[minhsc@leg.gov.mb.ca](mailto:minhsc@leg.gov.mb.ca)

**Email subject line: Call to Change Outdated Breast Screening Practices**

Dear Minister,

I am writing to you today about two breast cancer screening practices in our province that are costing lives.

**1.Self-referral for women 40-49**

**Removing barriers - Self Referral**

In Manitoba, women in their 40s are unable to self-refer for a mammogram. If they want a screening mammogram, they must have a referral from their health care provider. Many women are being denied a referral even though Canadian breast screening guidelines state that it is a woman’s decision whether or not to have a mammogram. British Columbia, Nova Scotia, Prince Edward Island, and Yukon provide women with the option to self-refer at 40. In Alberta women can self-refer at 45 or after the first screening in their 40’s. New Brunswick will begin self-referral at 40 in early 2024 and Ontario will begin in the fall of 2024.

**Following expert recommendations - Access to screening at age 40**

There is no scientific evidence that justifies starting screening women at age 50. Seventeen percent of breast cancers occur in women in their 40’s. Cancer in this age group is more aggressive, which leads to increased mortality and more aggressive treatment and surgery. Women in their 40’s who get mammograms have a 44 percent lower mortality rate from breast cancer than those who do not receive screening. To detect cancer early, women in Manitoba need to be able to self-refer.

**Follow current evidence - Access for those at increased risk**

There are also racial disparities to be considered. Minority women have a higher risk of getting breast cancer earlier in life compared to Caucasian women. They also tend to be diagnosed with more aggressive cancers at an advanced stage, which increases mortality rates and reduces quality of life. For early detection, they need to be able to have screening in their 40’s.

**2. Women with dense breasts cannot access beneficial supplementary screening**

Although women in Manitoba are told if they have dense breasts, they are unable to access beneficial additional screening in the form of screening ultrasound.

**Patient access to screening ultrasound in Canada**

* Ontario: Fall 2024 MRI and screening ultrasound to be offered to women in Category D
* British Columbia: Screening ultrasound is available for women in Category C and D
* Alberta: Screening ultrasound is offered to women in Category C and D
* Quebec: Screening ultrasound is offered by the screening program to women in Category D with a family history
* PEI: Commitment by Premier to offer ultrasound for women in Category D
* Other provinces: Screening ultrasound is available on a case-by-case basis

**What the Government of Manitoba can do**

The government must ensure that all women can self- refer at 40. The government must also ensure that screening ultrasound is accessible so that women who have dense breasts have a chance to make a choice whether or not they want to access ultrasound.

Finding breast cancer early should not depend on where we live!

Sincerely,

[Name]

I ask that the women of Manitoba be given the same opportunity as women in other provinces to self-refer and detect cancer early. Finding breast cancer early should not depend on where we live.

Sincerely,

[Name]