

Screening & High-Risk Assessment

If breast or ovarian cancer runs in your family, or you have been told you have dense breasts or a gene mutation, a clear plan takes away a great deal of uncertainty.

What it involves

Risk assessment includes a detailed family history, referral for genetic counselling and testing (such as BRCA1 and BRCA2) when appropriate, and a personalised screening plan with mammography, ultrasound or MRI.

When it is recommended

Consider an assessment if a close relative was diagnosed with breast cancer young, more than one relative is affected, there is ovarian or male breast cancer in the family, or a known gene mutation has been found.

Our approach

Options are discussed openly and without pressure — from intensified screening to risk-reducing surgery — so you can make the decision that fits your life.

In more detail

For women at very high risk, risk-reducing mastectomy with immediate reconstruction lowers breast cancer risk by around 90 percent. It is a personal decision, made over time and with full information.

For most women, regular screening starting at the right age is the most important step. Dense breasts may need ultrasound in addition to a mammogram.

Recovery

Assessment and screening involve no recovery time. Risk-reducing surgery, if chosen, is planned like a mastectomy with reconstruction and is discussed in detail beforehand.

Common questions

When should I start having mammograms?

Most women start at 40. Women with a strong family history or gene mutation may start earlier, sometimes with MRI.

Should I be tested for BRCA?

Testing is recommended when your personal or family history suggests a hereditary risk. Genetic counselling before testing helps you understand what the result means for you and your family.

This brochure is general information and does not replace a consultation. To book, call 011 014 0414 or WhatsApp 062 415 6612.