Why have a screening programme?
Breast cancer is common. Around 1 in 8 women in the Netherlands develop breast cancer at some time in their life. Most of these women are over 50. We invite all women aged 50 and over to attend screening. Women are invited to have a free examination every 2 years until they reach the age of 76. Each year at least 1 million women attend a screening session. Around 775 fewer women per year die of breast cancer as a result of the population screening programme.

The screening programme enables us to detect whether someone has breast cancer at an earlier stage. The examination involves taking x-rays of your breasts. X-ray examinations are currently the best available method of detecting breast cancer within the screening programme. For example, they allow us to see abnormalities before they can be felt and before they start producing symptoms.

40 out of every 1,000 women over 50 will die of breast cancer at some point in their life. Regular participation in the screening programme halves this risk of dying.

What causes breast cancer?
Breast cancer is a malignant growth in the breast. Over time it can spread to other sites and organs in the body. Breast cancer may grow slowly, but its spread can also be rapid. Although the cause of breast cancer is not fully understood, we do know that it is more commonly detected among women over 50.

What can be detected during screening?
The screening programme allows us to detect breast cancer early – even before you develop symptoms or can feel or see the cancer yourself. There is then a greater chance that treatment will be successful. This is an important advantage of the screening programme.
Breast cancer is nearly always treated. Around 1 in 10 of the women detected as having breast cancer by the screening programme have a cancer that is growing so slowly that it would not have affected them during their lifetime. Consequently, treatment would not have been necessary. This is a disadvantage of the screening programme. An overview of the programme’s advantages and disadvantages can be found at www.bevolkingsonderzoekborstkanker.nl.

Important: The information in this leaflet will help you make your choice. It is up to you to decide whether or not you wish to undergo the examination. You can also visit www.bevolkingsonderzoekborstkanker.nl for more information about the risk of developing breast cancer, the examination and the advantages and disadvantages of the screening programme. Here you will also find some key facts and myths about the programme.

What happens at the screening session?
You will visit a local screening centre. On arrival at the centre, you register at reception. When it is your turn, the radiographer asks you to go to the changing room and undress from the waist up. Then you go to the examination room. A specialist radiographer from the screening centre performs the examination.

The radiographer takes x-rays of your breasts. The radiographer positions your breast on a special plate, and then applies pressure with another plate. This is necessary in order to obtain a good image. Although this compression process may be painful, it does not harm your breast. It may also cause a little bruising. Tell the radiographer if the process hurts too much. The radiographer takes 2 x-rays of each breast. The x-ray procedure takes around 5 minutes.
After the examination you get dressed and return to the waiting room. The radiographer will then come to tell you whether the x-rays have been successful. Sometimes you may need to have additional x-rays taken at the screening centre. Your visit to the screening centre will take around 20 minutes in total. If you wish, you can watch an animated film clip of the examination procedure at www.bevolkingsonderzoekborstkanker.nl.

Making an appointment
The invitation letter from your screening organisation will usually give a date and time for your appointment. If not, the invitation letter will tell you how to make an appointment. If you are unable to attend on the appointed date, you can arrange an alternative appointment by phone or via the website. The telephone number and website address can be found in the invitation letter.

Women with a breast prosthesis can take part in screening. Depending on the position and size of the prosthesis, part of the breast tissue may not be fully visible on the x-ray. This part of the breast tissue can then not be assessed.

Women with an ICD, pacemaker, heart rhythm monitor or port-a-cath can also take part in screening, but not women with a subcutaneous ICD. If you have a S-ICD, you should deregister yourself using the form on the back of the invitation letter.

You do not have to take part
If you have breast complaints for which you are being treated by a specialist, you do not have to take part. You can discuss this with your specialist. If you have doubts about participating in the screening programme for some other reason, ask your specialist or GP whether it is necessary for you to take part. If you do not need (or wish) to take part, please complete and return the deregistration form on the back of the invitation letter.
Who looks at the x-rays?
Two radiologists examine the x-rays independently of one another. They specialise in the assessment of mammograms. They look for suspicious abnormalities that could be breast cancer. If you have taken part in screening previously, they compare the new x-rays with the old ones.

The screening is particularly useful if you take part every time. We then compare the new x-rays with the previous ones in order to check for any differences. This enables us to detect breast cancer earlier.

How do you get the results?
You will receive a letter containing the results within 10 working days. If further examination is required or an abnormality has been detected, your GP will also contact you.

What are the possible results?
No abnormality
This means that no suspicious abnormality has been found on the x-rays.

This result does not completely rule out the possibility of breast cancer. Not all abnormalities are detected in the screening programme. However, 7 out of 10 cases of breast cancer are identified. It is therefore still important to go to your GP if you notice any changes in your breasts. Do this even if you have just attended a screening session.
Always go to your GP immediately in the following cases:
• if you feel a lump in your breast
• if you have an indentation or dimpling in the skin of your breast
• if there is an area of your breast where the skin is thicker than normal
• if there is a discharge of blood from your nipple
• if your nipple changes
• if your breast feels different.

Too little information on the x-rays
In this case the x-rays have not provided enough information to allow a proper assessment. Although there is no reason for concern at this stage, further examination – such as additional x-rays or an ultrasound scan – is needed in order to provide a result. For this you will be referred to a hospital.

An abnormality
An abnormality has been detected on the x-rays. If you have this result, you will be referred to a hospital for further examination. You can talk to your GP about which hospital you should go to.

975 in every 1,000 women are told that no abnormality has been detected. 25 in every 1,000 women are referred to a hospital. Of these 25 women, around 7 are found to have breast cancer.
Costs
There is no charge for taking part in the screening programme. The follow-up examination in a hospital is not part of the programme. The costs of these follow-up tests fall under your health insurance. It is possible you may have to pay some or all of the costs yourself. This will depend on the size of your insurance excess and how much of it you have used. Discuss this with your health insurance company if you have any questions.

Personal data for screening
In order to send you an invitation, we need your details. We have therefore obtained your name, address and date of birth from the local authority. In the event of a suspicious abnormality or if more information is needed in order to make a proper assessment, we will notify your GP. Please write down your GP’s details on the back of the invitation letter. Contact the screening organisation if you do not want your GP to receive the results.

What happens to the screening results?
We comply with the legislation concerning the protection of your privacy. We use the results to make constant improvements to the breast cancer screening programme. This involves exchanging the results with other organisations, such as hospitals. Steps are taken to ensure maximum protection of your privacy. You will find more information about this on the website.

You may lodge an objection if you do not wish us to share the data or the results of your examination with others. Visit the website to find out how this is done. You can request a form via the website or from the screening organisation.
If you have complaints, suggestions or questions
Go to your GP if you have any questions about your health. The RIVM commissions the 5 regional screening organisations to run the breast cancer screening programme on behalf of the government. Get in touch with the screening organisation in your region if you have any complaints, suggestions or questions regarding screening. You can also obtain a form for this purpose at the screening centre. The screening organisations have a complaints procedure.

For contact details and information go to: www.bevolkingsonderzoekborstkanker.nl. On this website you will find the telephone number and address of the screening organisation in your region, together with further information about this screening programme.

You can identify the screening programmes by this logo: bevolkingsonderzoek

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