



**RCI**

Radiology Consultants  
of Iowa, PLC



# Breast Density

What You Should Know

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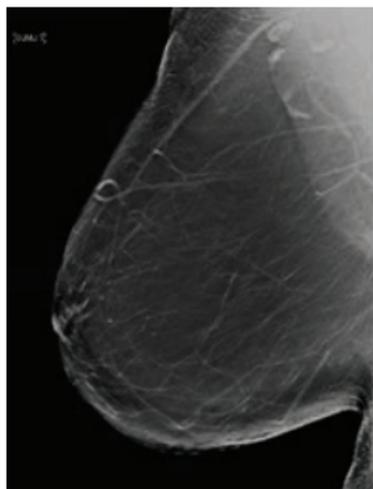
## What is breast density?

Breast tissue is composed of fibrous, glandular and fatty tissue. Your breasts are considered dense if you have a lot of fibrous or glandular tissue but not much fat. Breast density is determined by looking at your mammogram, not by how your breast feels.

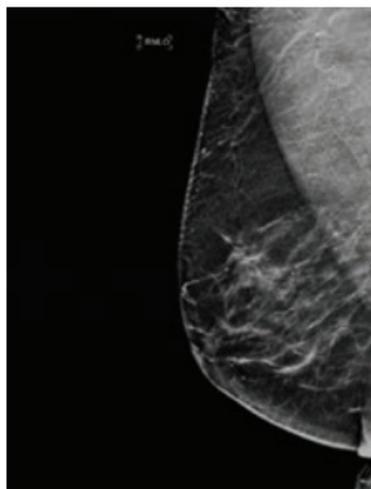
## How do I know if I have dense breasts?

Breast density is determined by the radiologist who reads your mammogram. There are four categories of mammographic density. The radiologist assigns each mammogram to one of the categories. Your doctor should be able to tell you whether you have dense breasts based on where you fall on the density scale. (See scale below)

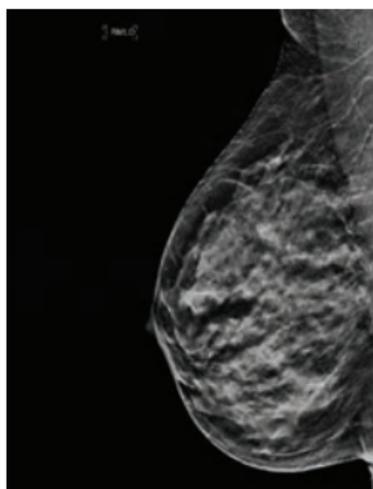
## Breast density categories



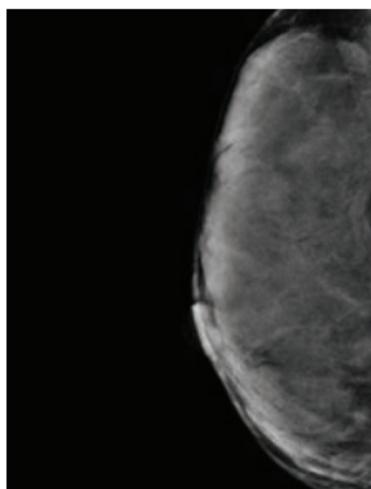
10% of women  
Almost entirely fatty



40% of women  
Scattered areas of  
fibroglandular density



40% of women  
Heterogeneously dense



10% of women  
Extremely dense

## Why is breast density important?

Dense breast tissue is important for two reasons:

1. Depending on how dense your tissue is, it may moderately increase your risk of developing breast cancer.
2. Most importantly, dense breast tissue makes it much more difficult to find cancer on mammograms. Dense tissue can actually hide a cancer when it is early and has the best chance for cure.

## If I have dense breasts, do I still need a mammogram?

Yes. A mammogram is the only medical imaging screening test proven to reduce breast cancer deaths. Many cancers are seen on mammograms even if you do have dense breast tissue. Supplemental screening tests are available for women with dense breasts to increase the cancer detection rate over that of mammography screening alone.

## If I have dense breasts what other tests should I consider?

Studies have shown that ultrasound, magnetic resonance imaging (MRI), or molecular breast imaging (MBI) can help find breast cancers that can't be seen on a mammogram.

No breast cancer screening test is perfect. There will be times when something is found that requires further testing, including possibly a needle biopsy, to determine if there is truly a cancer present.

Also, the cost of ultrasound, MRI, or MBI may not be covered by insurance. Many insurance companies require their members to obtain a precertification before having imaging exams. Please speak with your insurance provider to better understand coverage requirements.

This information provided by  
Radiology Consultants of Iowa,  
RCIowa.com

## **What should I do if I have dense breasts?**

### **What if I don't?**

If you have dense breasts, please talk to your health care provider. Together, you can decide which, if any, additional screening exams are right for you.

If your breasts are not dense, other factors may still place you at increased risk for breast cancer, including: a family history of the disease, previous chest radiation treatment for cancer and previous breast biopsies that show you are high risk. Talk to your health care provider and discuss your history.

Even if you are at low risk, and have entirely fatty breasts, you should still get a mammogram every year starting at age 40.

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**For more information on breast density, visit:**

**[www.densebreast-info.org](http://www.densebreast-info.org)  
[www.iowabreastdensity.com](http://www.iowabreastdensity.com)**

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