How high is the radiation dose?

X-rays are used in mammography. The radiation dose is kept as low as possible during mammography screening and is not allowed to exceed prescribed levels. Compressing the breast during an examination enables the radiation dose to be kept at a particularly low level. This compression does not cause cancer.

However, it cannot be ruled out that, in rare cases, the radiation dose can contribute to the development of cancer when X-rays are taken regularly.

The digital equipment used meets high quality standards and is checked on a daily basis.

Talking to a doctor about the mammography screening programme

You have a right to be given more information by a doctor working in the mammography screening programme. Talking with the doctor gives you the opportunity to discuss any questions you have on mammography screening.

Please contact the Invitation Centre to make a separate appointment. Details can be found in the invitation or on the back of this flyer.

Why are women offered mammography in a quality-assured screening programme?

Women between the ages of 50 and 69 have the highest risk of getting breast cancer. Studies have shown that women who regularly take part in quality-assured mammography screening can be saved from dying of breast cancer.

So far, no other method of early detection for breast cancer has been shown to be so effective.

Mammography as part of the screening programme helps in the early detection of breast cancer. It is therefore intended for all women in a particular age group who have no recognisable signs of breast cancer.

The screening is offered every two years to women between the ages of 50 and 69.

In order to guarantee the high quality necessary in the screening, it is only carried out in specialized facilities (screening units) approved for the German mammography screening programme. Doctors and radiology specialists have to meet particular professional requirements. Working methods and test results are regularly examined and evaluated.

The costs of the examination are borne by the statutory health insurance funds. If you have private medical insurance, please clarify the issue of costs with your medical insurance provider in advance.
In a mammography the breast is X-rayed. This makes even very small malignant changes in the breast tissue visible. In most cases, this also applies to dense breast tissue.

The size of the tumour and the extent to which the lymph nodes are affected are among the key factors determining chances of recovery. At the early stage, breast-conserving surgery and less invasive forms of treatment, using medication, are possible.

In mammography screening, there are always two specially trained doctors who evaluate the X-rays, independently of each other. In doing so, they also look at any previous X-rays taken. This independent double reading of the mammographies is a special feature of the screening programme.

If the doctors discover anything suspicious on a mammography X-ray, the images are discussed in a conference involving a further specialist doctor from the mammography screening programme. A final assessment is then made.

Can breast cancer also be detected between two mammography screenings?

Taking part regularly in mammography screening cannot prevent breast cancer from developing. In around 2 out of every 1,000 women whose mammography findings were not suspicious, breast cancer is detected before their next invitation to a screening. In most cases, the cancer detected has grown only since the last screening. Also, in rare cases and in spite of all the care taken, it is possible for tumours to be invisible or be missed in the mammography.

This is why it is important that you should contact your doctor immediately if you notice any changes in your breast.

How often are women asked to come and have an additional test?

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