

New recommendations developed for breast cancer screening

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susceptibility from pathogenic mutation carrier status or with prior chest wall radiation should undergo annual magnetic resonance imaging at age 25 years and start annual mammography at age 30 years. Women with a predicted risk >20 percent or a strong family history should undergo annual [mammography](#) and have access to supplemental imaging starting at age 35 years.

"These new recommendations were ASBrS member driven and developed based on their unique, firsthand perspective on the disease and patient journey," Shawna Willey, M.D., chairman of the board for the ASBrS, said in a statement. "They represent a deep, passionate and scientifically-backed commitment to advocate for increased years of life over costs."

More information: [More Information](#)

(HealthDay)—New recommendations have been developed for breast cancer screening based on a life-years-gained model; the American Society of Breast Surgeons (ASBrS) official statement was published online May 3.

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The [guideline recommendations](#) state that women age >25 years should undergo formal risk assessment for breast cancer. Yearly screening mammography should be initiated at age 40 years among women with an average risk for [breast cancer](#). Women with higher-than-average risk should undergo yearly screening mammography and be offered yearly supplemental imaging, with initiation based on risk. When [life expectancy](#) is less than 10 years, screening mammography should cease.

The recommendations vary based on individual risk. Average-risk [women](#) should start annual mammography at age 40 years and should consider supplemental screening if they have increased breast density. Women with hereditary

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