"Dr. Lower, I have no family history of cancer and I exercise daily and eat healthy. Plus my mammogram six months ago was normal. I cannot believe I have breast cancer". Unfortunately, I heard these words approximately 20 times in the last three months from women with screening mammograms that revealed dense breast tissue. It is disheartening to know that their cancers might have been detected with supplemental screening.

I am Elyse E. Lower, MD, Director of the University of Cincinnati Cancer Center (UCCC) Comprehensive Breast Cancer Program and Professor of Internal Medicine. As a medical oncologist for more than 30 years in Cincinnati, it has been my pleasure to provide care to thousands of women and a few good men with breast cancer. I am neither a breast imager who reads mammograms nor a breast surgeon. However, I prescribe the systemic therapies including hormone pills, chemotherapy, and biologic treatments needed to prevent cancer recurrence or eradicate active disease.

Participating in a regular screening program does not prevent breast cancer but it helps us diagnose breast cancer at its earliest most treatable and potentially curable stage. Early detection remains the best protection. When patients are diagnosed with earlier stage breast cancer, overall survival will be improved. Additionally, lesser surgery and radiation may be offered and in many cases chemotherapy may be entirely avoided.

Mammography remains the gold standard for screening women at average risk for breast cancer. In fact, mammogram reports now universally comment on breast density and how increased density can result in obscuring small masses that could be early breast cancer. Like other risk factors such as family history, breast density identified on mammography is an independent risk factor for breast cancer.

H. B. 371 is not designed to replace mammographic screening as the standard of care for eligible women. Furthermore, this bill is not intended to change current screening practices for women with average breast density. However, this bill is designed to **update** our screening practices for women diagnosed with dense breast tissue on screening mammogram. As we all know, technology evolves and improves with time. How many of us are still using our original cell phones or even a version from three to five years ago? H. B. 371 provides the much needed update which will allow Ohio women with dense breast tissue on screening mammogram to receive supplemental screening with breast MRI or ultrasound.

Thank you for considering this important bill for all women in the State of Ohio, including my patients at the UCCC.

Elyse E. Lower, MD

Director, UCCC Comprehensive Breast Cancer Program

**Professor Internal Medicine** 

Director, Breast Medical Oncology

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