Summary of recommendations

- If you have had a total mastectomy (all breast tissue removed), a mammogram is no longer necessary on that side. However, you should continue to have regular mammograms of the remaining breast. Similarly, if you have had a breast reconstruction performed, a mammogram of the reconstructed breast is not necessary.
- If you have had a lumpectomy or partial mastectomy, you should have a regular mammogram of both breasts.
- It is very important that you also continue to have regular check-ups. These should involve a thorough breast examination and general check by a doctor.

BreastScreen SA

Central Adelaide Local Health Network Level 1 300 Wakefield Street Adelaide SA 5000

Book online: www.breastscreen.sa.gov.au

Call us: 13 20 50

Email us: HelloBSSA@.sa.gov.au



This document has been reviewed and endorsed by BreastScreen SA's Consumer Group for consumers and the community.

If you do not speak English, request an interpreter from SA Health and the Department will make every effort to provide you with an interpreter in your language.



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Have you had breast cancer or DCIS in the past?







This information is for women who have had pre-invasive or invasive breast cancer in the past.

When reading the information, please note that the term 'breast cancer' is used to refer to both pre-invasive cancer – also known as ductal carcinoma in situ (DCIS) – and invasive cancer.

I have had breast cancer or DCIS in the past. Do I need regular check-ups?

If you have previously had surgery for breast cancer, it is very important that you have regular check-ups. This is because you are at increased risk of developing breast cancer again. These regular check-ups should involve a breast examination and general check by a doctor as well as annual mammograms. Your doctor can advise you on how long to continue having annual mammograms and if, and when, you can stop having mammograms.

If you have had a lumpectomy or partial mastectomy, you should have a mammogram of both breasts. If you have had a total mastectomy, with or without reconstruction surgery, a mammogram is no longer necessary on that side. However, you should continue to have regular mammograms.

Do mammograms detect all breast cancers?

While regular breast screens are currently the most effective way of screening for breast cancer, a screening mammogram will not detect all breast cancers.

If you become aware of a change in your breasts, such as a lump or nipple discharge, you should contact your doctor as soon as possible.

Where should I have my regular mammograms?

We recommend that you continue to attend annual check-ups with your breast specialist. Your specialist will arrange for you to attend a public hospital radiology service or a private radiology practice for your mammogram.

BreastScreen SA provides screening mammograms to detect the early signs of breast cancer in women who have no breast problems. If you have had breast cancer, special techniques and procedures are often needed when you have your mammogram.

For example, you may need detailed images of the treated part of the breast. These special procedures are not available as part of the screening mammogram appointment at BreastScreen SA.

I am no longer under the care of a breast specialist. What should I do?

You should discuss arrangements for having regular check-ups with your doctor. These should include breast examination and an annual mammogram arranged by your doctor.

Your doctor can advise you on how long to continue having annual mammograms and if, and when, you can stop having mammograms.

Can I recommence having screening mammograms at BreastScreen SA?

If your breast cancer was treated more than 5 years ago, you are eligible to have a screening mammogram every year at BreastScreen SA.

If you choose to attend BreastScreen SA, it is important that you continue to have regular breast examinations by your doctor.

Where can I get more information?

If you have any questions or concerns, you are welcome to contact a BreastScreen SA Medical Officer by phoning 08 8274 7151. Alternatively, you can speak with your doctor.