



My to-do list

- ☒ call electrician
- ☒ fill in tax return
- ☒ buy dog food
- ☒ mammography
- ☐ repair bike
- ☐ new identity card

PROGRAMME MAMMOGRAPHIE

I'm between 45-74 years old!

I do participate in the "Programme Mammographie".

PROGRAMME MAMMOGRAPHIE

Breast cancer: screening increases the chances of recovery

You are regularly invited to undergo breast cancer screening: but what should you do? the decision is yours!

It is up to each woman to decide whether to participate in screening after having been duly informed about the benefits and drawbacks.

This booklet is designed to inform you about the benefits and drawbacks of organised

screening so that you can make an informed decision about participating in the breast cancer screening programme.

Please take the time to read it carefully.

If you have any further questions, the staff at the Coordination Centre or your doctor will give you more information.

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**Breast cancer:
screening increases the chances
of recovery.**

WHAT IS BREAST CANCER?

The disease has its origin in certain breast tissue cells: they multiply in an abnormal way until they form a mass - a malignant tumour - which can spread into the surrounding tissue. From this initial tumour, malignant cells can spread throughout the entire body. This is called metastasis, and mainly occurs in the bones and liver. Some masses are not cancerous, they are called "benign tumours".

What does it feel like?

Symptoms can be: a palpable 'lump' in the breast, a change in the shape or size of the breast, discharge coming from the nipples, or inflammation of the breast.

In most cases, at the very earliest stage, there are no symptoms. However, the chances of survival and recovery are significantly higher when breast cancer is detected at an early stage and treated appropriately.

It is precisely thanks to regular breast examinations carried out as part of a screening programme that many women affected by this disease can be successfully treated.



WHAT CAUSES THIS TYPE OF CANCER?

What are the figures in Luxembourg?

In most cases, there is no specific cause.

However, there are certain factors that can lead to breast cancer. Currently, the most commonly known factors are: age, obesity, a sedentary lifestyle, alcohol consumption and hormone replacement therapy following the menopause.

5 to 10% of breast cancer cases are of genetic origin: several women (and men) from the same family will develop breast and/or ovarian cancer.

In Luxembourg, breast cancer is the most common cancer in women and the main cause of death in women aged between 45 and 74. Every year, around 500 women are diagnosed with breast cancer and almost 100 die from it.

More than half of all breast cancers affect women between the ages of 45 and 74, which is why the screening programme focuses on this age group.

What are the survival rates after breast cancer?

Effective treatments exist for women with breast cancer: surgery, radiotherapy and drug treatments.

The chances of success are higher when the tumour is small and has not yet spread elsewhere in the body (early stage).

Screening programmes therefore aim to detect cancers at the earliest possible stage.



WHAT IS ORGANISED SCREENING?

“Screening” aims to detect the signs of a disease - in this case breast cancer - at an early stage, before symptoms appear. The aim is to treat the disease at an early stage, to avoid aggressive treatment, and to reduce the number of people dying from cancer.

“Organised” means that it follows strict standards which are applied to a large number of people. For breast cancer screening, this means offering a mammogram every two years to women aged between 45 and 74.

What is recommended in addition to the “Programme Mammographie”?

An annual visit to the gynaecologist is strongly recommended.

It is also recommended that you perform a breast self-examination once a month.

Some cancers are not visible on a mammogram or may progress rapidly, therefore it is important to keep an eye on the appearance of your breasts and to consult a doctor immediately if you notice any changes.



THE "PROGRAMME MAMMOGRAPHIE": WHAT IS IT ABOUT?

Who is it for?

Women aged between 45 and 74, affiliated to the CNS - d'Gesondheetskeess, and resident in Luxembourg, are invited to have a mammography screening every two years.

Non-resident women affiliated to the CNS - d'Gesondheetskeess are entitled to participate in the "Programme Mammographie". This is a proactive initiative to be repeated every 23 months. An invitation can be requested by simply calling the Coordination Centre.

The mammograms must be performed in the Grand Duchy of Luxembourg and the results of the screening must be sent to a doctor practising in Luxembourg. A doctor practising abroad may also receive a copy of the result if desired.

When?

The reference date for sending the first invitation is based on the year and month of birth. Afterwards, the participant receives a new invitation 23 months after the date of the last screening or the unused invitation.

The invitation is sent by post to your address, with only your birth name on it. It is valid for 2 years.

Is it mandatory?

No, all women are free to decide whether to participate in the programme or not.

Is it expensive?

Within the framework of the "Programme Mammographie", the screening is completely covered by the CNS.

In case of an abnormal mammogram :

- Your doctor will give you a voucher (E20) to sign to ensure that the consultation is free of charge (100% covered by the CNS), during which he or she will explain the result and the steps to be taken, examine you and prescribe the additional tests to be carried out.
- The additional examinations that need to be carried out will be invoiced by the hospital or by the doctor. You will be reimbursed by your health insurance fund at the applicable rates.

A screening examination does not prevent the development of breast cancer. To be effective, it is important to have it repeated regularly.

Participating in the "Programme Mammographie", guarantees you that

- Your mammograms will be examined by an accredited radiologist at the radiology centre and reviewed by a 2nd radiologist at the Health Directorate ("double reading").
- If the interpretation of both radiologists



is different, a “third reading” is carried out during a discussion between one of the first readers and one of the second readers.

- These readings are performed as soon as possible..
- This “double reading” method is important because it makes it possible to discover any anomaly not seen by one of the radiologists (23% of cancers are caught with this method) and to reduce unnecessary additional examinations.
- A medical physics expert regularly tests the equipment in accredited departments and checks its operation in accordance with European recommendations.
- The image quality is continuously checked by the radiologists.
- All staff involved in the “Programme Mammographie” are specially and regularly trained.

What does a mammogram screening consist of?

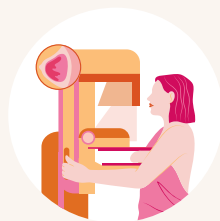
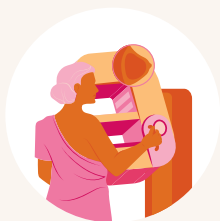
A mammogram is an X-ray imaging examination of the breast and is currently the best method of detecting breast cancer. A screening can detect small lesions that cannot be felt by palpation.

Mammographic images provide detailed images of the breast from different angles.

For this reason, the Medical Technician Assistant (MTA) takes 4 images:

- 2 of each breast

1 oblique
1 frontal

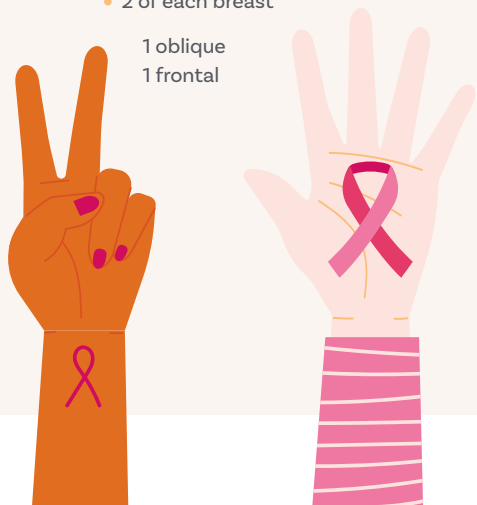


This involves compressing the breast between two plates, so that it is spread out and held. This compression is important because it allows for readable images while minimising the amount of radiation used. The procedure can cause momentary discomfort.

If you have not reached the menopause, it is best to choose an appointment at the start of your monthly cycle, i.e. after your menstrual period, as your breasts will be less sensitive during the examination.

What happens during the session?

- The screening takes a few minutes. However, you should allow 20 to 30 minutes in total.
- During this time, you will be personally attended to by the MTA, who will also carry out the screening itself.
- To perform the screening, you will need to undress fully to the waist.
- Each of your breasts is held between two plates for a few seconds. This may cause some discomfort, but will not persist.
- People with reduced mobility can undergo the mammogram while sitting down.



WHAT IS THE DIFFERENCE BETWEEN DIAGNOSTIC AND SCREENING MAMMOGRAMS?

Diagnostic mammogram

Diagnostic mammograms are performed on women who present symptoms: in the case of a palpable anomaly or a complaint from the patient, the doctor must write a prescription to explain the situation to the radiologist. This mammogram can be performed at any age, but before the age of 35, mammograms should only be performed if the radiologist considers them absolutely necessary.

Screening mammograms

Screening mammograms are intended for women who do not show clinical signs of breast cancer. The Ministry of Health and Social Security applies the recommendations of European experts by recommending women from the age of 45 onwards to have a mammogram every two years as part of an organised programme; the Luxembourg national programme meets quality criteria relating to the mammography equipment, medical staff and doctors.

Before the age of 45 and after the age of 74,

screening is possible, with a medical prescription: the doctor assesses the need on a case-by-case basis.

What are the steps to follow?

- As soon as you receive your invitation, make an appointment at one of the screening centres approved by the Ministry of Health and Social Security.
- Make an appointment for a mammogram in one of the approved radiology centres of your choice.
- Choose the date: if you are still healthy, make the appointment in the days following the start of your period, when your breasts are less sensitive.
- Remember to specify when you make the appointment that it is a mammogram as part of the organised "Programme Mamographie".
- Make sure that only the first appointment you make is valid and allows you to have your examination.
- The approved centres are located in the 5 hospitals.
- Your invitation is valid for 2 years.



LIST OF APPROVED RADIOLOGY CENTRES

Name	City	Telephone	Website
CHdN	Ettelbruck	8166-8166	 rdv.chdn.lu
CHEM	Esch-sur-Alzette	5711-79300	 chem.lu
CHL - Maternité	Luxembourg	4411-6424	 maternite.chl.lu
HRS- Hôpital Kirchberg	Luxembourg	286918	 hopitauxschuman.lu
HRS- ZithaKlinik	Luxembourg	286918	

On the day of the examination

- Have your invitation, the voucher, your social security card (CNS number) and your identity documents ready.
- Wear clothes that are easy to remove.
- Do not apply deodorant, powder, body lotion or perfume on your breasts and underarms in order not to compromise the image quality.
- Do not wear jewellery on your upper body (chains, necklaces, piercings etc.).
- Bring the contact details of the doctor who

will receive the final report of your screening. A doctor practising abroad will be able to provide the report, but you will need to give the name and exact address of the doctor.

- If you have already had a screening abroad and have recent mammogram images or CDs, it is important to bring them with you. The radiologist will be able to compare the two mammograms and identify any changes more rapidly. All screenings taken in Luxembourg are transferable from one hospital to another.

HOW AND WHEN WILL YOU BE INFORMED OF THE RESULT OF THE EXAMINATION?

A letter is always sent to you and your doctor a few days after the screening. This time is necessary to allow the two radiologists to interpret your mammogram.

A second doctor can receive a copy of the letter if you wish.

Normal result:

- The mammogram shows no anomalies and that no further examination is required.
- An annual visit to your doctor is still recommended.
- Every two years until the age of 74, you will continue to be invited.

Abnormal result:

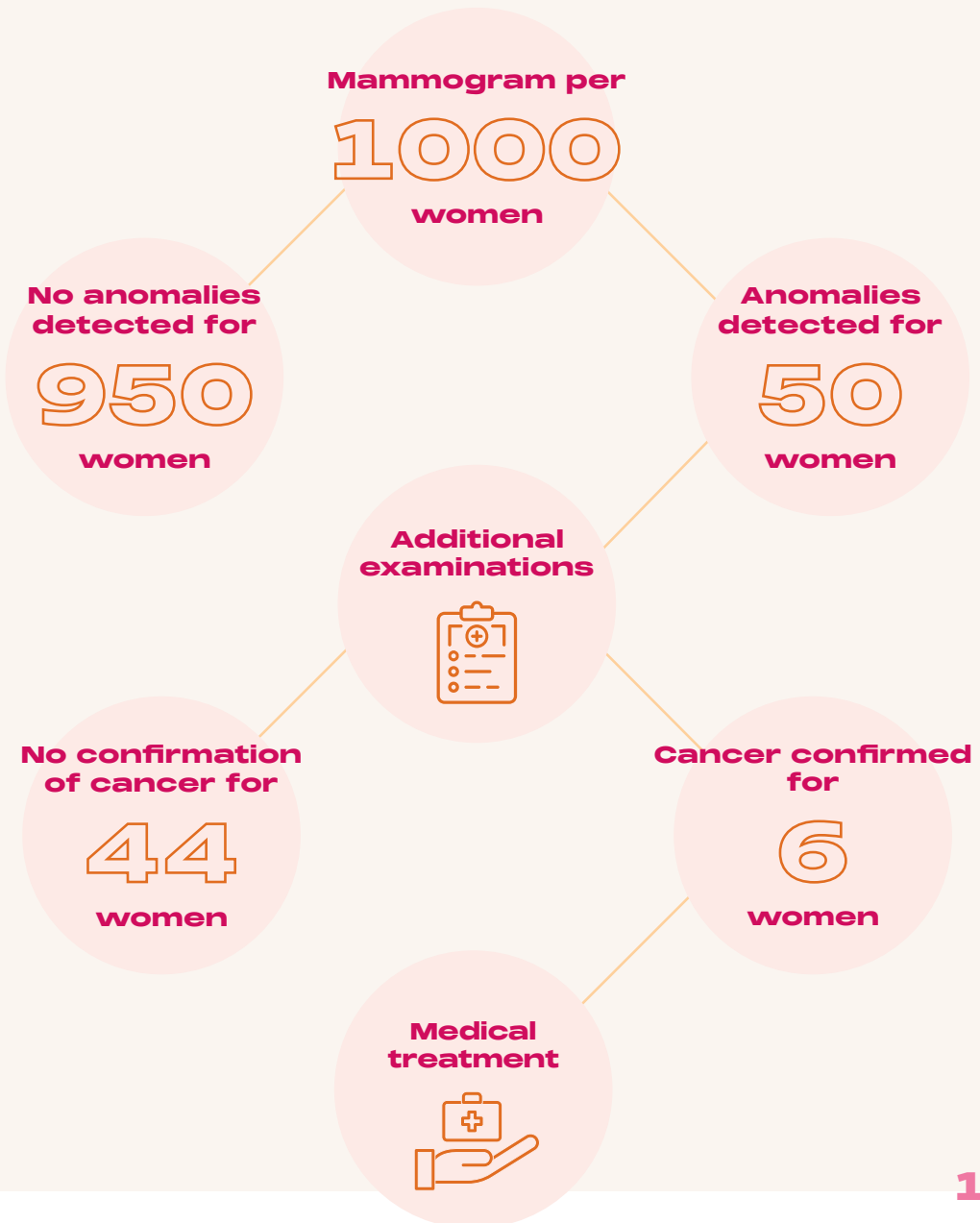
- An anomaly has been detected by the radiologists. This is the case in about 5% of the screenings carried out.
- In this case, additional examinations are necessary to clarify the anomaly. This usually involves additional mammograms,

ultrasound, MRI or even a biopsy. The conclusion is usually that the anomaly is benign, not cancerous, but it is always advisable to make sure.

- Your doctor will receive a recorded delivery letter with the result of the screening and a recommendation on the type of further tests to be carried out. Your doctor will explain the result to you, examine you and prescribe the additional tests that he or she considers most appropriate. This consultation is free of charge if you countersign the E20 form that was sent to your doctor.
- If no evidence of cancer is found, you will continue to be invited every two years until you are 74 years of age.
- If signs of cancer are found, you will be treated immediately.
- In the event of a further check-up, at your request, the doctor and radiologists can send you a copy of the results. They also inform the Coordination Centre by sending a copy of the results with their conclusions to the doctor in charge of the "Programme Mammographie". Indeed, in order to evaluate the quality of the screening, the Coordination Centre must be kept informed of the results of the complementary examinations. The Coordination Centre is bound by strict professional secrecy.



IN FIGURES



WHAT TO DO IF...

... you have noticed a change in your breasts?

Don't wait for the "Programme Mammographie" to send you an invitation to a screening, but go directly to your doctor.

... you have already had breast cancer?

You can take part in the "Programme Mammographie", but an annual personal follow-up is recommended. Ask your doctor for advice on which examinations are best suited to your situation. Inform the Coordination Centre if you no longer wish to be invited.

... you have a breast implant?

You can participate in the "Programme Mammographie".

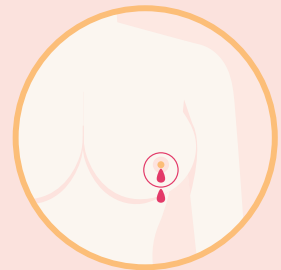
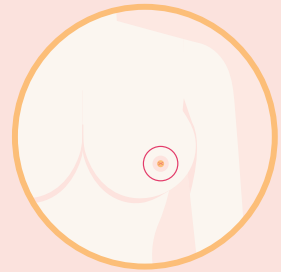
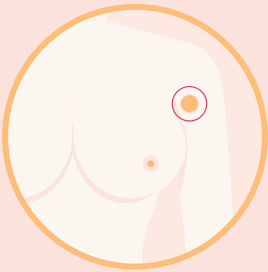
... you are under 45 or over 74 and are worried about breast cancer?

We advise you to speak to your doctor. In certain circumstances, screening may be recommended before the age of 45 and after the age of 74.

CHANGES THAT SHOULD MAKE YOU SEEK MEDICAL ATTENTION

The following signs should be reported to your doctor, but they do not necessarily mean that you have cancer:

- Knot, lump, or growth in the breast or underarm
- Change in the shape of the breast
- Retraction of the skin or nipple
- Redness, swelling or an orange peel appearance
- Discharge from the nipple



THE ADVANTAGES OF THE "PROGRAMME MAMMOGRAPHIE"

Early detection:

Screenings can detect small tumours that have not yet metastasized or spread. Early detection and treatment increases the chances of survival and cure.

Improved quality of life thanks to less burdensome and more effective treatment:

Early detection of the tumour usually allows for less aggressive treatment. For example, it may allow breast conservation during surgery and in some cases avoid the need for chemotherapy. This reduces side effects and maintains quality of life during and after the disease.

Contribution to the reduction of breast cancer mortality:

Early detection and advances in treatment contribute to a reduction in breast cancer mortality among women in the relevant age group.

Every year in Luxembourg, more than 90% of women who die from breast cancer are aged 45 and over. A woman who participates in a screening programme every two years from the age of 45 onwards sees her risk of dying from breast cancer decrease.

Reassurance through quality control in a programme:

Women benefit from an examination whose quality meets strict criteria, which are regularly monitored and attested.



DISADVANTAGES AND RISKS

Diagnosis and treatment of inert forms of cancer:

Some cancers progress so slowly that they do not affect the health of the person. In this case, death occurs from another cause and screening for this breast cancer is of little use.

In the current state of scientific knowledge, it is not possible to distinguish formally between cancers that will progress - which are in the majority - and those that will progress slowly or have no consequences for the health of the woman concerned. These cancers would not have been discovered in the absence of mammography: this is known as “over-diagnosis”.

Similarly, some of these poorly progressing cancers treated would not have needed it or would not have needed all the treatments administered: this is known as “over-treatment”.

A lot of research is trying to identify cancers that are likely to be slow-growing in order to propose treatments that are better adapted to each individual situation.

False positive result or false alarm:

When the mammogram reveals anomalies, further investigations are necessary to determine the nature of the anomalies. In most cases, it turns out that these changes are benign and that there is no breast cancer: this is known as a false positive result, which can be very anxiety provoking and unpleasant.

Interval cancer: the appearance of cancer before the date of the next screening:

Some cancers can be found within 2 years after a screening, which is considered to be normal. Some cancers are not visible on the screening or have not been detected by the radiologists.

These situations are however rare.

Based on numerous statistical studies, the frequency of one mammogram every two years has been determined to minimise both the number of interval cancers and the exposure of women to X-rays.

Therefore, we recommend that every woman, as well as doctors, remain alert to clinical changes that may occur, even after a normal screening.

Irradiation linked to mammograms and the risk of cancer:

The X-ray doses necessary for mammograms are very low, thanks to the use of high-quality radiological equipment and to legally prescribed controls. After the menopause, the risk of developing radiation-induced breast cancer from regular screenings is practically nil. This risk is slightly higher in younger women.



THE ESSENTIALS IN A NUTSHELL

The following is a summary of the essential points:

- Early stage cancer usually has no symptoms.
- Early detection followed by appropriate significantly increases the chances of survival and cure..
- From the age of 45, you will receive a personal invitation for a mammogram every two years from the Health Directorate in consultation with the CNS - d'Gesondheetskeess.
- During the screening, two images of each breast are taken by specially trained professionals.
- Each mammogram is evaluated independently by at least two radiologists.
- You and your doctor will receive the results of the examination in writing a few days later.
- Suspect images will be followed up with further investigations.

It is up to each woman to decide whether or not she wishes to participate in the screening procedure after having been fully informed about the benefits and drawbacks.

This brochure is intended to guide your decision on whether or not to participate in the breast screening programme.

If you have any further questions, the staff of the Coordination Centre (see contact details on page 2 of the brochure) or your doctor will be able to give you more information.



Addresses and further information

This information brochure is available in various languages and can be downloaded free of charge from www.sante.lu/mammo.

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