

# Everything you always wanted to know about mammograms but were afraid to ask

<http://www.daytondailynews.com/lifestyle/pink/everything-you-always-wanted-to-know-about-mammograms-but-were-afraid-to-ask-359308.html>

Coordinator talks about screening, prevention

By [Meredith Moss](#), Staff Writer Updated 7:44 PM Wednesday, October 21, 2009

CENTERVILLE — It takes a special person to spend her work day imaging other women's breasts.

"Physically, it's not that hard in terms of the positioning," says Kathy McCarthy, the radiologic technologist who has been doing mammograms since 1984. "But mentally, you can go home exhausted at the end of the day."

McCarthy serves as mammography coordinator for Miami Valley Hospital at both the main hospital and the Miami Valley South Breast Center. We stopped by her office to find out more.

**Q:** What's changed over the past 25 years since you started doing mammograms?

**A:** "We don't see the breast cancer we used to see. In the early years, you could actually see a breast cancer because it was deforming the breast. Now, due to high-tech mammography, we can find a cancer that's as small as a piece of salt, less than a centimeter."

We also now have digital mammography, which makes a big difference for a dense-breasted patient or one that has a fatty breast.

**Q:** What's your reaction to the New York Times story Wednesday, Oct. 21, about how the American Cancer Society will be changing its message about the benefits and risks of screening for breast cancer?

**A:** "I will say I am anxious to read their full message when it is published. There are a lot of questions to be answered. To promote the release of partial information that is confusing to our patients is concerning to me. Unfortunately the article may have just given a woman an excuse not to get something done that could save her life."

**Q:** The average woman should have her first mammogram at age 40. With all the publicity, don't most women now do that?

**A:** Nationally out of the women 40 years and older who should be getting mammograms, about 60 percent are actually getting them done. The number one reason they don't is that they're afraid

they are going to find something. But it's so much better to find it early when it's more treatable and more cosmetically treatable. If it's small and more contained, you may not need a mastectomy. So this is about breast conservation, there's more chance of saving your breast.

**Q:** Can't mammograms miss something?

**A:** We estimate 10 to 15 percent of breast cancer aren't visible by mammography either because they aren't yet visible or just don't show up. If there's a lump that doesn't show up on a mammogram, we'll do an ultrasound. They might decide to do a biopsy, even if the mammogram or ultrasound are negative.

**Q:** What if the mammogram shows some abnormality?

**A:** Then we might follow up with an ultrasound that will show whether the area is a fluid-filled cyst or solid. A breast MRI is another screening tool for high risk women or those diagnosed with breast cancer.

**Q:** Any parting thoughts?

**A:** According to an ongoing survey conducted by the National Health Interview Survey, data from about 10,000 women showed that the mammogram rate plateaued in 2000, began to fall in 2003 and continued to decline through 2005. The drop was greatest among women ages 50 to 64, the age group most likely to benefit.

Remember that most breast cancer is found in women without a family history. The number one risk is being female, the second is getting older.

*Excerpt from [www.DaytonDailyNews.com](http://www.DaytonDailyNews.com)*