

# Your Guide to Breast Imaging

Empowering Women Through  
Knowledge

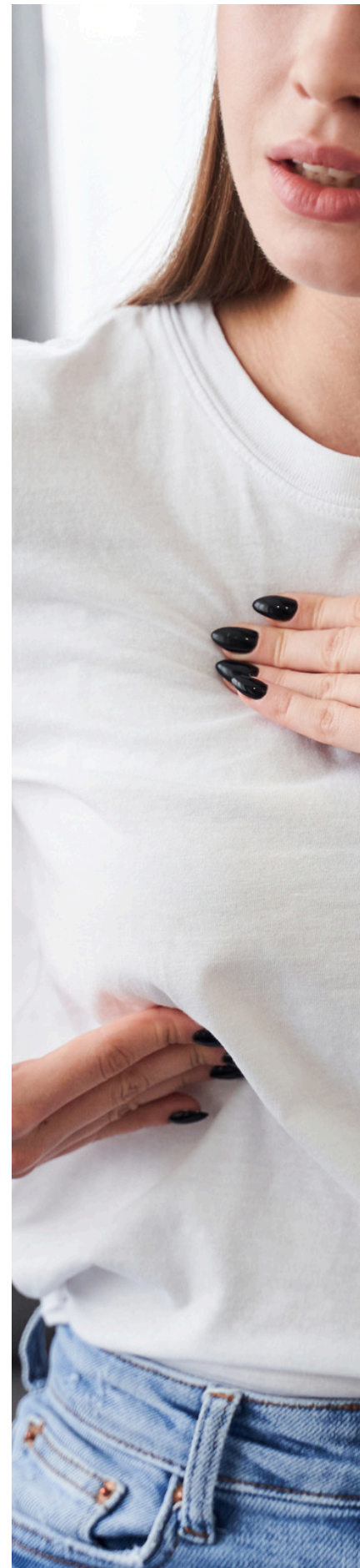
Insights and Information from Breast Imaging Victoria



Breast  
Imaging  
Victoria

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# Introduction

## Why Breast Awareness Matters

At Breast Imaging Victoria, we've long believed that breast health starts with knowledge. This guide is here to support your journey—whether you're scheduling your first mammogram or simply want to better understand your body.

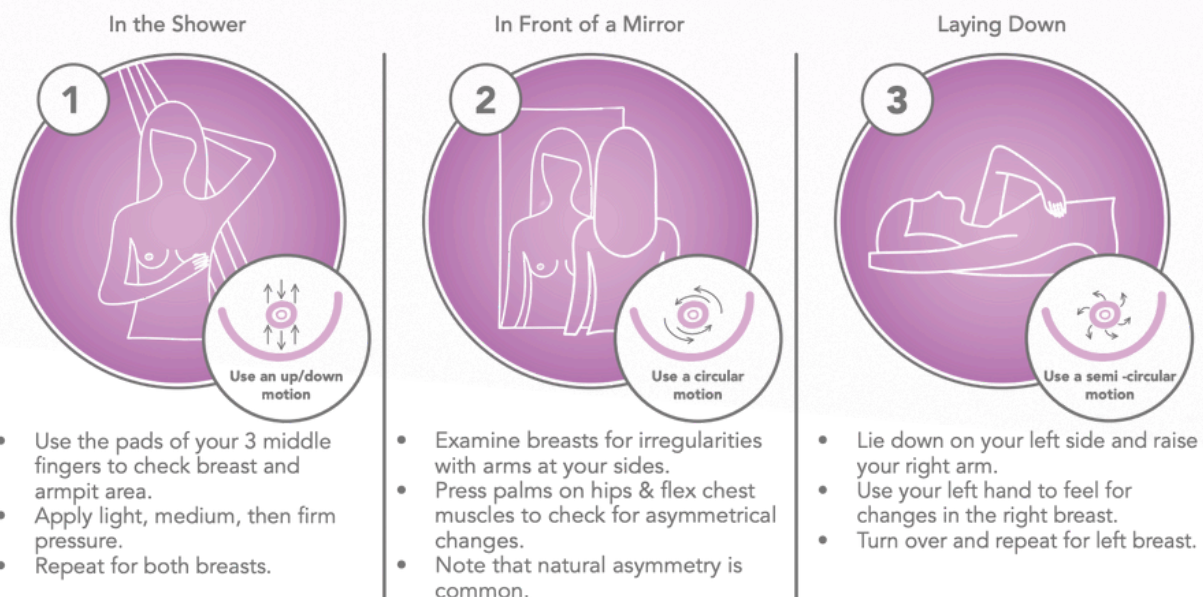
“Awareness is the beginning of action.  
When women understand their breast  
health, they empower not only themselves,  
but everyone around them.”

# How to Check Your Breasts

Getting to know your breasts through regular self-checks can help you detect changes early.

## Tips for Self-Examination

- Look in the mirror: Check for changes in shape, size, or skin texture.
- Feel while lying down and in the shower: Use your finger pads to feel in circular motions across the entire breast and underarm area.
- Watch for changes: Lumps, skin thickening, skin dimpling, or nipple discharge.



If you notice anything unusual, speak with your GP.



# Understanding Your Risk

Here are the facts about breast cancer:

- **1 in 7 women** and **1 in 500 men** in Australia will be diagnosed with breast cancer in their lifetime.
- Early detection can lead to a survival rate as high as 99% for breast cancer.
- Regular screenings can help improve early detection rates and overall patient or personal health.

*While some risk factors are outside your control, knowing them can help guide your screening schedule.*

## **Common risk factors include:**

- Increasing age
- Family history (especially first-degree relatives)
- Genetic mutations (e.g. BRCA1/2)
- Personal history of breast conditions
- Dense breast tissue
- Early menstruation or late menopause
- Hormone replacement therapy
- Lifestyle factors (smoking, alcohol, lack of exercise)

# Understanding iPrevent®



## A helpful tool to guide your prevention and screening decisions.

Understanding your personal risk of developing breast cancer is an important part of proactive breast health care. That's where iPrevent® comes in. Developed by researchers at Peter MacCallum Cancer Centre, iPrevent® is an evidence-based, online tool that helps women better understand their individual risk of breast cancer — and what they can do about it.



iPrevent® is an interactive online tool that uses your personal health and family history to provide a tailored breast cancer risk estimate. It then offers prevention and screening recommendations based on current clinical guidelines.

It's designed to be used either:

- By individuals (with or without a healthcare provider), or
- During consultations with GPs, breast specialists, or genetic counsellors.

### How can it help you?

- Gives a personalised risk estimate (average, moderate, or high)
- Suggests appropriate screening strategies (e.g. mammograms, MRI, clinical exams)
- Offers lifestyle and prevention advice
- Helps guide conversations with your GP or breast specialist

### Where to Access iPrevent®

You can use iPrevent® for free at:

[www.iprevent.com.au](http://www.iprevent.com.au)

We recommend discussing your results with your GP or breast specialist, particularly if you're found to be at increased risk.

# Screening vs. Diagnostic Imaging

*Screening is crucial for early detection and preventive health, while diagnostic imaging is critical for accurate diagnosis and targeted treatment planning.*

Feature	Screening Imaging	Diagnostic Imaging
<b>Purpose</b>	Routine check for early signs of breast cancer	Investigate specific symptoms or abnormal findings
<b>Who it's for</b>	Women with no breast symptoms or concerns	Women with symptoms (e.g. lump, pain, discharge) or abnormal screening
<b>Common Tests Used</b>	Mammogram (2D or 3D)	Mammogram, Ultrasound, and/or Contrast Mammogram
<b>Frequency</b>	Typically every 1-2 years based on age and risk	As needed, based on clinical concern
<b>Medicare Coverage</b>	BreastScreen Australia provides free screening from age 50-74	Medicare rebates may apply depending on referral and modality
<b>Result Timing</b>	Usually sent by mail within a few weeks	Discussed with your doctor, often within a few days
<b>Requires Referral?</b>	No (if using BreastScreen Australia)	Yes — referral from a GP or specialist required
<b>Additional Imaging?</b>	Not usually unless something is detected	May include targeted ultrasound, biopsy, or contrast imaging
<b>Goal</b>	Detect cancer early before symptoms appear	Diagnose or rule out underlying conditions causing symptoms

# BreastScreen vs. Private Imaging

While both play an important role in breast health, there are key differences between government-funded screening programs like BreastScreen and private diagnostic clinics like Breast Imaging Victoria (BIV). Understanding these differences can help you make the right choice based on your individual needs and risk profile.



Feature	BreastScreen	Private Imaging (e.g. BIV)
<b>Eligibility</b>	Women aged 50–74 (target age group); available 40–49 & 75+	All ages with a referral from a GP or specialist
<b>Cost</b>	Free for eligible age groups	Fees apply; partial Medicare rebates may be available
<b>Type of Imaging</b>	Screening mammogram only	Tailored imaging (mammogram, ultrasound, contrast, biopsies)
<b>Time to Results</b>	Results usually within 2–3 weeks	Often same day or within 1–2 days
<b>Call-Back Timing for Extra Tests</b>	Can take an additional 1–2 weeks for follow-up appointments	Often done on the same day if needed (including biopsies)
<b>Access to Specialists</b>	No immediate access to breast specialists	On-site radiologists and breast surgeons for immediate consultation
<b>Diagnostic Services</b>	Not available (screening only)	Full diagnostic workup, including biopsies if needed
<b>Breast Density Reporting</b>	Now included (as of 2025 in Victoria)	Reported routinely; discussed in detail with referring doctor
<b>Customised Approach</b>	Standardised pathway	Personalised care based on symptoms and history

# Mammograms

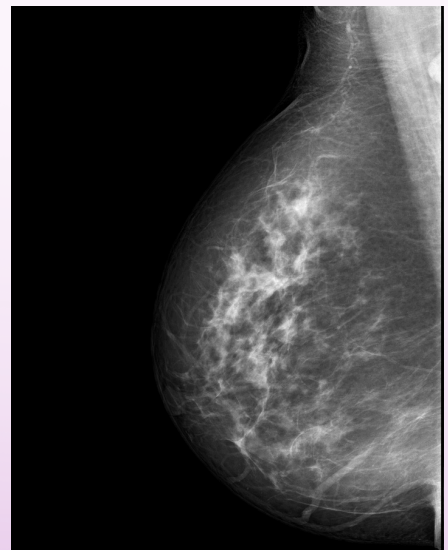
Mammography uses low-dose X-rays to examine breast tissue. It's the gold standard for screening and early detection, especially in women over 40.

At BIV, we offer 3D (tomosynthesis) mammograms, which provides a more detailed view - especially useful in dense breasts.

## Screening Recommendations:

- Women aged 50–74: Every 2 years (BreastScreen standard)
- Women aged 40–49: Optional, but encouraged
- At BIV, we recommend you screen for as long as you're able. Cancer has no age limit.
- Discuss with your GP if you should screen annually, especially if you have risk factors or prefer a more risk-averse approach.

Compression is used to stabilise the breast—brief but essential for image clarity.





# Contrast-Enhanced Mammography (CEM)

CEM is a more advanced imaging option that combines mammography with contrast dye to highlight areas with abnormal blood flow.

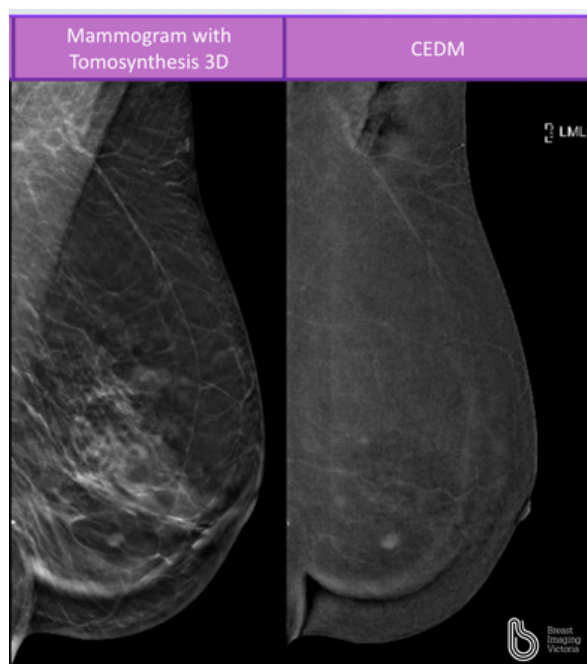
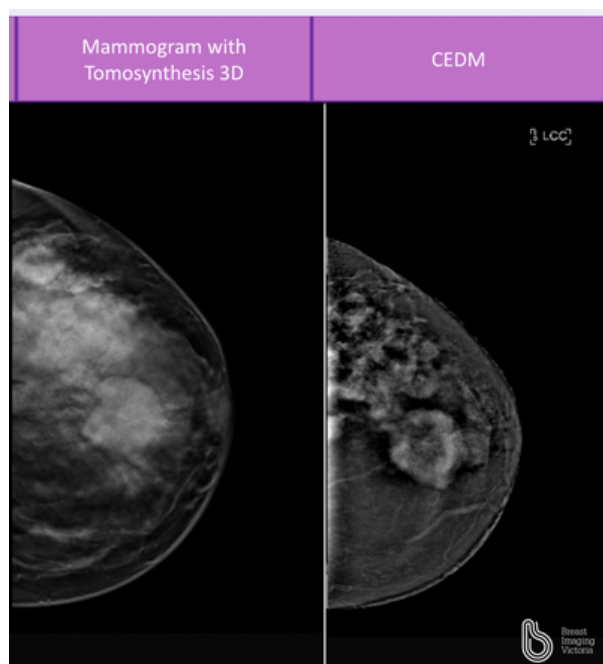
## When is it used?

- Dense breasts
- Suspicious findings on ultrasound
- Surgical planning
- High-risk patients needing clearer assessment

## Benefits:

- Detects cancers not seen on standard imaging
- Offers a faster and more accessible alternative to MRI
- May reduce the need for multiple tests

At BIV, we offer contrast mammography and guide GPs on when it may be appropriate.



# Ultrasounds

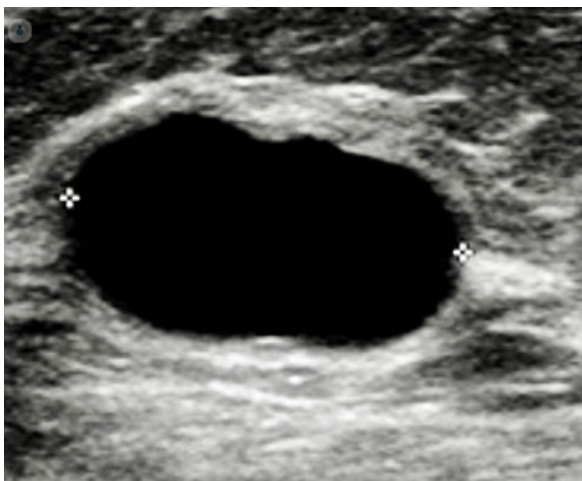
Safe. Painless. Effective - especially in dense breast tissue.

Breast ultrasound uses high-frequency sound waves (not radiation) to create detailed images of the breast tissue. It's a key tool we use alongside mammograms to provide a more complete picture, especially for younger women and those with dense breasts.

## What It's Used For:

- Further assessment of abnormal areas seen on a mammogram
- First-line imaging for younger women (<35) or pregnant/lactating patients
- Characterising lumps (solid vs. fluid-filled like cysts or abscesses)
- Guiding biopsies and other procedures
- Assessing implant integrity

At BIV, we often use ultrasound in combination with mammography or contrast mammography for a more thorough evaluation. Your radiologist will decide the best approach based on your age, breast density, symptoms, and history.



# Understanding Breast Density

Breast density refers to the amount of fibroglandular (dense) tissue compared to fatty tissue. When you receive a mammogram report, it may include your breast density categorised by the BI-RADS (Breast Imaging Reporting and Data System):

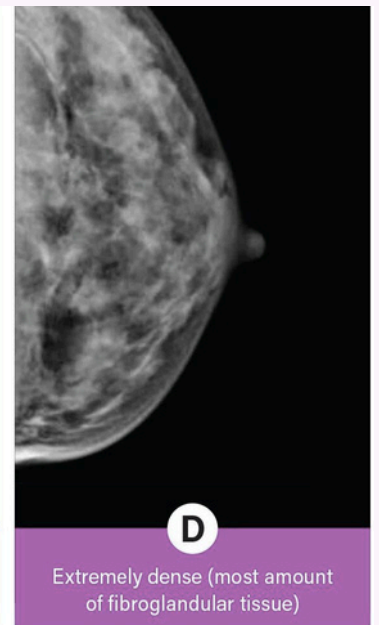
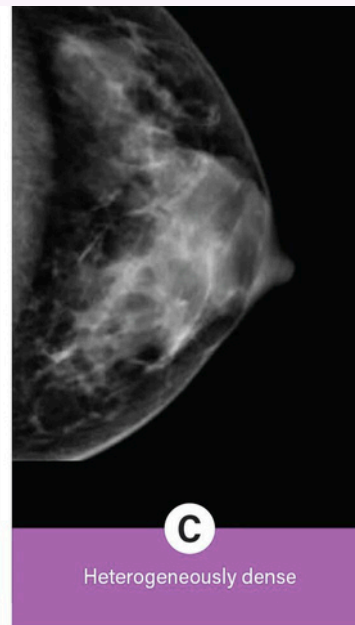
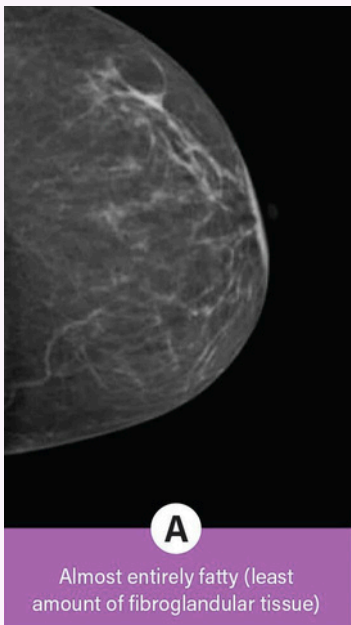
- A: Fatty
- B: Scattered
- C: Heterogeneously Dense
- D: Extremely Dense

## Why it matters:

- Dense tissue can mask cancers on mammograms
- It may slightly increase your risk of breast cancer

## What happens if you have dense breasts?

- You may need ultrasound in addition to mammography
- Contrast mammography may be recommended for more clarity
- At BIV, we have always reported breast density to help personalise your care.



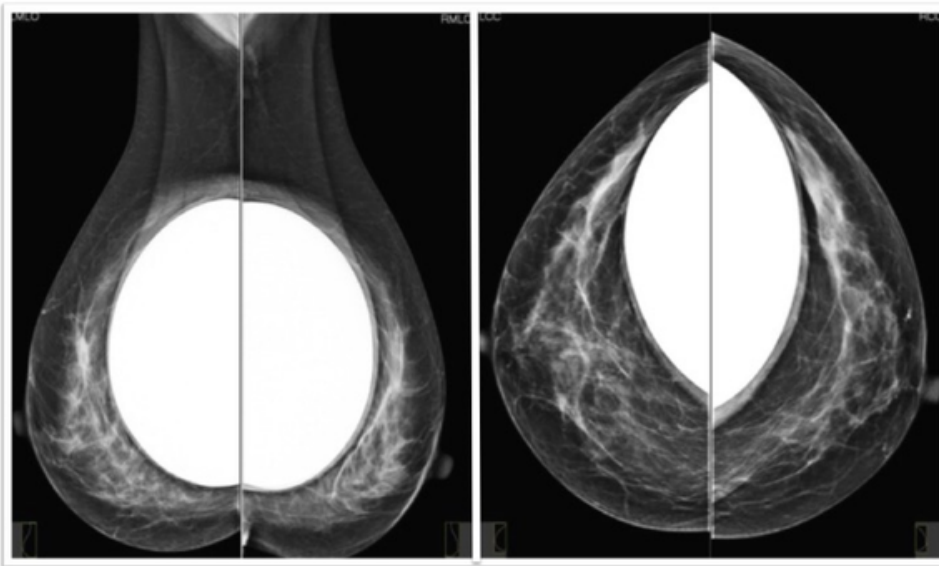
# Breast Implants & Imaging

Yes, you still need breast screening if you have implants.

At BIV, we use specialised techniques:

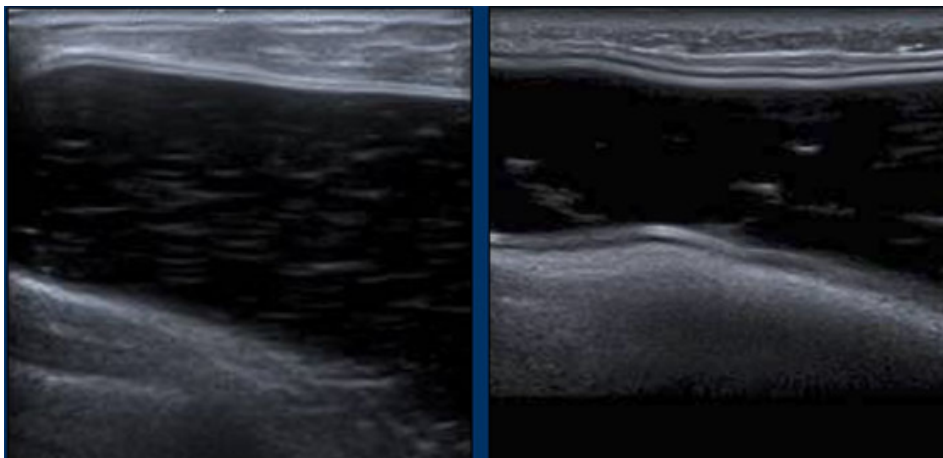
- Mammograms with soft compression
- Implant-displacement views to see more tissue
- Ultrasound for assessing both tissue and implant integrity

For post-mastectomy reconstruction implants (with no breast tissue), ultrasound alone may be sufficient.



**Implant  
mammogram**

image credit: <https://dx.doi.org/10.1594/ecr2017/C-1251>



**Implant  
ultrasound**

# The Triple Test Explained

The triple test is a best-practice diagnostic pathway:

1. Clinical Breast Exam
2. Imaging (mammogram and/or ultrasound)
3. Biopsy if needed (Mammogram or Ultrasound Guided)

This approach increases accuracy and ensures the right next steps.

## When to See a Specialist

Speak with your GP if you notice:

- A new lump or thickening
- Skin changes or dimpling
- Nipple discharge, inversion, or rash
- Pain that is new or doesn't go away
- If you have family history of breast cancer or ovarian cancer, or other risk factors that you know of.

***Don't wait.***

***Early evaluation = better outcomes.***





# FAQs



## **How do I know if I have dense breasts?**

Breast density is determined by a radiologist through your mammogram report. We provide this information at Breast Imaging Victoria in your report.

## **Do mammograms hurt?**

There may be brief discomfort, but it's tolerable—and important for accurate imaging.

## **Do I need imaging if I'm pregnant or breastfeeding?**

Yes. Ultrasound is safe. Mammograms may still be used if medically necessary.

## **Can men get breast cancer?**

Yes, though less common, it can occur. Men with a lump or symptom should see a GP.

## **When should I start screening?**

From age 40, and earlier if you have risk factors. Screening should continue as long as you're well and willing.

## **I have been referred for a Breast MRI?**

Our services on site currently do not offer Breast MRI, however, our specialised clinical team will be able to assist in finding a service which is able to provide such services.

*There are no silly questions when it comes to your health. The more you understand, the more empowered you become.*

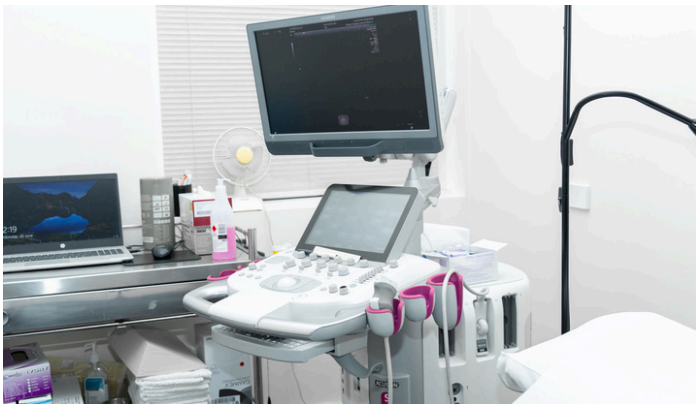


# Breast Imaging Victoria

We're here to help women feel informed, supported, and confident in their breast health journey.

With on-site specialised radiologists, co-located breast surgeons, and an experienced team, we provide:

- ✓ Mammography (3D Tomosynthesis and Contrast-Enhanced)
- ✓ Ultrasound
- ✓ Image-guided biopsy (Ultrasound & Mammography)
- ✓ Rapid turnaround of results
- ✓ Compassionate, collaborative care



## Your Support Squad

At Breast Imaging Victoria, we're dedicated to providing you with comprehensive breast care, from screening to diagnosis. If you have questions about your concerns or want to discuss your screening options, we're here to help

## Contact Us

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