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What's the role of breast self-examination in breast cancer screening?

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Background and Aim: Breast cancer is the most common non-skin cancer and the second leading cause of cancer death in women. In Portugal, there are detected each year about 4500 new cases of breast cancer and 1500 women die from this disease. Mammography is the only screening test shown to reduce breast cancer-related mortality. There is general agreement that screening should be offered at least biennially to women 45 to 69 years of age. Although it's a common practice, teaching breast self-examination (BSE) doesn't reduce breast cancer mortality and may increase false-positive rates. The aim of this work is to review the role of BSE in breast cancer screening.

Methods: A search was conducted on MEDLINE, Guidelines Finder, The Cochrane Library, using the MeSH terms "breast self examination" and "breast cancer". The researches were limited to the articles published in the last 5 years in English, Spanish and Portuguese. To assess the level of evidence, the scale of Strength of Recommendation Taxonomy American Family Physician was used.

Results: From the research resulted 13 articles: 5 randomized clinical trials and 8 systematic reviews. From their analysis, we conclude that: Routine teaching of BSE doesn't reduce mortality and likely increases benign biopsy rates (strength of recommendation I); BSE shouldn't be routinely taught to women (strength of recommendation ID); A full discussion of BSE, including risks, should be provided for the woman who requests it (strength of recommendation IIIA); If a woman makes an informed decision to practise BSE, care providers should ensure she is taught the skills and that she performs self-examination proficiently (strength of recommendation IIIA).

Conclusions: A review of the evidence not only showed that regular BSE conferred no benefit in terms of survival from breast cancer, but also provided evidence of harm, increasing the number of unnecessary invasive procedures and woman's anxiety.