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## Accuracy of Mammograms

[Click here to watch: Quality Mammography Video](#)  
Macromedia Flash

Mammography is good at finding breast cancer, especially in women ages 50 and older. Overall, the sensitivity of mammography is about 78 percent and among women over 50, sensitivity is about 83 percent [27-28]. This means mammography correctly identifies about 78 percent of women who truly have breast cancer.

### False positive results

One downside of missing so few cancers is false positive results. These occur when a mammogram finds something that looks like cancer, but turns out to be benign (not cancer). The more mammograms a woman has, the more likely she is to have a false positive result that will require [follow-up tests](#). One large study found the chance of having a false positive result after 10 yearly mammograms was nearly 50 percent [29].

Getting a false positive result can cause fear and worry [30]. However, this does not outweigh the benefit of mammography for most women. The goal of mammography is to find as many cancers as possible, not to avoid false positive results.

### Postmenopausal hormone use and mammogram findings

Many women take postmenopausal hormones (also known as menopausal hormone therapy and hormone replacement therapy) to relieve menopausal symptoms. However, the use of postmenopausal hormones increases breast cancer risk [31]. So, although postmenopausal hormone use is approved for the short-term relief of menopausal symptoms, the U.S. Food and Drug Administration (FDA) recommends women use only the lowest dose that eases symptoms for the shortest time needed [32].

Studies are looking at how postmenopausal hormone use affects the accuracy of mammograms. Results from the Women's Health Initiative showed women who took postmenopausal hormones had breast cancers found at a more advanced stage than breast cancers found in women who did not take these hormones [33]. The women who took hormones also had higher breast density and more abnormal mammograms (not explained by the higher breast density) that needed follow-up testing [33-37]. Exactly how, and if, these results may affect future screening guidelines is unclear.

Learn more about [postmenopausal hormone use and breast cancer risk](#).

### Experience matters

To get an accurate mammogram reading, you need a high quality image and a good reading of that image. The training and experience of the [radiologist](#) who reads the

mammogram may improve his/her ability to interpret the image. Some studies show high-volume mammography increases accuracy [38-41]. Radiologists who read a lot of mammograms each year are generally better able to interpret them compared to those who read fewer or those who do not read them routinely [38-41].

Seeking a high-volume mammography center may help you feel assured your mammogram will be read correctly, but a lower-volume center may be just as good at reading mammograms [42]. Most lower-volume, certified mammography centers provide good quality screening.

One way to assess the quality of a mammography center or radiologist is by the percent of false positive results each year (although it may be hard to get this information). The lower the false positive rate, the better the center or radiologist is at accurately reading mammograms. The Agency for Healthcare Research and Quality guidelines suggest a false positive rate of no more than 10 percent per year [43].

## Can mammography miss breast cancer?

Although mammography is the best screening tool for breast cancer today, it is not perfect. Mammography misses about 17 p