

Health Bulletin

NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE

#68 in a series of Health Bulletins on issues of pressing interest to all New Yorkers



Get Checked for Breast Cancer

If you're 40 or older, a mammogram could save your life

- Available in Spanish and Chinese: call 311 or visit nyc.gov/health
- Disponible en español: llame al 311 o visite nyc.gov/health
- 需要中文服務 - 可電 311 或造訪網址: nyc.gov/health



To beat breast cancer, find it early.

- Breast cancer kills nearly 1,200 New York City women every year.
- One woman in 8 will develop breast cancer in her lifetime.
- White women are more likely to be diagnosed with breast cancer, but African-American women are more likely to die from it.
- All women have an excellent chance of cure when breast cancer is found early.
 - When cancer is discovered before it spreads beyond the breast, almost all women (98%) survive at least 5 years.
 - But when breast cancer is found late, after it spreads to other organs, only about 1 in 4 women lives 5 years or more.

Mammograms are the key to early detection.

- Mammograms are X-ray pictures of the breast.
- Mammograms can spot tumors long before lumps can be felt in the breast.
- Most women 40 and older should get a mammogram every 1 to 2 years.



What is a mammogram like?

- The technician (most are women and you can request a woman) will help you position your breasts, one at a time, on the X-ray machine.
- To get a good picture, the machine squeezes the breast tightly. You may feel an uncomfortable pinch, but the pain usually stops as soon as the picture is taken.
- Sometimes the technician takes more X-rays to get a clearer image. That does not necessarily mean there is a problem.

What does the doctor look for?

- The doctor (a radiologist) searches the X-ray pictures for any changes in breast tissue that might indicate a problem.
- Breast tissue changes over time, so it is important for the doctor to compare your results with your past mammograms. If you are going to a new doctor, bring your past pictures with you, if possible.
- If your mammogram shows areas that should be checked, your doctor may call you back for more X-rays or other imaging tests, such as a sonogram or MRI (magnetic resonance image).
- To check more closely for cancer, your doctor may recommend a biopsy.
 - During a biopsy, the doctor removes a tiny amount of breast tissue for examination.
 - Biopsies do not change the shape or look of the breast.

Be sure to get your results.

- If you don't get your results before you leave, ask how you'll receive them.
- By law, you must receive mammogram results by mail within 30 days. Make sure the doctor's office has your correct mailing address.
- If you don't receive your results, call the facility – DON'T assume everything is fine.

Never ignore abnormal results – take action NOW.

- Make sure you understand your results – ask questions.
- When more tests are recommended, get them right away, no matter how busy you are.
- If cancer is diagnosed, don't waste time. Get appropriate treatment NOW to live a long and healthy life.



Reduce your risk.

Health and lifestyle risks you can control:

- Limit alcohol to no more than one drink a day.
- Maintain a healthy weight and be physically active. Get at least 30 minutes of moderate exercise, such as a brisk walk, at least 5 times a week.
- If you smoke, *quit now*. (For free help, call 311 and ask for the Smokers' Quitline.)
- If you are on hormone replacement therapy, discuss the risks with your doctor.
- Breastfeed your baby.



Other risks for breast cancer:

Make sure your doctor knows if you:

- Have ever had breast cancer.
- Have a close relative – mother, sister or daughter – who has had breast cancer. (But most women who develop breast cancer have no family history of the disease.)
- Have a specific gene for breast cancer. (Specific genes account for only 5% to 10% of all cases.)

More Information and Help

- **New York State Department of Health:** www.health.state.ny.us/nysdoh/cancer/center/publication.htm
- **American Cancer Society:** www.cancer.org or call 800-227-2345
- **Centers for Disease Control and Prevention:** www.cdc.gov/cancer/nbccedp
- **National Cancer Institute** www.cancer.gov/cancertopics/types/breast
- **National Breast Cancer Coalition:** www.natlbcc.org
- **SHARE: Self-Help for Women with Breast or Ovarian Cancer:** www.sharecancersupport.org or call 866-891-2392 (toll-free hotline)
- **Gilda's Club:** www.gildasclubnyc.org or call 212-647-9700

Where to Get a Mammogram

- Ask your health care provider for a referral, or call 311.
- Mammograms are covered by health insurance plans, including private insurance, Medicaid and Medicare.
- If you are uninsured or underinsured, you may be eligible for free or low-cost screenings at many hospitals (call 311) or through New York State's Cancer Services Program (call 311 or 866-442-2262 for more information).



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Don't Let Any of These Worries Stop You From Getting a Mammogram!

"I don't have health insurance."

- You may be eligible for free or low-cost screenings. Call 311 for more information.

"I am an undocumented immigrant."

- Everyone has the right to good medical care, regardless of race/ethnicity, income or immigration status.
- Call 311 to see where to get a mammogram. No one will ask about your immigration status.

"I feel fine! No pain or other symptoms."

- Most breast cancers do not cause symptoms – you should still get checked.

"Mammograms are painful."

- You may feel an uncomfortable pinching sensation, but the pain is usually mild and passes quickly.
- The importance of finding breast cancer early is more than worth any brief discomfort.

"I heard mammograms are unsafe."

- Not true. Mammograms use very low levels of radiation and do not pose health risks.

"I don't need mammograms – I'm too old to get breast cancer now."

- You are never too old to get breast cancer. In fact, the older a woman is, the higher her risk.

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**DIAL
311**

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Telephone Interpretation in More Than 170 Languages