC
BREAST
CANCER
SCREENING
PROGRAM:
It's Your Decision**

16-243-03A © Gouvernement du Québec 2016



BREAST CANCER IN QUÉBEC

There are over 6,000 new cases of breast cancer every year.

About 80% of these cases involve women aged 50 or over.

Approximately 1,350 women die from breast cancer every year.

INVITATION TO THE PROGRAM

If you are a woman aged between 50 and 69, you will receive, or you may already have received, a letter by mail inviting you to take part in the Québec Breast Cancer Screening Program (PQDCS) of the Ministère de la Santé et des Services sociaux. In this program, you are invited to have a mammography examination (mammogram) every two years between the ages of 50 and 69.

The goal of the program is to reduce breast cancer mortality in Québec. Your participation is voluntary. Before making the decision to take part or not in the program, take the time to find out more about the subject. You must be prepared for any possible result or situation. This flyer is designed to help you consider the matter and come to an informed decision.

Services offered

- Invitation by personalized letter to women aged between 50 and 69.
- Free screening mammogram.
- Medical prescription not required to have a mammogram.
- Result letter sent to your home and to your doctor's office after a mammogram.
- Medical follow-up assured, even if you do not have a family doctor.

OBSERVED CHANGES IN YOUR BREASTS

Whether or not you decide to take part in the screening program, **consult a doctor without delay if you notice any of the following changes in your breasts**, even if the result of a recent mammogram was normal.

Changes to a breast:

- a lump (mass) appears in a breast
- puckering of the skin on a breast (retraction)
- the skin of a breast becomes dimpled (like orange peel)
- the skin of a breast becomes red over at least one third of the breast

Changes to a nipple:

- a sudden discharge of liquid from the nipple
- a nipple becomes inverted (seems to be pulled inwards into the breast)
- a change appears on the skin of a nipple (looks like persistent eczema)

SCREENING MAMMOGRAPHY

A mammogram is an x-ray of the breasts. A screening mammogram is one given to somebody who has no symptoms of breast cancer. If you decide to have a screening mammogram, it is because you want to find out whether cancer is present in your breasts.

Mammography does not detect all breast cancers. This is why breast cancer is sometimes discovered a few months after a normal mammogram. Nevertheless, it remains the only effective method of reducing mortality due to breast cancer.

Main effects of screening mammography

Effects of screening mammography are variable. Some women have a screening mammogram every two years and show a normal result every time. For others, a screening mammogram may lead to further tests, which may cause anxiety and even unnecessary treatments. Among the minority of women who receive a cancer diagnosis, some will have their life saved thanks to the screening mammogram.

A comparison of women who take part in breast cancer screening by a mammography every two years over a 20-year period with women who do not take part reveals **three main effects**:

1 The number of women who are given at least one additional test is higher among participants in the screening program than nonparticipants.

Out of every 1,000 participants	453 women are given an additional test
Out of every 1,000 nonparticipants	297 women are given an additional test

Effect of screening: 156 more women are given an additional test

Advantage

Better diagnosis

In most cases, additional tests enable a precise diagnosis to be made. Some women feel reassured on being given an additional test. In 95% of cases, the result of this test is normal (no anomaly is detected).

Disadvantage

Waiting and worry

Having to undergo tests and wait for the results may lead to worry and anxiety.

The information provided in this flyer does not replace the recommendations of your doctor or your specialized nurse practitioner (SNP).