

## NCCN Publishes New Patient Guidelines for Breast Cancer Screening and Diagnosis Emphasizing Annual Mammograms for All Average-Risk Women Over Age 40

NCCN has published new NCCN Guidelines for Patients for Breast Cancer Screening and Diagnosis to help people understand their personal risk for breast cancer, when they should begin screening, and how often to screen, in order to detect cancer earlier for more treatment options and better outcomes. With this information, they are equipped to have more informed conversations with their healthcare providers and be active decision-makers in their long-term health.

The breast cancer screening guidelines are the latest in NCCN's library of NCCN Guidelines for Patients, published through funding from the NCCN Foundation and available for free at [NCCN.org/patientguidelines](https://www.nccn.org/patientguidelines) and via the NCCN Patient Guides for Cancer App. The NCCN Guidelines for Patients provide information on nearly 60 cancer types, as well as topics including treatment side effects, distress management, and survivorship.

"There are many, often conflicting, recommendations surrounding breast cancer screening, which causes a lot of confusion and apprehension," said Therese Bevers, MD, Professor of Clinical Cancer Prevention, The University of Texas MD Anderson Cancer Center, and Chair, NCCN Guidelines Panel for Breast Cancer Screening and Diagnosis. "These are the latest, evidence-based guidelines from experts in the field of breast cancer screening and diagnosis from more than 2 dozen leading cancer centers in the United States."

"Everyone with breasts carries some risk of breast cancer, so the key is to know your risk," said Dr. Bevers. "Most women with average risk should get screened every year, beginning at age 40 years, but if there are additional risk factors present, a provider might recommend an earlier start." According to the guidelines, women should undergo a risk assessment for developing breast cancer starting at age 25 years. Increased risk is based on a number of factors, such as age and family history of certain cancers—including ovarian and pancreatic cancer, not just breast cancer.

Regular screening and breast examinations are safe and important for those who are pregnant or breastfeeding, Dr. Bevers added. "A lot of women think they need to put this on hold, but we can shield the belly, and the radiation is very low-dose and targeted. It's important to keep up with screenings. Especially for women whose first pregnancy is happening when they are age 40 years or older."

"Annual mammography screening beginning at age 40 is associated with the highest mortality reduction for average-risk women," said Mark Helvie, MD, Professor, Active Emeritus, Department of Radiology, University of Michigan, and member of the NCCN Guidelines Panel for Breast Cancer Screening and Diagnosis. "Regular screening and breast examinations help find breast cancer at its earliest, most treatable stages. Having a mammogram at infrequent or irregular intervals limits its effectiveness. For women at increased risk, the NCCN Guidelines recommend starting screening earlier and often include breast MRI in addition to mammography."

The NCCN Guidelines for Patients: Breast Cancer Screening and Diagnosis also address the appropriate evaluation of breast symptoms most commonly seen as a palpable lump, pain, or nipple discharge—though anything at all un-

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usual with the breasts should be discussed with a doctor. Cancer symptoms can be similar to symptoms from benign causes, and they can also occur in unique ways. Therefore, if a provider or patient discovers anything out of the ordinary, the NCCN Guidelines recommend a prompt clinical and diagnostic check with imaging and, in some cases, biopsy to determine the correct diagnosis.

“These guidelines will help so many people,” said Sue Friedman, DVM, Executive Director, Facing Our Risk of Cancer Empowered. “There is general confusion about breast cancer screening guidelines and what screening people should follow based on their risk. The NCCN Guidelines of Patients are an easy way for people to access up-to-date expert recommendations in plain language.”

The NCCN Guidelines for Patients are based on the NCCN Clinical Practice Guidelines in Oncology, which are updated frequently by multidisciplinary teams of experts from across NCCN Member Institutions. The patient versions present unbiased expert guidance in an easy-to-read format with clear language, charts, images, and a glossary of medical terms.

Patient guidelines are also available for colorectal cancer screening and lung cancer screening. Learn more at [NCCN.org/patients](https://www.nccn.org/patients).

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## NCCN Shares New Recommendations for Treating Children With Brain Tumors

NCCN published new NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines) for Pediatric Central Nervous System (CNS) Cancers. This is now the fifth current NCCN Guideline to focus on children’s cancers, following recent publications of evidence-based, expert consensus guidelines for Pediatric Acute Lymphoblastic Leukemia, Pediatric Aggressive Mature B-Cell Lymphomas, Pediatric Hodgkin Lymphoma, and Wilms Tumors. Although rare, pediatric brain tumors are the second most common type of pediatric malignancy after leukemia and are the leading cause of cancer-related death in children.<sup>1,2</sup>

“I think about these families and everything they go through, and I know we’re going to keep working every day to make things better for them,” said Anita Mahajan, MD, Mayo Clinic, Vice Chair of the NCCN Guidelines Panel for Pediatric CNS Cancers. “These NCCN Guidelines, covering high-grade gliomas, are an important start. They consolidate the complicated information that’s needed across interdisciplinary teams, including pediatric oncologists/neuro-oncologists, pediatric radiation oncologists, pathologists, and pediatric neurosurgeons, so they are all ready to work together to provide the most effective diagnosis and treatment.”

Dr. Mahajan continued: “We’re planning to expand the guidelines to include other CNS tumor types. Right now, the science is advancing as we learn more about how to differentiate and characterize these tumors. In the future, with more trial results coming in, we anticipate an increase in personalized medicine with treatments targeted to the specific patient and tumor.”

The WHO recently updated their classifications for CNS tumors, with a new structure specifically focused on *pediatric* CNS tumors. This fundamental paradigm shift in classification is reflected and explained in the NCCN Guidelines for Pediatric CNS Cancers.

“Treating children with cancer is very different from adults, particularly for CNS tumors. We need to be extra careful to not impact physical and cognitive

development, and to protect against long-term side effects,” explained NCCN Guidelines for Pediatric CNS Cancers Panel Chair Amar Gajjar, MD, Chair of the Department of Pediatrics, St. Jude Children’s Research Hospital. “For instance, radiation is a key component when treating adults, but options to avoid or reduce radiation in young children are important, especially those under age 3 years. These guidelines provide a snapshot of how leading experts from across the country are applying the current evidence to recommend the best approach for infants, young children, and adolescents into early adulthood. We’re committed to update these guidelines at least once a year moving forward.”

NCCN intends to cover at least 90% of all incident childhood cancers through the growing library of NCCN Guidelines for pediatric cancers. The adult guidelines provide comprehensive management recommendations for 97% of all incident cancer in the United States and globally, as well as screening, prevention, and supportive care, including survivorship best practices. There are also NCCN Guidelines for Specific Populations, including recommendations on how to optimally tailor care in adolescent and young adult patients.

Previously published NCCN Guidelines for Pediatric ALL have also been adapted into a version for patients and caregivers, harmonized for resource-constrained settings, and translated into Chinese, French, Indonesian, Italian, Japanese, Portuguese, Russian, and Spanish.

“We want to do whatever we can to ease the burden of cancer on children and their families and make sure every child can get the best care possible,” said Robert W. Carlson, MD, Chief Executive Officer, NCCN. “The NCCN Guidelines have a proven track record for improving cancer outcomes and are a trusted source of information for care providers all over the world. We are proud to advance care by providing everyone with access to the very latest recommendations from some of the top experts in the field.”

The NCCN Guidelines can be viewed and downloaded free-of-charge for noncommercial use at [NCCN.org](https://www.nccn.org) or via the NCCN Virtual Library of NCCN Guidelines app.

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## References

1. Pfister SM, Reyes-Mugica M, Chan JKC, et al. A summary of the inaugural WHO Classification of Pediatric Tumors: transitioning from the optical into the molecular era. *Cancer Discov* 2022;12:331–355.
2. American Cancer Society. Cancer facts and figures 2022. Accessed April 26, 2022. Available at: <https://www.cancer.org/research/cancer-facts-statistics/all-cancer-facts-figures/cancer-facts-figures-2022.html>