

# Individualized breast cancer screening catches more cancer

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A breast cancer screening program tailored to participants' individual risk profiles has a higher-than-expected breast cancer detection rate in 40- to 49-year old women, according to a pilot study published in the August issue of *Radiology*.

(HealthDay)—A breast cancer screening program tailored to participants' individual risk profiles has a higher-than-expected breast cancer detection rate in 40- to 49-year old women, according to a pilot study published in the August issue of *Radiology*.

Elena Venturini, M.D., from San Raffaele Scientific Institute in Milan, invited 3,017 40- to 49-year-old women to participate in a breast cancer screening program tailored to lifetime risk (Gail test) and mammographic density (according to Breast Imaging Reporting and Data Systems [BI-RADS] criteria) with supplemental ultrasonography (US) or [magnetic resonance imaging](#) (MRI) and bilateral two-view microdose mammography.

The researchers found that among the 1,666 participating women, average lifetime risk of breast cancer was 11.6 percent, with nine women having a high risk of breast cancer and 917 women (55.0 percent) having a high-density score (BI-RADS density category 3 or 4). For screening examinations, the average glandular dose was 1.49 mGy. In 835 participants (50.1 percent), screening US was performed, mostly due to high [breast density](#) (800 of 1,666 women). Nine women at high risk for breast cancer had screening MRI. Fourteen women were diagnosed with breast cancer (8.4 cases per 1,000 women). Microdose mammography was used to make 12 diagnoses, while two were made with supplemental US in [dense breasts](#) (2.4 cases per 1,000 women). All cases had surgery, with pathologic analysis diagnosing four ductal carcinomas in situ and 10 invasive carcinomas (five at stage I).

"A tailored [breast cancer screening](#) program in 40- to 49-year-old women yielded a greater-than-expected number of cancers, most of which were low-stage disease," the authors write.

**More information:** [Abstract](#)  
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