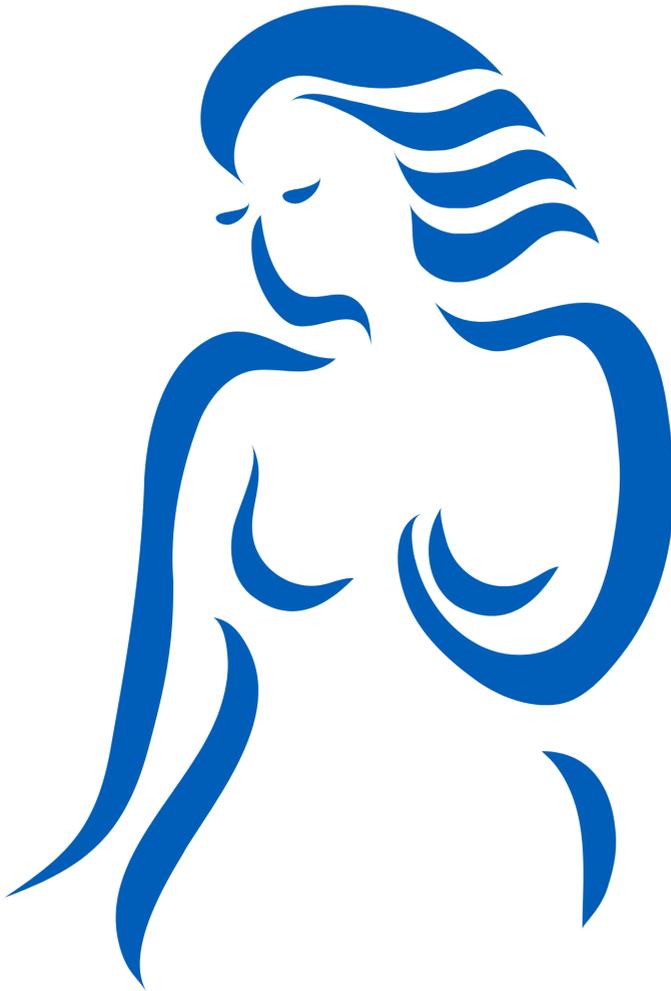


Your guide to NHS breast screening



This leaflet provides information about NHS breast screening you may find helpful. You can choose if you take part in breast screening.

Why the NHS offers breast screening

We offer screening because it can save lives from breast cancer.

Breast screening can find signs of breast cancer at an early stage. We look for cancers that are too small for you to feel or see.

Finding breast cancer early means that your treatment may be simpler and is more likely to be effective.

Who we invite for breast screening

We invite all women to have their first breast screening between the ages of 50 and 53. Then you'll be invited every 3 years until you turn 71. This is because most breast cancers develop in women over the age of 50.

Please make sure your GP surgery has your correct and up to date contact details so we can invite you. This includes you:

- name
- date of birth
- address
- mobile phone number
- email address.

If you are transgender or non-binary and you would like to be invited for breast screening, talk to your GP surgery. They can advise if you can have breast screening. Visit www.gov.uk/trans-non-binary-screening for more information.

If you are 71 or over, you can still choose to have breast screening every 3 years, but you will not be automatically invited. To make an appointment, find your local breast screening unit at www.nhs.uk/breast-screening or ask your GP surgery for contact details.

Breast cancer

Breast cancer happens when cells in the breast begin to divide and grow abnormally.

It's the most common type of cancer in women in the UK. 1 in 7 women may get breast cancer in their lifetime.

How serious breast cancer is depends on how big the cancer is and if the cancer has spread.

Early detection and better treatments have led to improved recovery and survival from breast cancer.

How breast screening works

Your local screening service will usually be in a hospital or could be at a mobile screening unit elsewhere.

Breast screening uses a breast X-ray called a mammogram to take images of the inside of your breasts. Specialists will then look at your mammograms for signs of any abnormal changes to your breasts.

Most people will not need any further tests because there are no signs of breast cancer.

If there are any signs of possible breast cancer, you may need further tests. Your screening service will offer you an appointment to discuss any further tests.

Before your appointment

You should contact your local breast screening service if you need to cancel or change your appointment.

Before your appointment, please let them know if you:

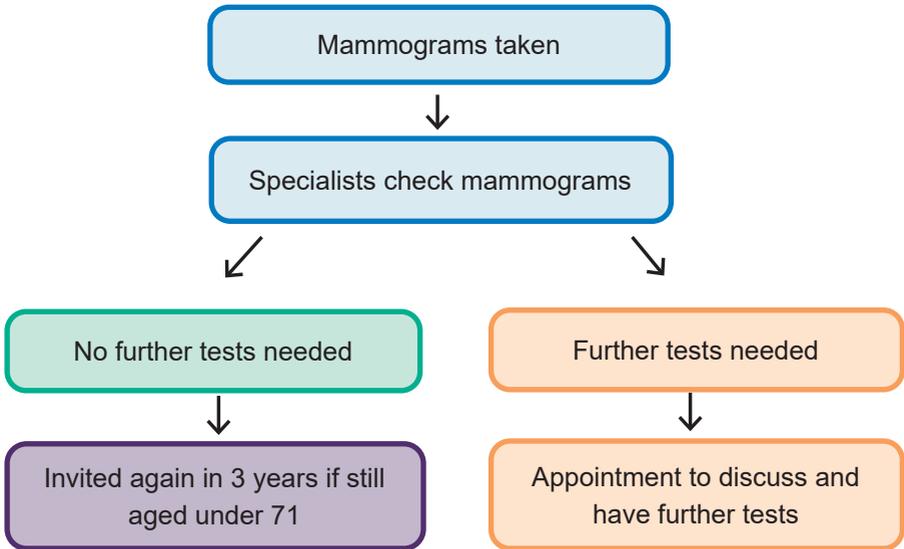
- have a learning disability or mobility problems and need additional support, such as a carer to come with you
- need information in another format or language.

This will help your local screening service to make adjustments you may need. This could include having a longer appointment or going to a different location.

You should also let your screening service know if you:

- have breast implants
- have a pacemaker or any other implanted medical device
- are pregnant or breastfeeding
- have had both breasts surgically removed (a mastectomy)
- are under the care of a breast consultant
- have had a mammogram in the last 6 months.

The steps of routine breast screening



At your appointment

A specialist called a mammographer will take your mammograms. The mammographer will be female. They will explain what will happen at each stage and you can ask any questions you may have.

During breast screening, you'll have 2 mammograms taken for each breast.

1. You'll be given privacy to undress to the waist.
2. The mammographer will help to place your breast in the right position on the X-ray machine. They will need to touch your breast.
3. The machine squeezes your breast to hold it in place. You will need to keep still. Some women find this uncomfortable or painful. Any discomfort should not last for long. You can ask to stop if you feel you cannot carry on.
4. They will take the first image from the top and then repeat the process from the side on the same breast.
5. They will then repeat this process with your other breast.

Each mammogram only takes a few seconds. The appointment should take no longer than 30 minutes but is often quicker.

The mammographer can usually get clear images of your breasts at your first appointment. Rarely, you may need a second screening appointment to get better quality images.

Practical hints and tips on the day

You will need to undress to the waist, so you may prefer to wear clothing that makes this easier, such as trousers or a skirt and a top.

Please do not use deodorant or talcum powder on the day of the appointment as it could interfere with your result. If you can, please remove necklaces and nipple piercings before you arrive.



A female specialist called a mammographer will take your mammograms

You can talk to the breast screening team if you are nervous or have any questions. You can also bring someone with you for support, such as a friend, relative or carer. They will usually need to stay in the waiting room during your appointment.

Breast screening results

You should get your results within 2 weeks of your screening appointment. We'll also send your results to your GP surgery. Sometimes it takes longer to get your results.

There are 2 possible results:

- no further tests needed at this time, or
- further tests needed.

No further tests needed at this time

Most people (around 96 people in 100) have this result.

It means that we did not find any sign of breast cancer in your mammograms.

You do not need any further tests. We'll offer you breast screening again in 3 years if you are still under the age of 71.

This result does not guarantee that you do not have breast cancer or will not develop it in the future. Please contact your GP surgery as soon as possible if you notice any unusual changes to your breasts.

Further tests needed

For every 100 people who have breast screening, 4 will need further tests.

This does not necessarily mean you have breast cancer. Most people who need further tests do not have breast cancer.

You will be invited for a breast assessment appointment. If you're worried or have any questions, you can speak to a breast screening nurse over the phone before your appointment. Your invitation for further tests will tell you how to contact them.

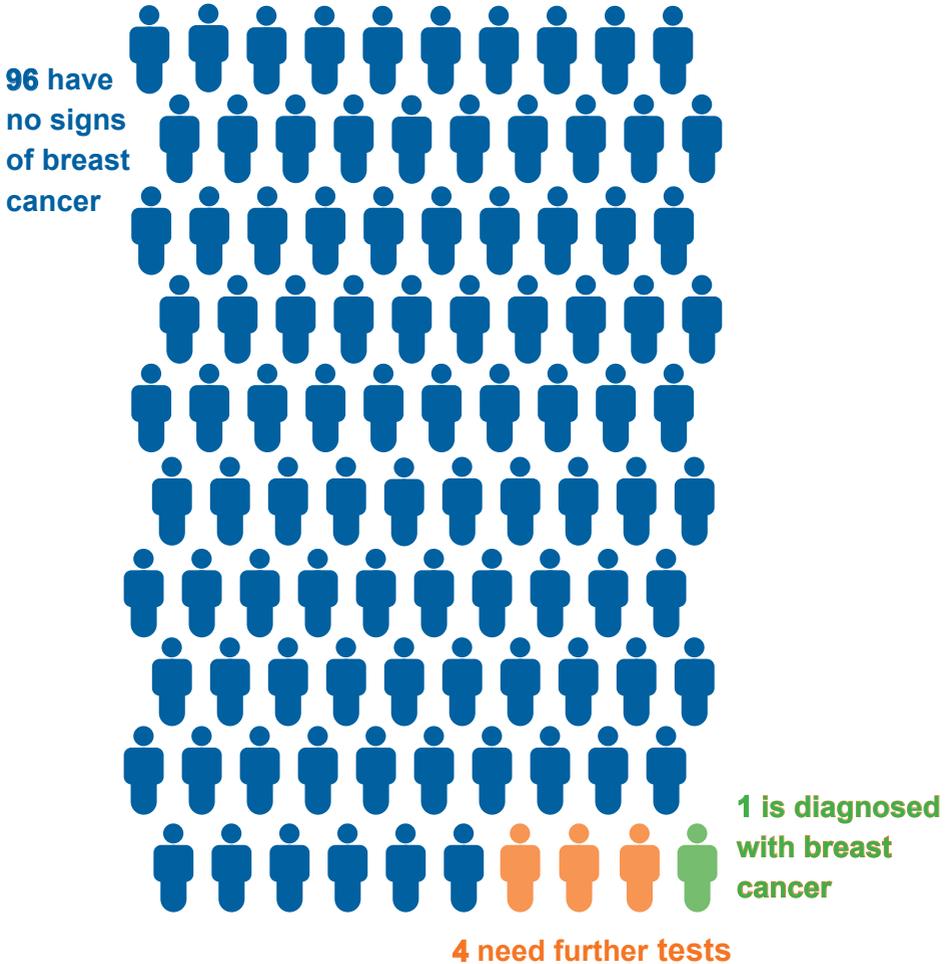
At your appointment, a specialist will explain which tests you need.

These may include:

- a physical examination of your breasts
- further mammograms
- ultrasound scans of your breasts
- taking a small sample called a biopsy from your breast.

The specialist team will tell you when and how you will get your results, depending on which tests were done.

Results for every 100 people who have breast screening



For every 100 people having breast screening, 96 do not need further tests and 4 will need further tests. Of those 4 people, 1 will be diagnosed with breast cancer.

These statistics are only a guide for the general population. Your personal risk will be based on your age and health.

Possible risks of breast screening

The main risk of breast screening is that it may find a cancer that would never have caused harm. This is because we cannot always predict if a cancer will become life-threatening or not.

You will be offered treatment if we find breast cancer. This means you may get treatment for a non-life-threatening cancer. If you are offered treatment, the specialist team will explain the options to you to help you decide.

No screening test is 100% reliable.

Very rarely, a cancer may be missed. Screening does not always find a cancer that is there. Sometimes cancers cannot be seen on the mammogram.

Breast cancer can also develop in the time between screening appointments. You still need to look at and feel your breasts regularly, so you are aware of any unusual changes. Please contact your GP surgery as soon as possible if you think you have symptoms of breast cancer.

Having mammograms exposes you to a small amount of radiation from the X-rays. This very slightly increases your chance of getting cancer over your lifetime. NHS machines use low radiation doses to minimise any risk. Research shows the overall benefits of breast screening outweigh the risks of radiation exposure.

Breast cancer symptoms

It's important to know what your breasts usually look and feel like, so you know what is normal for you. This makes it easier to notice any changes to your breasts.

Symptoms of breast cancer in women may include:

- a lump or swelling in your breast, chest or armpit
- a change in the skin of your breast, such as dimpling or redness (rashes or changes in skin colour may be harder to see on black or brown skin)

- an orange peel appearance, where the skin may be thicker and pores are more obvious
- a change in size or shape of 1 or both breasts
- nipple discharge, which may have blood in it
- a change in the shape or look of your nipple, such as it pulling inwards (inverted nipple) or a rash on it (may look like eczema).

On its own, pain in your breasts is not usually a sign of breast cancer. If you have pain or discomfort in the breast or armpit that's there all or almost all the time, it's best to get it checked.

If you have any of these symptoms, please speak to your GP as soon as possible. Ask the GP reception team for an urgent appointment. It is important to do this even if you have recently had breast screening.

Who is more likely to get breast cancer?

Anyone can get breast cancer, but you may be more likely to get it if you:

- are over 50
- have dense breast tissue
- have other people in your family who've had breast or ovarian cancer – you may have inherited a faulty gene, such as a faulty BRCA gene
- have certain breast conditions, such as benign breast disease, ductal carcinoma in situ or lobular carcinoma in situ.

You can speak to your GP or practice nurse if breast or ovarian cancer runs in your family, and you would like advice.

You can lower your risk of breast cancer by avoiding drinking more than 14 units of alcohol a week and keeping to a healthy weight.

More information and support

For advice on breast screening, you can contact your GP surgery or local breast screening service.

This information is available in alternative formats, including other languages. Go to www.gov.uk/breast-screening-guide. For easy read, go to www.gov.uk/breast-easy-guide.

To request another format, you can phone **0300 311 2233** or email england.contactus@nhs.net.

You can also:

- find more information on breast screening at www.nhs.uk/breast
- visit www.nhs.uk/check-breasts-or-chest for advice on how to check your breasts
- read information for transgender and non-binary people about NHS screening programmes. Go to www.gov.uk/trans-non-binary-screening.

Breast Cancer Now also offer free and confidential information and support on breast health and breast screening. You can phone their helpline on **0808 800 6000**. Interpreters are available if you need language support. Find more information at www.breastcancernow.org.

Clinical trials

You may be asked if you want to take part in a clinical trial. These are medical research studies. Any trial you are offered will gather information about the best types of screening tests or treatments so we can improve services in the future. You can choose whether to take part or not.



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Your personal information

We use personal information from your NHS records to invite you for screening at the right time. NHS England also uses your information to ensure you receive high quality care and to improve the screening programmes.

We save your mammograms securely for at least 8 years. We will review your previous screening results if you are diagnosed with breast cancer between screening appointments. You can ask to see the results of this review.

Read more about how we use and protect your information at www.gov.uk/screening-data. Find out how to opt out of screening at www.gov.uk/screening-opt-out.

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