

### Consultant Breast Surgeon – Mr Simon Pain

Mr Pain has many years' experience within this specialty. He has been a Consultant at the Norfolk and Norwich University Hospital since 2003, and is Lead Surgeon at the Breast Unit. He trained at Cambridge University and Addenbrooke's Hospital before coming to Norwich.

### Charges and payment

The breast screening service is open to all, please contact our customer service advisors on **01603 255 614** who will be happy to advise the cost for your initial consultation and scans.

We can accept payment by debit or credit card, cheque or cash. We work with all major medical insurers and those wishing to claim should confirm that their treatment is pre-authorised by their insurer before proceeding.

### Making an appointment

It is not necessary to be referred by a GP.

Simply contact our customer service advisors on **01603 255 614** to make an appointment.

### How to find us



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For more detailed directions to the hospital please visit [www.spirehealthcare.com/norwich](http://www.spirehealthcare.com/norwich)



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### Breast Screening Clinic

Be 'breast aware' – regular breast screening promotes the likelihood of early detection and treatment for breast cancer



The Breast Screening Clinic has been specially designed to provide a high quality consultant led service for the 40 - 50 year age group.

At the initial assessment you will receive:

- a private consultation with an experienced consultant breast surgeon
- a clinical breast examination
- a mammogram
- information about breast cancer risk factors and family history
- genetic risk calculation – details taken about your family history
- advice regarding on-going 'breast awareness'
- a personal plan for on-going screening – at intervals depending on your risk group

#### How common is breast cancer?

Breast cancer is the most common cancer among women in the UK, with more than 40,000 new cases diagnosed each year. Although the risk of breast cancer increases with age, about 1 in 7 cancers are diagnosed in women under the age of 50. Despite this increase, the number of people dying from breast cancer is reducing sharply. This is due to a combination of improved treatments and earlier detection.



#### What is a mammogram?

A mammogram involves taking X-ray images of the breasts whilst they are being gently compressed. It can cause mild discomfort.



Breast screening using mammograms is designed to detect breast cancer or pre-cancerous changes at an early stage, so that they can be treated more effectively. At the moment, the NHS Breast Screening Programme offers mammograms every three years to all women aged 50 - 70. This will increase to 47 - 73 over the next few years. There is currently no routine screening for younger women in their 40s. In this age group, there are fewer changes to detect and the greater density of the breast tissue makes mammograms less clear. Even so, it remains a very good screening test which will detect many changes. In this younger age group, screening mammograms need to be performed more often in order to be effective. Therefore, your initial mammogram will be followed by an individualised plan for regular recalls and future screening.

#### How will I find out my results?

Your consultant will contact you by letter soon after your consultation with your results. If an abnormality is detected, you may need to undergo further investigations. These could include further mammographic views, an ultrasound examination of the breasts and a tissue biopsy – all of which are available at Spire Norwich Hospital.

Alternatively you can choose to be referred for such investigations under the NHS via your GP.

All mammograms will be reported by specialist Consultant Breast Radiologists who also work in the NHS Breast Screening Programme.

#### How important is family history?

As breast cancer is so common, it is not unusual to have a relative who has been affected. However, only a small number of cancers are thought to be due to inherited risk – less than 1 in 10 cancers are related to breast cancer genes. The chance of cancer genes being present depends on the number and closeness of affected relatives – as well as their age at diagnosis. Advanced computer programmes are available which can estimate the risk of carrying one of these genes.

