

Mammogram

A mammogram is an x-ray of the internal breast tissues. Mammograms can detect some changes two years before they can be felt. However, mammography can miss ten to fifteen percent of lumps you can feel.

When Going for Your Mammogram:

- Schedule your mammogram at the end of your period. If you are taking supplemental estrogen and you cycle off, schedule the mammogram on the day you resume your medication.
- Do not wear deodorant, perfume or powders on your upper body. They may show up as a shadow or debris on the film.
- If a past mammogram was uncomfortable, stop caffeine intake several weeks prior to exam to reduce discomfort. You may also take ibuprofen several days prior to your exam.
- If you change facilities for your mammogram, obtain your old film for comparison prior to your scheduled exam.

American Cancer Society Screening Guidelines:

- **35-40:** Your healthcare provider may recommend a baseline screening mammogram.
- **40-up:** Yearly mammogram.
- **High Risk:** Your healthcare provider may recommend a mammogram at an earlier age or more frequently.

Every Woman's Best Chance Against Breast Cancer Includes:

- Proficient breast self-exam
- Clinical breast exam by a healthcare provider
- Mammography on the recommended schedule

THE ART OF BREAST SELF-EXAM



"IT'S TIME TO PLACE YOURSELF IN TRAINED HANDS . . . YOUR OWN."

The Art of Breast Self-Exam is designed to teach you how to best protect your breast health. Studies show that women find ninety percent of breast lumps that can be felt. Despite that fact, only a small percentage of women practice regular breast self-exam, a self-care skill that requires only minutes a month and could possibly save their lives.

Breast cancer is the number one female cancer, afflicting one out of eight women over a lifetime. At present, there is no effective method to predict which women will have breast cancer. Because of this, breast cancer becomes every woman's enemy, and every woman needs to learn the most effective methods of protecting her breast health and future. The best protection is an informed woman who is familiar with her own breasts. She should practice regular breast self-exam (BSE), learn signs and symptoms that a healthcare provider should evaluate, have regular clinical breast exams (CBE) and go for mammograms on the recommended schedule. The good news is that if breast cancer is detected early, it has a far greater chance of being treated successfully. The real enemy is not breast cancer, but the late detection of it.

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Understanding Your Breasts

Most women think their breasts should feel soft and spongy when examined. However, most breasts have a normal pattern of lumpiness caused by the complex glandular structure of the breasts and the effects female hormones have on these milk glands. This normal pattern of lumpiness changes throughout the month. Before a menstrual period begins, female hormones cause the number of breast cells and the amount of fluid in the breasts to increase. The result is lumpy breasts, called **normal nodularity**. During these monthly changes, your breasts may feel swollen, tender or even slightly painful. These symptoms are all normal. Your goal is to learn to identify your pattern of normal nodular breast tissue and report any unusual changes or lumps to your healthcare provider.

When to Check Your Breasts

Check your breasts when they are least filled with fluid:

- Menstruating women should check their breasts the last day of their menstrual period or several days past.
- Menopausal or pregnant women should select the same day of the month.
- Women on hormonal therapies who cycle off their medication need to perform their exam the day they resume their medication. If medication is not stopped, select the same day of each month.
- Breastfeeding mothers should examine their breasts when all milk has been expressed. Sometimes only one breast can be checked at a time because all the milk cannot be expressed completely from both breasts.

Clinical Exams

A yearly breast exam by a healthcare provider is necessary to supplement your monthly breast self-exam. Schedule your exam when your breasts are least tender and least filled with fluid—within several days after the end of your monthly period.

What To Do If You Find a Lump or Change During Your Exam:

- If you feel or see a change in your breast, stop and examine the opposite breast in the same area. If you find something similar, it is probably a normal hormonal change.
- Write down what you found and where you found it.
- Wait for your next period. If the lump or change does not become softer, smaller, or disappear, contact your healthcare provider.
- If the lump found is stony hard, contact your healthcare provider immediately.
- If you see a change during your visual exam, but cannot feel a lump, contact your healthcare provider for evaluation.

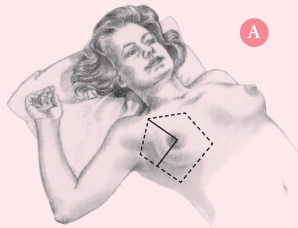
The MammaCare® Method

The MammaCare® method described in this brochure was developed by the University of Florida and funded by the National Cancer Institute and is now known to be the most thorough, systematic, and efficient method of examining breast tissue.

USING THE MAMMA CARE® METHOD to Examine Your Breasts

Area to be Examined —

The breast area extends beyond the breast mound. It covers a large portion of the chest wall. Fifty percent of cancers occur in the upper, outer quadrant of the breast, and eighteen percent occur under the nipple. Examine these areas carefully.



Finger Positions —

Use the flat pads of your **three** middle fingers, from the first joint down to the tips. Place flat pads of fingers in a bowing position on the breast tissue.

Flat Pads



Bowing Position

Pressures —

Three levels of pressure will be used when examining each spot on your breast:

Light — barely moves the top layer of skin

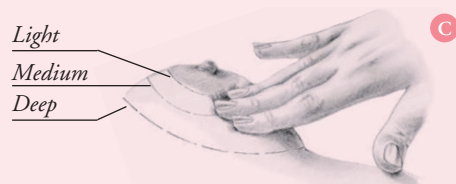
Medium — goes halfway through the thickness of the breast

Deep — goes to the base of the breast next to the ribs

Light

Medium

Deep

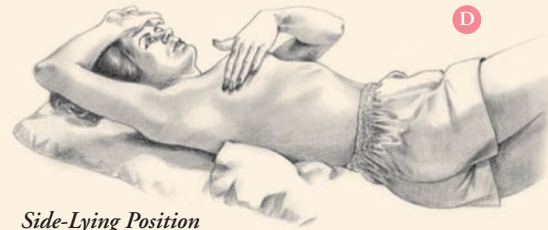


Do not lift your hand or release the pressure from your breast as you make these three circles.

Using the three levels of pressure allows you to carefully examine the full thickness of the breast and not displace small lumps into fibrous tissues or into your rib area. Pressures do not injure your breast tissue.

[STEP ONE] Side-Lying Position

- Lie down on the bed, roll onto your left side to examine your right breast (D).
- Pull your knees up slightly, rotate your right shoulder to the flat of the bed.
- Place your right hand, palm up, on your forehead. Your nipple should point directly toward the ceiling. Use your left hand to examine your right breast. You may place a small pillow under the arch of the back to increase comfort.

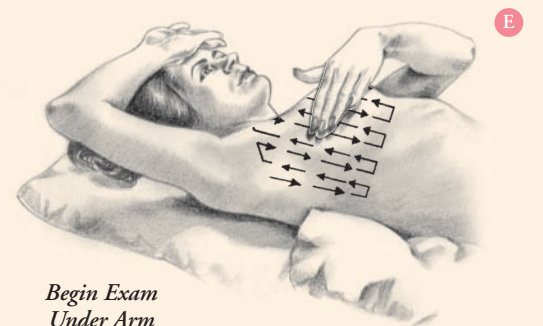


Side-Lying Position

This position allows you to examine the outer half of the breast by spreading out the tissue. Fifty percent of all cancers occur in the area of the breast which extends from the nipple to underneath the arm. The side-lying position prevents breast tissue from falling into the underarm area.

[STEP TWO] Side-Lying Exam

- Using the flat pads of your three middle fingers in the bowing position (B), begin your exam under the arm. Make dime-sized circles using the three levels of pressure in each spot (C), following the up and down pattern of search (E). Do not release the pressure as you spiral downward. Ten to sixteen vertical strips will be needed. Continue the pattern of search until you reach your nipple.



Begin Exam Under Arm

[STEP THREE] Back-Lying Exam

- When you reach your nipple, roll onto your back; remove your hand from your forehead and place this arm alongside your body on the bed (F).
- Continue the exam of the nipple using the same pressures (C). Do not squeeze the nipple.



Back-Lying Position

Report any discharge from your nipple not associated with the onset of a menstrual period, hormonal medications, sexual stimulation or excessive manipulation of the breasts. A bloody discharge or a discharge from only one breast needs to be reported promptly.

- Examine the remaining breast tissue with the same pressures and pattern of search until you reach the breastbone.

Repeat steps 1-3, examining the opposite breast.

[STEP FOUR] Lymph Node Exam

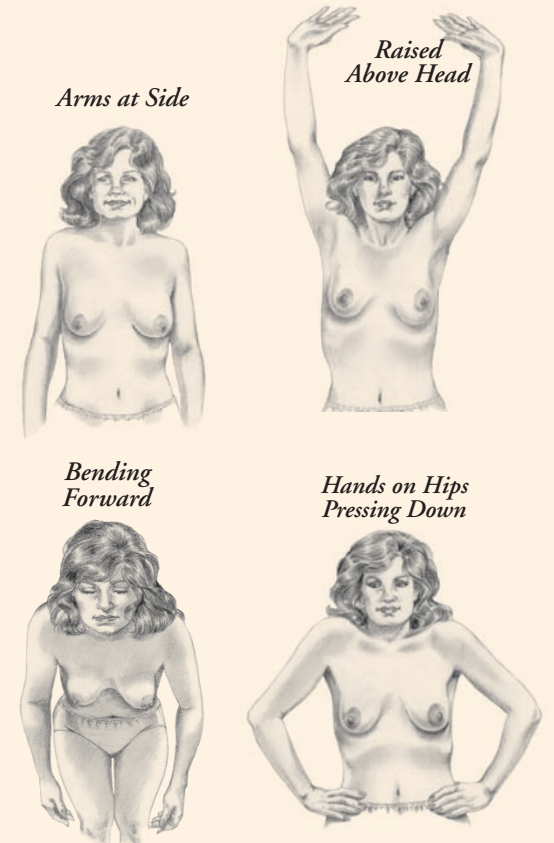
- Make a row of circles **above** and **below** your collarbone on each side (G).
- While standing, check the depressed area near your neck by rolling your shoulders upward and turning your face toward the side you are examining. With the opposite hand, place your fingers in the formed depression and check carefully.
- Feel under each arm for axillary lymph node enlargement.

Lymph nodes are soft to hard, pea-like areas in the lymphatic system. They may become enlarged from cancer or infection. Enlarged lymph nodes do not always indicate cancer, but you should report any lymph node enlargement to your healthcare provider.



[STEP FIVE] Visual Exam

A visual inspection of your breasts is important. Some cancers do not form a hard lump. The first indication of cancer may be one you can see and not feel. Looking into a mirror, closely examine your breasts in these four positions:



In each position turn from side-to-side and look at your breasts for changes in the following:

- **Shape** of the breast, nipple and areola. Compare one breast to the other. One breast may normally be larger than the other, but sudden changes in size should not occur.
- **Skin** for any rash, redness, orange-peel skin, dimpling (pulling in), bulging out, moles or any type of sore.
- **Nipples** for any crusty material caused by a discharge, rash around the nipple or inversion (pulling in).
- **Vein Patterns** on the chest for a noticeable increase in size or number of veins compared to other breast.