

BREAST CANCER AWARENESS MONTH OCTOBER 2024 | QUICK FACTS

- The American Cancer Society estimates 2,880 Nevadans will be diagnosed with breast cancer in 2024 and 430 will die of the disease.
- Breast cancer is the second most commonly diagnosed cancer in Nevada, only behind skin cancers.
- Overall, 91% of people diagnosed with breast cancer have a five-year relative survival rate when compared to people who do not have cancer. When found early—the cancer has not spread outside the breast—the survival rate goes up to 99%.
- Black women are more at risk of dying from breast cancer than any other race. There are many factors leading to this, including being genetically at higher risk for more aggressive breast cancer types and facing racial and economic barriers to accessing quality care and resources. Black women are also more likely to be diagnosed at a younger age, leading to recommendations that at age 25 they begin discussing with a healthcare provider their personal risk for breast cancer and when to begin screening.

SCREENING / EARLY DETECTION

- Those at average risk should begin screening for breast cancer with mammogram annually starting at age 40. They should discuss with their healthcare provider family history and any other risk factors that may require screening to begin before age 40.
 - Risk factors for breast cancer include a family or personal history of the disease, genetic factors, and being of a certain ethnicity, such as Eastern European, to name a few.
- In 2022, the most recent year for which data is available, 62.7% of women in Nevada aged 40+ said they had been screened for breast cancer with mammogram within the past two years. That's a 7 percentage point drop from 2020, reflecting the COVID-19 pandemic's effect on screening.
- People who have been notified that they have dense breasts—more fibrous and glandular tissue in the breasts—have a higher risk of breast cancer than those who do not have dense breasts. These denser tissues can make cancers harder to see on a mammogram. Mammograms are still necessary, but a provider may order additional screening with ultrasound or breast MRI to get additional views of the breast.
- People with breasts should know their normal, noting any changes. Signs and symptoms of breast cancer to discuss with a healthcare provider include:
 - o A lump or pain in the breast
 - Thickening or swelling in part of the breast
 - Irritation or dimpling of the breast skin
 - Redness or flaky skin on the breast
 - Pulling in of the nipple or pain in the nipple area
 - Fluid other than breast milk from the nipple, especially blood
 - A change in the size and shape of breast

FREE OR LOW-COST MAMMOGRAMS

- The <u>Women's Health Connection</u> (WHC) program provides breast and cervical cancer screening and diagnostic services to Nevadans 21-64 who are low-income women and uninsured or underinsured. If breast or cervical cancer is diagnosed, Women's Health Connection patients may receive treatment through Medicaid. <u>Click</u> or call Access to Healthcare to learn more at 844-469-4934.
- Nevada Health Centers operates the <u>Mammovan</u> a mobile mammography van that travels to rural areas of our state. The van serves women with or without insurance. To make an appointment, visit their <u>website</u> or call <u>877-581-6266</u>, option 1.
- Engelstad Foundation R.E.D Rose Program at Dignity Health offers mammograms for free with no need for medical insurance for people in the Las Vegas area. Call 702-620-7858 to schedule.

USING FACTS TO CORRECT SOME COMMON MYTHS

- You do not need a doctor's referral to get a mammogram. If you are 40 or older you can schedule a mammogram without a doctor's referral.
- Most people diagnosed with breast cancer do not have a family history. Only about 10-15% of people diagnosed with breast cancer have a family history of the disease. Those with a family history should talk to their doctor about their risk starting at age 25 and make a plan for when to begin screening.
- Most people who get a screening mammogram won't be diagnosed with cancer. Only about 2 to 4 screening mammograms out of 1,000 lead to a breast cancer diagnosis.
- Mammograms use very small doses of radiation and the risk of harm is extremely low. Advances in technology have made mammograms more accurate with lower doses of radiation, making the benefits far outweigh the risks. There is also no danger in compressing the breast during the mammogram, and an existing cancer will not spread because of the compression.
- The biggest risk for getting breast cancer is having breasts. Breast cancer isn't a "white woman's disease," and doesn't only affect people with a family history. Anyone can be diagnosed with breast cancer—even men! Some other things that <u>do not or have not been proven</u> to cause breast cancer include:
 - Breast injury, squeezing or pinching the breasts
 - o Bigger breasts
 - o Consuming sugar
 - o Carrying a cell phone in your bra
 - Working night shifts
 - o Bras with underwire
 - Antiperspirants and deodorants
 - Nipple piercings
 - o In vitro fertilization or abortion
 - Exposure to chemicals in the environment
- Annual breast cancer screening is for everyone with breasts. Getting a mammogram isn't about feeling sick or unhealthy. It's a regular part of health care to find cancers that can't yet be seen or felt, which is when the cancer is easiest to treat.