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BREAST CANCER



Susana Bates / Special to The Chronicle

Audrey Pitcher performs an automated breast ultrasound on Marta Bright at El Camino Hospital in Mountain View.

New law puts focus on density

Mammography screening
may not be enough for some

By Victoria Colliver

Starting this week, women in California who go in for their regular mammography screening may receive a notice telling them that they have breast tissue dense enough that mammography may not be the best cancer detection tool for them.

The percentage of women affected by this new law, which went into effect Monday, is large: Up to 40 percent of all women have the kind of tissue that makes conventional screening less effective, and that translates into nearly 2 million Californians.

The law makes California the fourth state after Connecticut, Texas and Virginia to put into effect

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New law puts focus on density

rules that require women to be told that they have dense breast tissue. The information has been noted on radiological reports and accessible to physicians, but not available to patients until now.

"When women have dense breast tissue, it's much harder to detect breast cancer. It's like finding a snowball in a snowstorm," said Barbara Dehn, a nurse practitioner with Women Physicians GYN Medical Group in Mountain View.

That's because the dense breast tissue and any cancerous lesions both appear white on a mammogram, making it difficult to distinguish between healthy tissue and cancer.

"Dense breast tissue makes subtle findings very difficult to detect, particularly subtle calcifications, which could be an early sign of breast cancer," said Dr. Imtiaz Qureshi, medical director of imaging services at El Camino Hospital in Mountain View.

Greater risk of cancer

Women with dense tissue are not only more likely to have their tumors go undetected, but studies have consistently shown they have an increased risk of getting breast cancer.

A UCSF-led study published in 2005 in the Journal of the National Cancer Institute found that women with the highest levels of density had a threefold increased risk of getting breast cancer compared with those in the lowest level.

Amy Colton, a registered labor-and-delivery nurse from Soquel (Santa Cruz County), was

diagnosed with late-stage cancer in 2009 even though she had been diligent about getting her annual mammograms. She later learned what her doctor had already known: She had dense tissue.

"I was not given the opportunity for early detection for breast cancer, and I represent 40,000 women in the United States just like me who this happened to — many with worse prognoses and worse outcomes," said Colton, 51. "To me, it was completely unacceptable that information was not shared with patients."

After she recovered from treatment, Colton's outrage drove her to push for the legislation to change that. But it was not a slam dunk.

Gov. Jerry Brown vetoed the first bill in 2011 due to concerns from physicians that informing women about their density status would cause anxiety, unnecessary biopsies and increased health costs. He signed the bill after its authors revised it and critics dropped their opposition.

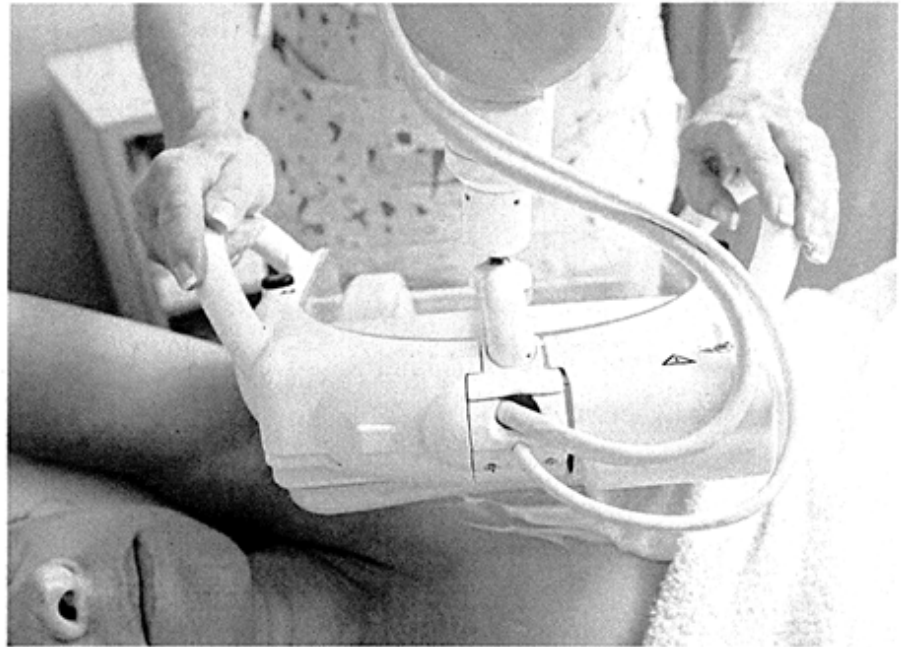
Unlike most laws that go into effect at the be-

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ginning of the year, this law was delayed to give doctors and clinics extra time to prepare. Patients are told they have a "range of screening options" available to them, but the law does not specify those options nor does it require health insurers to cover them.

Still, Santa Clara County Supervisor Joe



Photos by Susana Bates / Special to The Chronicle

Automated breast ultrasound systems are becoming popular and cost-effective options for screenings.



Radiologist Kristina Jong specializes in breast imaging at El Camino Hospital.

Simitian, who authored the legislation when he served as a state senator, thinks it makes sense for insurers to cover alternative screenings.

"This is smart, not only from a health care standpoint ... but it's also frankly smart in terms of the finances involved," he said. "Early detection costs a fraction compared with dealing with advanced cancer."

New screening tools

Automated breast ultrasound systems are emerging as a popular and cost-effective option for clinicians to use.

Some doctors do handheld ultrasounds, but the automated versions provide standardization and allow for a

technician to perform the test. Similar to mammography, which is also conducted by technicians, a radiologist reviews the results.

Another option is breast magnetic resonance imaging, but generally breast MRIs are recommended only for those patients at highest risk, such as those with a strong family history or a known genetic mutation linked to the disease.

Expense, effectiveness

Some health experts have expressed concerns about the technology's effectiveness and expense as a widespread screening tool.

Dehn, the nurse practitioner, said her Mountain View clinic has been informing patients about their breast density well in advance of the law

Are you dense?

About 40 percent of women have dense breast tissue, which makes it more difficult to detect abnormalities on a mammogram and increases their chances of developing breast cancer. A California law, which went into effect Monday, requires that, following a mammogram, women found to have dense breast tissue be told these five things:

- ▶▶ That they have dense breast tissue.
- ▶▶ That dense breast tissue can make it harder to evaluate the results of a mammogram.
- ▶▶ That it is associated with an increased risk of breast cancer.
- ▶▶ That information about breast density is available to discuss with their doctor.
- ▶▶ That a range of screening options are available.

For more information: <http://areyoudense.org>

Source: Chronicle research

and has been offering ultrasound to women with dense tissue. She said health insurers have not resisted covering the additional screening.

"This doesn't replace mammography. It's an adjunct or added screening tool that helps us move into more individualized care," she said.

Heidi Garland's doctor told her several years before she was diagnosed with breast cancer in 2008 that she had dense breast tissue. But she really didn't know what to do with that information.

"I was young and because I had no family history of any cancer, there was no reason why I felt the need to have any form of additional screening," said Garland

of San Jose, who was 47 when she was diagnosed.

Mammography detected cancer in her left breast, but showed nothing in her right side. Before doing any treatment, her doctor had her undergo a breast MRI, which revealed cancer in her right side as well.

Garland, now 52, who underwent a double mastectomy, said she believes the new law will save lives.

"Education is power," she said. "If we're educated about ourselves and our bodies, we can make educated decisions moving forward."

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Sal Pizarro
Columnist

BEYOND AWARENESS » As we know, the calendar is filled with recognition months, from cultural heritage to LGBTQ pride, and as many already may know, October is Breast Cancer Awareness month. The Santa Clara County Board of Supervisors recognized the month at its Oct. 19 meeting, and Supervisor Joe Simitian made a point to call out the work of organizations including the Pink Ribbon Group and Cancer CARE-point that provide support services for patients undergoing cancer treatment. Last year, Santa Clara County provided \$500,000 to those organizations for their work with patients at Valley Medical Center.

Noting that few people are fortunate enough to go through life without being touched by cancer in some way, Simitian said, “Awareness alone isn’t enough. We’ve got to step up and help in real and tangible ways.”