

乳房護理中心 Breast Care Centre

For enquiries and appointments,
please contact us at:

Breast Care Centre

9/F, Li Shu Pui Block
Hong Kong Sanatorium & Hospital
2 Village Road, Happy Valley, Hong Kong

Tel: 2835 8290
Fax: 2892 7563
Email: bcc@hksh.com

Service Hours

Monday to Friday: 8:30 am – 4:30 pm
Saturday: 8:30 am – 12:30 pm
Closed on Sundays and Public Holidays

www.hksh.com

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Comprehensive Breast Screening Programme

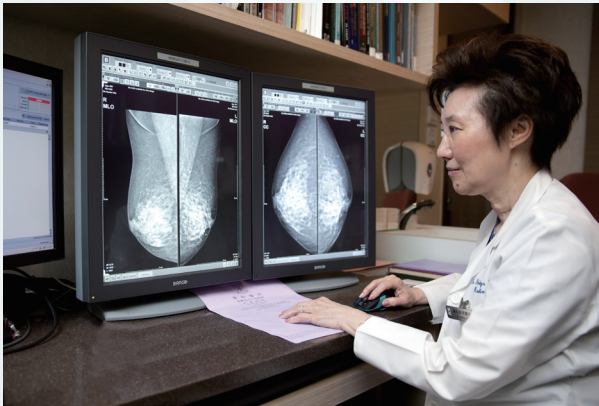


養和醫院
Hong Kong Sanatorium & Hospital

乳房護理中心
Breast Care Centre

What Is Breast Screening?

Regular breast screening is a method of secondary prevention in early detection of breast cancer. It is a combination of self breast examination, clinical examination and imaging (Mammography and/or Ultrasound screening). It may detect benign or malignant tumours before the patient can feel its presence. Early detection of breast cancer can lead to earlier staging and reduce the need for chemotherapy and mastectomy.



Breast Cancer in Hong Kong

- Breast cancer is the most common cancer among women in Hong Kong since 1993
- Number of newly diagnosed cases has increased from 1,152 in 1993 to 3,419 in 2011
- 1 in every 17 women stands a chance of developing breast cancer in her lifetime
- On average, 9 women are diagnosed with breast cancer and 1.5 die of breast cancer every day

<http://www3.ha.org.hk/cancereg/breast.2011.pdf>

Who Should Have Breast Screening?

It is indicated for all women after 20, as it can detect infection, benign tumor, malignant tumor and abnormalities of nipple. It is especially for those with risk factors stated below.

Risk Factor

1. Life style and dietary habit

- Lack of exercise
- High level of stress
- High dietary content of fat and red meat
- Frequent night shift
- Smoking and drinking

2. Reproductive factors

- No breastfeeding
- No childbirth or First live birth after age 35
- Early menarche before age 12 or late menopause after age 55
- Use of hormonal replacement therapy

3. Personal health history

- Obesity
- Family or Personal history of breast cancer
- History of breast biopsy showing atypia, LCIS, papillomatosis

4. Please be aware that

- Air pollution is a risk factor for breast cancer
- According to Hong Kong Breast Cancer Registry, more than 85% breast cancer patients have no family history

Regular Breast Screening

Age	Self Examination	Clinical Examination	Mammogram	Ultrasound Breast
	Get familiar with own breasts and consult doctor about any unusual change	Professionals can detect problems that patient may not be aware of	Detect a tumour which is still non-palpable in forms of microcalcifications, architectural distortion or asymmetric density	Distinguish between solid or cystic mass, and detect features suspicious for cancer
20 - 39	Every month after period	Every 3 years or as suggested by doctors	Obtain baseline mammogram between age of 35-39 or suggested by doctors	Every 3 years or as suggested by doctors
40+	Every month after period or on the same date of every month for irregular period or menopause	Every 2 years	Every 1 to 2 years	If dense breast, adjunct to mammogram as suggested by doctors

Caution:

- If you have personal or family history of breast cancer, or had previous breast disease or lesions which may increase breast cancer risk, you should consult your doctor on how to monitor your breast condition.
- For any abnormalities, triple assessment will be conducted
 - i. Clinical examination
 - ii. Imaging examination (Mammogram, or plus Ultrasound, or plus MRI)
 - iii. Biopsy



The following table shows the difference between size, staging and treatment in breast cancer patients as reported in the Hong Kong Breast Cancer Registry bulletin 2013 (www.hkbcf.org/breastcancerregistry)

	Screen-detected	Self-detected	Remarks
Stage 0 - I	76.9%	38.2%	< 40% of Stage I breast cancer patients require chemotherapy in contrast to > 82.4% of Stage II or above
Invasive tumour diameter	1.3cm	2.3cm	The self-detected tumour volume is 5.5 times bigger than screen-detected one
Mastectomy rate	46.3%	67.4%	Screen-detected cancer group has one-third less mastectomy than self-detected group
Lymph node involvement	21%	42%	Lymph node involvement in screen-detected cancer group is less than half of self-detected group
Chemotherapy	24.9%	66.2%	Need for chemotherapy is two-third less in screen-detected group compared to self-detected group

Referred by Doctor

Doctor's name: _____

Doctor's contact number: _____

Clinic address: _____

Screening Programme

Required date for screening: _____

Clinical breast examination, Centre physician or referring doctor

Breast ultrasound

Mammography

Bone densitometry*

* Special price for bone densitometry is provided to women who join any breast screening programme.

Signature of referring doctor

We will send the film and reports to the referring doctor within 2 weeks.