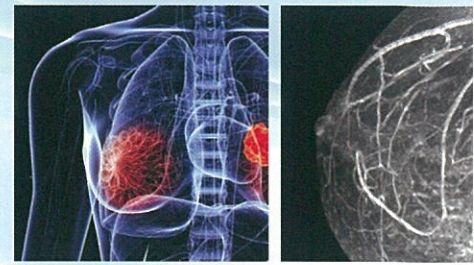


# IMAGINE THAT



A PATIENT-CENTERED RADIOLOGY NEWSLETTER

WINTER 2011-12

## THE BREAST CANCER SCREENING DEBATE

### Find your voice.

In November 2009, the U.S. Preventive Services Task Force (USPSTF) released new recommendations regarding screening mammography. These recommendations suggested performing mammograms every other year starting at age 50 instead of the widely accepted annual exam starting at age 40. USPSTF cited "harms" such as the added radiation exposure, pain, patient anxiety, and frequent false-positive results. After these new recommendations were released, a fierce debate began that has led to frequent instances of misinformation and confusion.



Breast cancer remains one of the most common cancers and one of the leading causes of cancer-related death in women. Most patients believe that the benefits of screening mammography far outweigh the risks. Multiple research studies support these beliefs, demonstrating that breast cancer screening is cost-effective and saves thousands of lives each year. A large study from Sweden, published in July 2011 in the journal *Radiology*, showed that death rates from breast cancer were 30 percent lower in those screened with yearly mammograms than in those who were not. Despite the recent controversy raised by USPSTF, organizations such as the American College of Radiology, American College of Surgeons, and American Cancer Society still support yearly screening beginning at age 40.

In the future, personalized screening recommendations may be provided to patients based on their personal risk factors, such as age, breast density, family history, and personal history of cancer. For now, have an open and honest discussion with your doctor regarding which options are best for you.

**For more information, visit [www.mammography saveslives.org](http://www.mammography saveslives.org).**

## FACULTY SPOTLIGHT



### MARGARITA ZULEY, MD

Associate Professor  
Director of Breast Imaging

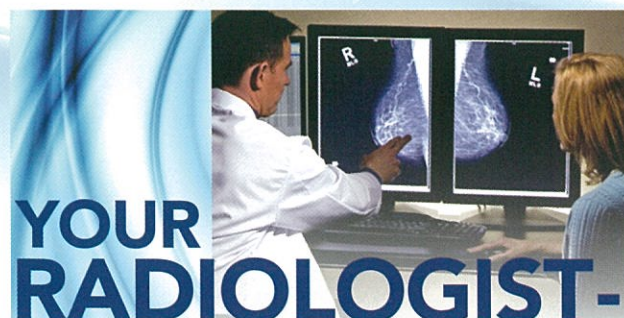
Margarita Zuley, MD, of Magee-Womens Hospital of UPMC is one of the many faces in the

Department of Radiology. You may see her if you are called back for a "second look" mammogram, in which Zuley will walk you through additional studies or procedures specifically tailored to fit your situation. In this way, your care becomes a partnership so that you will not have to face uncertainty alone. When she is not seeing patients, Zuley teaches as well as performs research on cutting-edge tools such as breast magnetic resonance imaging (MRI) and digital tomosynthesis. Thus, she is helping to change the way that doctors diagnose and manage breast cancer.

At UPMC, she is YOUR radiologist.

**"The ongoing controversy about the benefits versus harms of mammography highlights the need to continually search for better tools to detect and diagnose breast cancer. Our goal is to advance the science of imaging so that we find cancers earlier and with less false positive results."**

MARGARITA ZULEY



Radiologists are practiced in a vast array of imaging technologies. Many of these imaging tests are tailored to help diagnose disease and identify cancer. Radiologists, like those at Magee-Womens Hospital of UPMC, also are trained in image-guided procedures, allowing for identification and biopsy of suspicious lesions using the most advanced noninvasive tools available. Most importantly, radiologists are available to help guide you, the patient, through the diagnostic process. From screening to workup, biopsy to localization, follow-up to surveillance, a radiologist is with you every step of the way.

## YOUR RADIOLOGIST-YOUR GUIDE