

New mammogram guidelines point to flaws in breast cancer screening

The GLP aggregated and excerpted this blog/article to reflect the diversity of news, opinion and analysis.

One of the most respected and influential groups in the continuing breast-[cancer](#) screening debate is now saying that women should begin [mammograms](#) later and have them less frequently than it had long advocated.

The [American Cancer Society](#), which has for years taken the most aggressive approach to screening, issued new guidelines recommending that women with an average risk of [breast cancer](#) start having [mammograms](#) at 45 and continue once a year until 54, then every other year for as long as they are healthy and likely to live another 10 years.

The organization also said it no longer recommended clinical breast exams, in which doctors or nurses feel for lumps, for women of any age who have had no symptoms of abnormality in the breasts.

Previously, the society recommended mammograms and clinical breast exams every year, starting at 40.

The changes reflect increasing evidence that mammography is imperfect, that it is less useful in younger women, and that it has serious drawbacks, like false-positive results that lead to additional testing, including biopsies.

But the organization's shift seems unlikely to settle the issue. Some other influential groups recommend earlier and more frequent screening than the [cancer](#) society now does, and some recommend less, leaving women and their doctors to sort through the conflicting messages and to figure out what makes the most sense for their circumstances.

Read full, original post: [American Cancer Society, in a Shift, Recommends Fewer Mammograms](#)