

Expansion of the Ontario Breast Screening Program for Individuals Ages 40-49

Frequently Asked Questions

The following questions and answers have been developed to provide you with information about the changes associated with the fall 2024 expansion for the Ontario Breast Screening Program to people ages 40-49.

What is the Ontario Breast Screening Program?

The Ontario Breast Screening Program (OBSP) is an organized provincial screening program that encourages people in Ontario to get screened for breast cancer.

Who is currently eligible for breast screening through the OBSP?

Currently, the OBSP recommends that most eligible women, Two Spirit, trans and nonbinary people at average risk of breast cancer receive a mammogram every two years between the ages of 50 to 74.

For those who are at high risk of breast cancer (e.g., have genetic mutations that increases their risk of breast cancer), the OBSP recommends mammograms and breast magnetic resonance imaging (MRI) every year from the ages of 30 and 69.

Refer to the [OBSP website](#) for additional details on eligibility, including for those with high risk of developing breast cancer.

What will change?

In fall 2024, the OBSP will recommend eligible women, Two-Spirit, trans, and nonbinary people ages 40 to 49 have a conversation with a health care provider regarding the risks and benefits of screening, as well as their values and preferences, to determine if screening is right for them.

Those who decide to screen will be able to self-refer for a screening mammogram at OBSP sites and receive the benefits of organized screening, including result and recall correspondence and follow-up.

How do people book their breast screening?

Currently, eligible people ages 50 to 74 can call the [Ontario Breast Screening Program Site](#) of their choice to make an appointment (a referral from a doctor or nurse practitioner is not needed).

With the changes to the program in fall 2024, people ages 40 to 49 will also be able to self-refer for a screening mammogram at OBSP sites. Prior to booking an appointment, people ages 40-49 are

encouraged to have a conversation with a health care provider regarding the risks and benefits of screening as well as their values and preferences to determine if screening is right for them.

Why will this not be implemented until next year?

Time and resources are needed to implement the proposed changes, specifically to hire additional staff, develop new policies and procedures, update data collection and information management/information technology (IM/IT) processes to support the inclusion of people ages 40 to 49. Additional time is also required for change management with health care providers to ensure that they are well supported to help people ages 40 to 49 make an informed decision on whether to screen.

What is the current process for screening mammography for individuals ages 40-49?

Currently, people ages 40-49 at average risk of developing breast cancer are not eligible for screening through the OBSP. However, they are encouraged to make a personal decision about screening in consultation with their family doctor or nurse practitioner and can be referred for a screening mammogram outside the OBSP.

Why is this change being made?

This change will enable people ages 40 to 49 who choose to screen for breast cancer through the OBSP to receive the benefits of being screened in an organized cancer screening program. Benefits of organized cancer screening programs include:

- reminding screening participants when it is time for their next screening test;
- helping participants coordinate the next steps in their screening process if needed; and
- measuring program quality and performance.

Expansion of the screening population to people ages 40 to 49 will also increase access to breast screening for people without a family doctor or nurse practitioner (i.e., because they can self-refer). As well, if a person decides to screen and has abnormal screening results, the OBSP will provide support for referrals for diagnostic follow up for people without a family doctor or nurse practitioner. This is important due to the high number of patients who do not have a primary care provider in Ontario.