

# RECALL GUIDELINES

## GENERAL INFORMATION

BreastCheck’s screening mammography recall intervals are determined by a client’s overall risk of developing breast cancer, which is based on their family history and other considerations outlined in this document.

Most clients age 50-74 should have a screening mammogram every 2 years. Some clients may need a screening mammogram more often based on their overall risk of developing breast cancer and/or based on the radiologist’s clinical assessment. BreastCheck notifies clients of their recall interval and when they are due for their next screening mammogram.

## FACTORS AFFECTING RECALL

1. Lifetime risk of developing breast cancer based on family history (see page 2).
2. Ashkenazi descent.
3. Other diagnosed breast conditions including: Atypical Ductal Hyperplasia (ADH), Atypical Lobular Hyperplasia (ALH), and Lobular Carcinoma In Situ (LCIS).
4. Radiologist’s clinical recommendations.

## RECALL INTERVALS

The following table outlines how often clients will be recalled to BreastCheck. Recall is based on the BreastCheck’s assessment of their **overall risk** of developing breast cancer.

		RISK BASED ON FAMILY HISTORY		
		Average risk	Low increased risk	High increased risk
OTHER FACTORS	None	every 2 years	every 1-2 years*	every year
	Ashkenazi descent	every 1-2 years*	every year	every year
	Atypical ductal hyperplasia (ADH)	every year	every year	every year
	Atypical lobular hyperplasia (ALH)			
	Lobular carcinoma in situ (LCIS)			

\* Client may come yearly if desired, but will not receive yearly recall letter if radiologist recommendation is every 2 years.

Based on the **radiologist’s clinical assessment** some clients may be recalled every year regardless of their overall risk.

## MORE INFORMATION

BreastCheck, CancerCare Manitoba  
 1-855-95-CHECK  
[GetCheckedManitoba.ca](http://GetCheckedManitoba.ca)

CancerCare Manitoba  
 204-787-2197  
[CancerCare.mb.ca](http://CancerCare.mb.ca)

WRHA Genetics & Metabolism Program  
 204-787-2494  
[WRHA.mb.ca](http://WRHA.mb.ca)



# BREAST CANCER RISK BASED ON FAMILY HISTORY



## FEMALE RELATIVES



## MALE RELATIVES

1 <sup>st</sup> DEGREE	mother, sister, daughter	father, brother, son
2 <sup>nd</sup> DEGREE	grandmother, granddaughter, aunt, niece, or half-sister	grandfather, grandson, uncle, nephew, or half-brother

3<sup>rd</sup> degree relatives and non-blood relatives are **not** considered in determining risk (e.g. great relatives, step relatives and cousins).

## HIGH INCREASED RISK BASED ON FAMILY HISTORY

Lifetime risk of developing breast cancer is 25% or greater\*\* with any of the following relationships:

### FEMALE BREAST CANCERS

- ✓ one 1<sup>st</sup> degree relative with bilateral breast cancer diagnosed under the age of 50
- ✓ one identical twin with breast cancer
- ✓ two 1<sup>st</sup> degree relatives diagnosed under the age of 60
- ✓ mother + one other 2<sup>nd</sup> degree (maternal) relative both diagnosed under the age of 60
- ✓ sister or daughter + one other 2<sup>nd</sup> degree relative (maternal or paternal) diagnosed under the age of 60
- ✓ two 2<sup>nd</sup> degree relatives same side of family (maternal or paternal) both diagnosed under the age of 40
- ✓ three 1<sup>st</sup> or 2<sup>nd</sup> degree relatives with **one** diagnosed under the age of 50

### BREAST & OVARIAN CANCERS

- ✓ one 1<sup>st</sup> or 2<sup>nd</sup> degree relative diagnosed with both breast and ovarian cancer at any age
- ✓ two 1<sup>st</sup> or 2<sup>nd</sup> degree relatives diagnosed with breast cancer + one relative with ovarian cancer at any age

### OVARIAN CANCER

- ✓ personal history of ovarian cancer at any age (confirmed through the cancer registry if possible)
- ✓ two 1<sup>st</sup> degree relatives diagnosed under the age of 70

### MALE BREAST CANCER

- ✓ one 1<sup>st</sup> or 2<sup>nd</sup> degree male relative with breast cancer at any age

## LOW INCREASED RISK BASED ON FAMILY HISTORY

Lifetime risk of developing breast cancer: 12-24%\*\*

- ✓ at least one 1<sup>st</sup> or 2<sup>nd</sup> degree female relative on either maternal or paternal side of the family with a history of breast or ovarian cancer that does not fall into the high increased risk category

## AVERAGE RISK BASED ON FAMILY HISTORY

Lifetime risk of developing breast cancer: 11%\*\*

- ✓ no 1<sup>st</sup> or 2<sup>nd</sup> degree relative on either maternal or paternal side of the family with a history of breast or ovarian cancer

For cases of family history that do not fit the above criteria, contact CancerCare Manitoba or the WRHA Genetics & Metabolism Program for direction.

\*\*Lifetime risk based on Claus Model (Claus EB, Risch N, Thompson WD. Autosomal dominant inheritance of early-onset breast cancer. Cancer 1994; 73:643-51).