Summary of USPSTF Final Recommendation Screening for Breast Cancer

April 2024



What does the USPSTF recommend?



Women aged 40 to 74 years:

The USPSTF recommends biennial screening mammography.

Women 75 years or older:



The current evidence is insufficient to assess the balance of benefits and harms of screening mammography in women 75 years or older.

Women with dense breasts:



The current evidence is insufficient to assess the balance of benefits and harms of supplemental screening for breast cancer using breast ultrasonography or magnetic resonance imaging (MRI) in women identified to have dense breasts on an otherwise negative screening mammogram.



To whom do these recommendations apply?

These recommendations apply to cisgender women and all other persons assigned female at birth (including transgender men and nonbinary persons) 40 years or older at average risk of breast cancer. They also apply to women who have factors associated with an increased risk of breast cancer, such as a family history of breast cancer (ie, a first-degree relative with breast cancer) or having dense breasts.

These recommendations do not apply to persons who have a genetic marker or syndrome associated with a high risk of breast cancer (eg, *BRCA1* or *BRCA2* genetic variation), a history of high-dose radiation therapy to the chest at a **j** young age, or previous breast cancer or a high-risk breast lesion on previous biopsies.



What's new?

- For the current recommendation, the USPSTF recommends biennial screening mammography for women aged 40 to 49 years, rather than individualizing the decision to undergo screening for women in this age group.
- This recommendation is otherwise consistent with the 2016 USPSTF recommendation on screening for breast cancer.



How to implement this recommendation?

- Screen women aged 40 to 74 with a mammogram every 2 years.
- Both digital mammography and digital breast tomosynthesis (or "3D mammography") are effective mammographic screening modalities.
- To achieve the benefit of screening and mitigate disparities in breast cancer mortality by race and ethnicity, it is important that all persons with abnormal screening mammography findings receive equitable and appropriate follow-up evaluation and additional testing, inclusive of indicated biopsies, and that all persons diagnosed with breast cancer receive effective treatment.
- There is insufficient evidence to recommend for or against screening for breast cancer in women 75 years or older.
- There is insufficient evidence to recommend for or against supplemental screening using breast ultrasonography or MRI in women who have dense breasts.
- Clinicians should use their clinical judgment regarding whether to screen for breast cancer in women 75 years or older and regarding whether to use supplemental screening in women who have dense breasts and an otherwise normal mammogram.





What additional information should clinicians know about this recommendation?

There are pronounced inequities in breast cancer stage at diagnosis, subtype, and mortality. Black women are more likely to be diagnosed with breast cancer beyond stage 1, are more likely to be diagnosed with triple-negative cancers (ie, ER-, PR-, and HER2-), which are more aggressive tumors, and are approximately 40% more likely to die of breast cancer compared with White women.



Why is this recommendation and topic important?

Breast cancer is the second most common cancer and the second most common cause of cancer death among US women. In 2023, an estimated 43,170 women died of breast cancer.



What are other relevant USPSTF recommendations?

The USPSTF has issued recommendations on the use of medications to reduce women's risk for breast cancer, as well as risk assessment, genetic counseling, and genetic testing for *BRCA2*-related cancer.



What are additional tools and resources?

- The National Cancer Institute has information on breast cancer screening for health care professionals and for patients.
- The Centers for Disease Control and Prevention has information on breast cancer screening.



Where to read the full recommendation statement?

• Visit the USPSTF website or the *JAMA* website to read the full recommendation statement. This includes more details on the rationale of the recommendation, including benefits and harms; supporting evidence; and recommendations of others.