



WELCOME
Wellness Where You Are
Mammogram 101
Dr. Cheryl Ewing, MD
May 15, 2021



Partner

Language Interpretation provided by:

San Mateo County-Behavioral Health & Recovery Services, Office of Diversity & Equity www.smchealth.org/bhrs/ode



SAN MATEO COUNTY HEALTH
**BEHAVIORAL HEALTH
& RECOVERY SERVICES**

Acknowledgements

- May is Mental Health Month <https://www.smchealth.org/post/mental-health-month>



- May is Asian Pacific American Heritage Month, to learn more: <https://asianpacificheritage.gov>
- The increase discrimination and violence to our AAPI community www.stopaapihate.org

Housekeeping

- Appreciate your patience and flexibility as BACHAC continues to navigate the virtual world
- BACHAC's steps to protect privacy
- Everyone is on mute
- Spanish interpretation available
- Write questions in the Chat or Q&A
- Session is being recorded
- Recording and slides to be posted on BACHAC website



¿ALGUIEN QUIERE CUIDAR DE TI!

Mills Peninsula se siente honrado de ofrecer mamogramas de detección temprana sin costo a los residentes de la comunidad sin seguro médico.

- El Programa Comunitario del cuidado de los senos está abierto el 3er sábado de cada mes.
- Si desea inscribirse en el 3er sábado de mes el Programa Comunitario del cuidado de los senos por favor llame, Erella Chabaz al 650.463.9663, Julia Campos al 650.886.6071, Adriana Rentería al 650.328.2099 o al número Nacional al 801.230.2905 para programar su cita.
- También puede querer hacer este mamograma de lunes a sábado.
- Para hacer cita de su mamograma de detección temprana gratuita entre semana, por favor llame al 650.696.4404 (Línea telefónica de programación de citas del Mills Peninsula) o al planificador que contesta que le ayudará en la realización de los senos del Community Mammogram Program.
- Si tiene seguro médico o está sin seguro médico, puede calificar para recibir asistencia financiera.

UN MAMOGRAMA DE DETECCIÓN TEMPRANA ES PARA USTED SI:

- Si no ha tenido un mamograma en el último año
- Si no tiene síntomas como, dolor, bultos o enrojecimiento en el área del seno
- Si usted es mayor de 40 años

BACHAC

- A 25-year grass roots community health organization
- Address health disparities in diverse communities across generations
- Through awareness, education, access to resources, advocacy
- In partnership/collaboration with a diverse groups
- Supporting a culture of Equity, Innovation and Inclusion

VAPE STOPS HERE

Sponsored by Bay Area Community Health Advisory Council (BACHAC) and San Mateo County Tobacco Education Coalition

THE DANGERS OF VAPING

- Vaping slows brain development in teens.
- Vaping damages your lungs.
- Vaping contains nicotine which is an addictive drug.

Sign our petition at vapestopshere.com

WELLNESS WHERE YOU ARE
—May Online Seminars—

We have two online seminars coming up in May... Sign up for one or both! See more information at bachac.org or call us at (650) 452-3684.

<p>— MAY 13 ONLINE SEMINAR —</p> <p>Thursday, May 13 8:30am - 8:30pm</p> <p>Pacific Islander Health & Wellness: What You Need to Know- COVID Edition</p> <p>with Dr. Julian Ikegaki, Dr. Kamela Torres, and Carol Linn Thompson. Moderated by Katerine Malone Jones</p> <p>Spanish and Tagalog interpretation will be provided.</p> <p>Join us for a conversation about what our Pacific Islander community needs to know about changing COVID, especially the important topic of vaccination. Sign-ups are still being accepted to answer your questions. Register today!</p> <p>All registered attendees will be entered into a drawing for a \$10 gift card!</p> <p>Register for Pacific Islander Seminar https://bit.ly/3k7Z9H1</p>	<p>— MAY 15 ONLINE SEMINAR —</p> <p>Saturday, May 15 10:30am - Noon</p> <p>Mammogram 101</p> <p>with Dr. Cheryl Wong</p> <p>Spanish interpretation will be provided.</p> <p>Dr. Cheryl Wong, UCSF Professor and breast surgeon, will provide an overview of mammograms, discuss the latest research, and explain new forms of breast cancer with the new chapter of breast cancer research. Sign-up for a time will be dedicated to answering your questions. Don't miss it!</p> <p>Register for Mammogram 101 Seminar https://bit.ly/3k7Z9H1</p> <p>translation for both seminars by </p>
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co-sponsored by

To learn more about the Bay Area Community Health Advisory Council (BACHAC) and supporting their address wellness, visit us at bachac.org or call (650) 452-3684.

JOIN THE MOVEMENT
NOW THROUGH EVENT DAY ON OCTOBER 3
SIGN UP AT MYSOULSTROLL.COM

CENSUS 2020

Be COUNTED

The North Central San Mateo Census Caravan is Coming to Your Block!

COME OUT TO CHEER US ON AND HELP BUILD COMMUNITY AWARENESS TO COMPLETE CENSUS 2020

WHERE: The caravan will drive through the North Central San Mateo neighborhood, for example, North B Street, Amphlett and Humboldt in the 700 Block area, Monte Diablo, Ishihara, Poplar

WHEN: Saturday, September 19th
TIME: 12:30pm - 3:30pm

Join us for a socially-distanced event by gathering in front of your home and cheering us out!

If you haven't completed the Census yet, contact: Trish@ncsmtc.org or call: (415) 926-2179

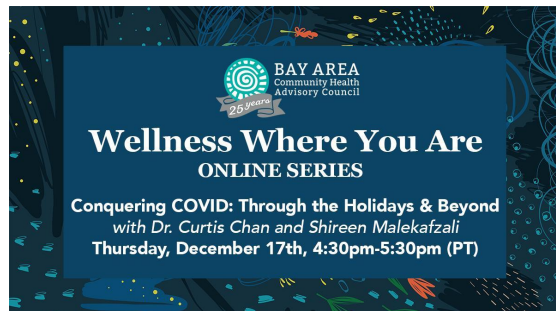
Wellness Where You Are: Online Series

BAY AREA
Community Health
Advisory Council

25 years

WWUR Session Purpose

- Support community with relevant information, resources & tools during this challenging time (Started May 6, 2020, 15 sessions, 400+ attendees)
- Address unique needs of the community during this pandemic
- Provide a safe forum to address questions, hear perspectives
- Increase awareness, access to important information, tools, resources- not a substitute for professional advice



Meeting Agreements

- Be engaged
- Be curious and open
- Challenge ideas, not the person
- Seek to understand
- Stretch yourself
- Speak your truth, respect others' truths
- Help us....Help you (Please complete the evaluation)





UCSF Health

UCSF Breast Cancer Surgeon Dr. Cheryl Ewing

The seal of the University of California is visible on the left side of the slide, partially obscured by a teal vertical bar. It features a central figure holding a book and a torch, surrounded by the text "UNIVERSITY OF CALIFORNIA" and "1868".

WHO IS AT Risk for Breast Cancer?

“What to do with that risk”

CHERYL EWING, MD

UCSF CLINICAL PROFESSOR of Surgery

MAY 15, 2021

Breast Cancer Statistics

- About 1 in 8 U.S. women (about 13%) will develop invasive breast cancer.
- In 2021, an estimated 281,550 new cases of invasive breast cancer are expected to be diagnosed in women in the U.S.
- 49,290 new cases of non-invasive (in situ) breast cancer.
- About 2,650 new cases of invasive breast cancer are expected to be diagnosed in men in 2021. A man's lifetime risk of breast cancer is about 1 in 833.
- About 43,600 women in the U.S. are expected to die in 2021 from breast cancer.

Male Breast Cancer

- Usually present at a more advanced stage
- earlier invasion into the chest wall
- M:F ratio is 1:130. 4% of breast cancers.
- almost always invasive ductal, ER(+)
- risk factors:
 - radiation to chest wall
 - BRCA2

Trends in Five-year Relative Cancer Survival Rates (%), 1975-2010

Site	1975-1977	1987-1989	2004-2010
All sites	49	55	68
Breast (female)	75	84	91
Colon	51	60	65
Leukemia	34	43	60
Lung & bronchus	12	13	18
Melanoma of the skin	82	88	93
Non-Hodgkin lymphoma	47	51	71
Ovary	36	38	45
Pancreas	3	4	7
Prostate	68	83	100*
Rectum	48	58	68
Urinary bladder	72	79	79

5-year relative survival rates based on patients diagnosed in the SEER 9 areas from 1975-1977, 1987-1989, and 2004-2010, all followed through 2011.

*99.6%

Source: Surveillance, Epidemiology, and End Results (SEER) Program, National Cancer Institute, 2014.

Breast Cancer Risk

Who is at Risk?

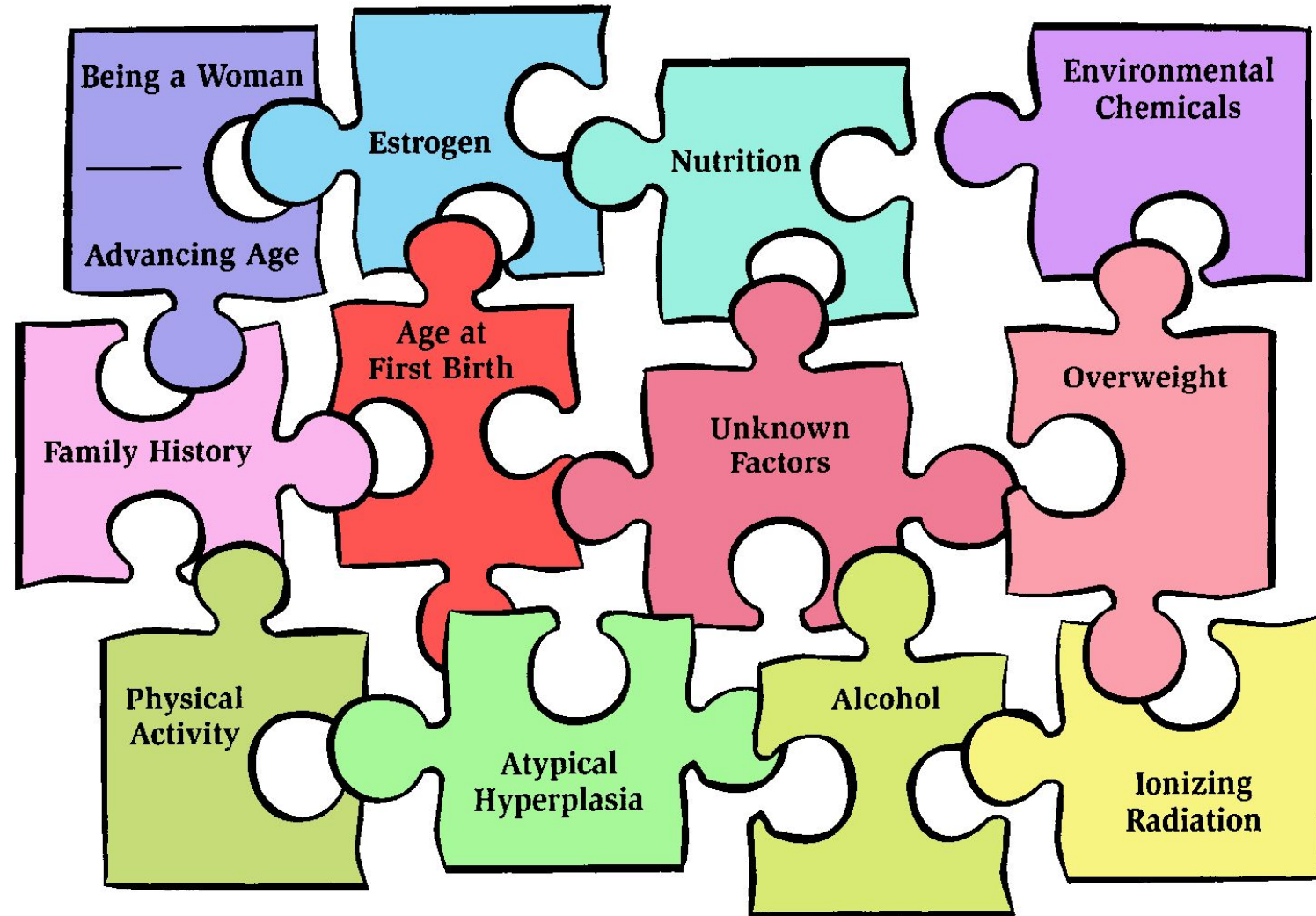
OUR FRIENDS



OUR FAMILY



The Puzzle of Breast Cancer



Genetic Risk

BRCA1 mutation rates vary by race and ethnicity, age

Researchers have found that a gene mutation linked to breast cancer is more common in some ethnic or racial groups of breast cancer patients than others. In all groups, a larger percentage of younger breast cancer patients had the mutation than older patients.

ETHNICITY/RACE	BRCA1 PREVALENCE, ALL AGES	UNDER 35 YEARS IN AGE
Asian-American	0.5 %	2.4 %
African-American	1.3 %	16.7 %
White, non-Hispanic	2.2 %	7.2 %
Hispanic	3.5 %	8.9 %
Ashkenazi Jewish	8.3 %	66.7 % (*)

() based on three patients tested*

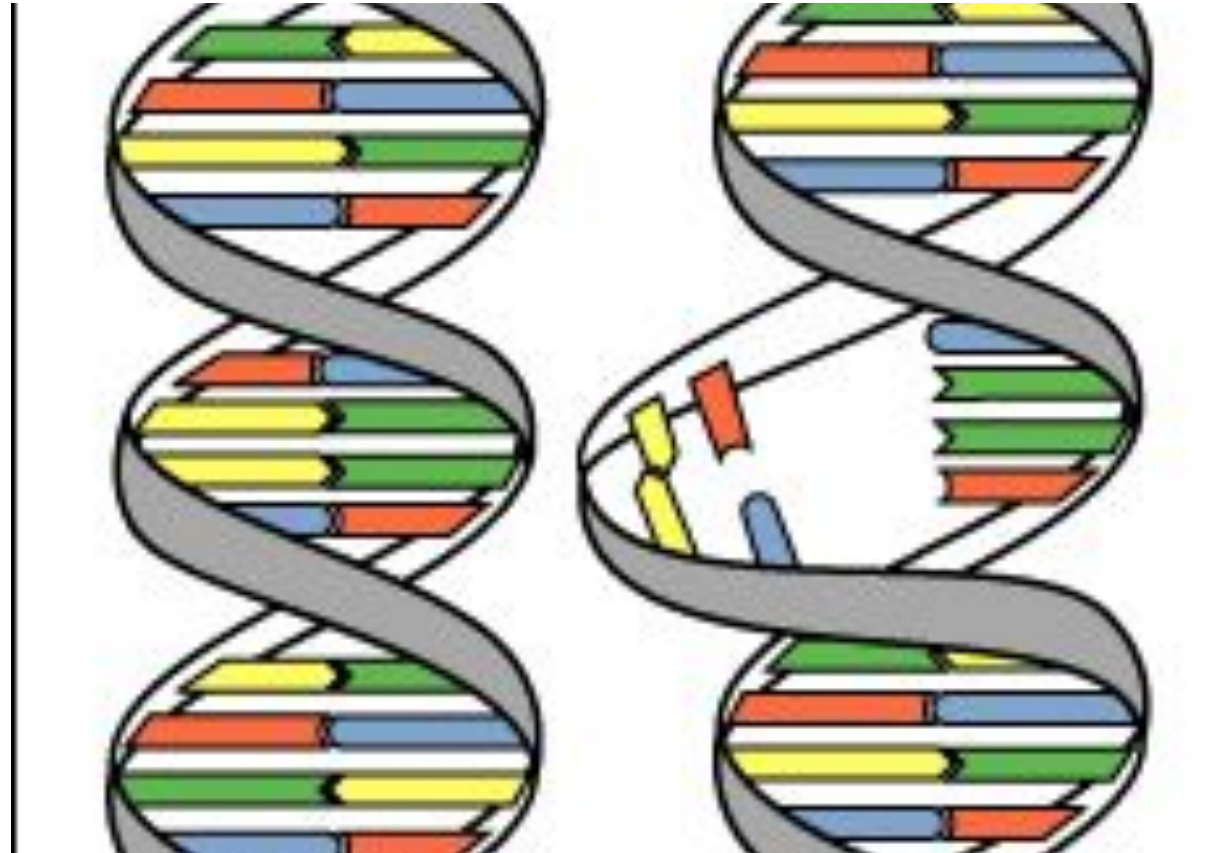
Breast Cancer Risk

- Genetic Risk
- Non Genetic Risk, combination Genes and environment.

Breast Cancer Risk-Genetics

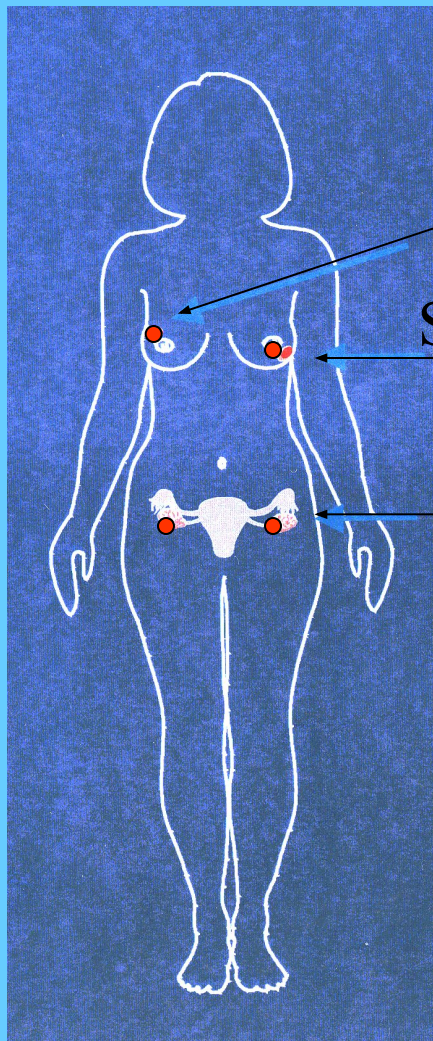
Mutations in the DNA that lead to the development of breast cancer.

Breast Cancer Risk-Genetic



BRCA 1 and 2

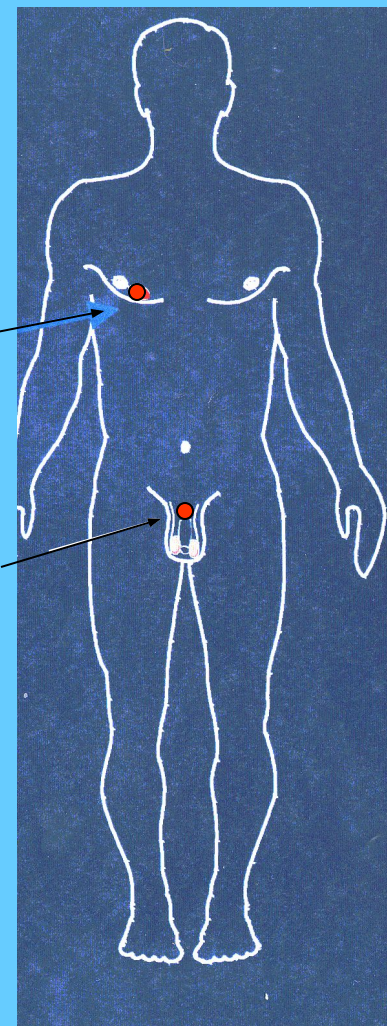
BRCA1-Associated Cancers: Lifetime Risk



Breast Cancer
85%

Second Primary
Breast Cancer
3% per year

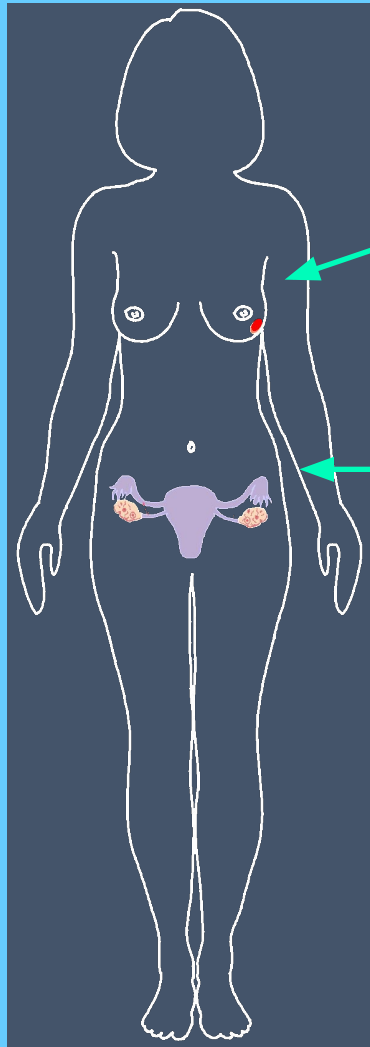
Ovarian Cancer
30-54%



Male
Breast
Cancer
?%

Prostate
Cancer
30 to
50%

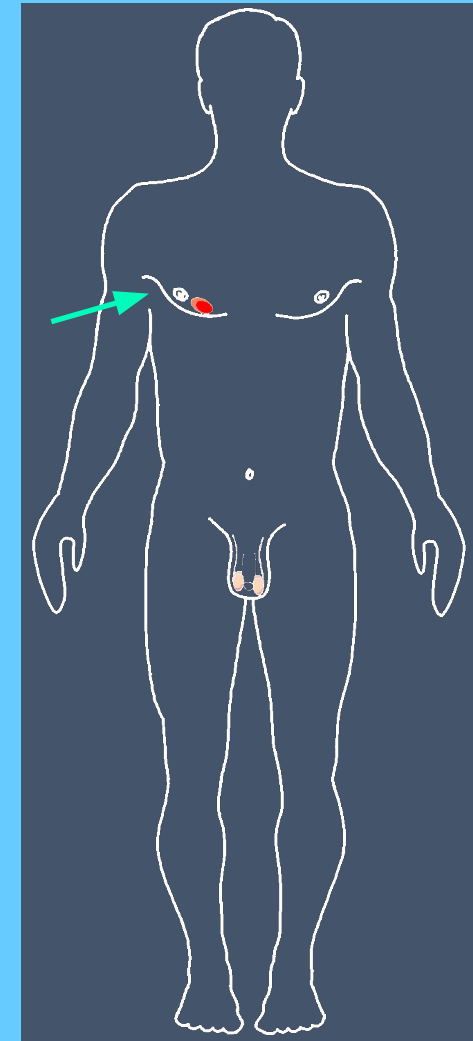
BRCA2-Associated Cancers: Lifetime Risk



breast cancer
(56%–85%)

ovarian cancer
(20%–30%)

male breast cancer
(6–8%)



Who Should get tested for BRCA 1 and 2 Mutations?



Breast Cancer Risk

Special Risk for being a mutation carrier for the BRCA 1 and 2 gene.

1. Any women diagnosed with breast cancer under the age of 40 years or multifocal, bilateral breast cancer under the age of 60 years.
2. Any women under the age of 60 and triple Negative ER(-), PR(-), HER-2 (-).
3. Any women of Jewish Ancestry (Ashkenazi), Hispanic, Mediterranean, Norwegian diagnosed with breast cancer under the age of 60 years.
4. Breast cancer diagnosis and family history of breast and ovarian cancer including 2nd degree relatives. Maternal and Paternal.
5. Family history with two 1st degree relatives with breast cancer and any one 2nd degree relative with ovarian cancer.

Breast Cancer Risk

All men with a breast cancer diagnosis should be tested for the BRCA 1 and 2 gene.

Special attention for TP53 mutation in melanoma families and colon carcinoma.

Others to screen are Cowden's and Li Fraumeni families. Li-Fraumeni strong family history of Leukemia, brain cancer, sarcoma, skin cancers.

Cowden's Disease (multiple hamatomas) multiple hamatomas on nose by age 20 and in nasal and oral mucosa. Lifetime risk for breast cancer is 81%. Other associated cancers are thyroid, renal, pancreatic cancer. Benign disorders multi-nodular goiters and fibroadenomatosis.

Breast Cancer Risk



Oncology Genetic Test Report BRCA1/2 Sequencing and Del/Dup Analysis



PHYSICIAN	PATIENT	SAMPLE
	LAST, FIRST DOB: Age: Sex: Ethnicity: Patient ID: Ramos, Maria	Specimen ID: Date of Report: Date Collected: Date Received: Source: EDTA Whole Blood

OncoGeneDx: BRCA1/2 Sequencing and Del/Dup Analysis

Genes Evaluated: BRCA1, BRCA2

Test Indication
 Personal history of breast cancer. Family history of breast cancer.

Results Summary: POSITIVE

Gene	Results	Classification
BRCA1	c.68_69delAG(p.Glu23ValfsX17)	PATHOGENIC

This individual is heterozygous for a mutation in the BRCA1 gene, consistent with Hereditary Breast and Ovarian Cancer syndrome.

No additional reportable variants were detected by sequencing or deletion/duplication analysis in the BRCA1 or BRCA2 genes.

Lifetime Cancer Risks

- Lifetime cancer risks due to a BRCA1 mutation include: approximately 57-84% risk for breast cancer in women and 24- 54% risk for ovarian cancer. See interpretation. **

** Only the most commonly associated cancer risks are listed

Genetic mutations

Mutation	Absolute breast cancer risk - lifetime
BRCA1	Up to 65%
BRCA2	Up to 50%
TP53	Up to 80% (Li-Fraumeni syndrome)
CDH1	40-50%
STK11	30-55%
PTEN	Up to 85% (Cowden syndrome)
CHEK2	37%
PALB2	30-35%
ATM	33%

High penetrance



Moderate penetrance



Antoniou Am J Hum
Genet 2003
Valencia JAMA Surgery
2017
<http://www.ncbi.nlm.nih.gov/books/NBK1236>

Breast Cancer Risk

Non genetic mutation-Genetic and environmental factor.



Risk Factors for Breast Cancer

- Family History
- Age of Menarche
- Age of Menopause
- Age of first parity/parity status
- Previous diagnosis of breast cancer
- ADH/LCIS

Risk Factors for Breast Cancer

- Early radiation exposure
- Exogenous Estrogen
- Previous Biopsy (atypia/LCIS)
- Alcohol factor

Breast Cancer Risk

How Much Risk?

Risk Assessment Models to help determine your risk.

Your primary doctor or NP can help you with this assessment. Self-Assessment online.

Table 1. Known risk factors and their incorporation into existing risk models*

Variable	Relative risk at extremest	Gail	Claus	BRCAPRO	IBIS	BOADICEA	Jonker
Personal information							
Age	30	Yes	Yes	Yes	Yes	Yes	Yes
Body mass index	2	No	No	No	Yes	No	No
Alcohol intake	1.24	No	No	No	No	No	No
Hormonal and reproductive factors							
Age at menarche	2	Yes	No	No	Yes	No	No
Age at first live birth	3	Yes	No	No	Yes	No	No
Age at menopause	4	No	No	No	Yes	No	No
Hormone replacement therapy use	2	No	No	No	Yes	No	No
Oral contraceptive pill use	1.24	No	No	No	No	No	No
Breast feeding	0.8	No	No	No	No	No	No
Plasma estrogen level	5	No	No	No	No	No	No
Personal history of breast disease							
Breast biopsies	2	Yes	No	No	Yes	No	No
Atypical ductal hyperplasia	3	Yes	No	No	Yes	No	No
Lobular carcinoma in situ	4	No	No	No	Yes	No	No
Breast density	6	No	No	No	No	No	No
Family history of breast and/or ovarian cancer							
First-degree relatives with breast cancer	3	Yes	Yes	Yes	Yes	Yes	Yes
Second-degree relatives with breast cancer	1.5	No	Yes	Yes	Yes	Yes	Yes
Third-degree relatives with breast cancer	1.3	No	No	No	No	Yes	No
Age of onset of breast cancer in a relative	3	No	Yes	Yes	Yes	Yes	Yes
Bilateral breast cancer in a relative	3	No	No	Yes	Yes	Yes	Yes
Ovarian cancer in a relative	1.5	No	No	Yes	Yes	Yes	Yes
Male breast cancer	3-5	No	No	Yes	No	Yes	Yes

Seek Genetic Counseling and risk prevention program



What to do if you are BRCA 1 or 2 Positive?

- Consult with a breast surgeon.
- Consult with a genetic counselor.
- Consult with a Gynecologist.



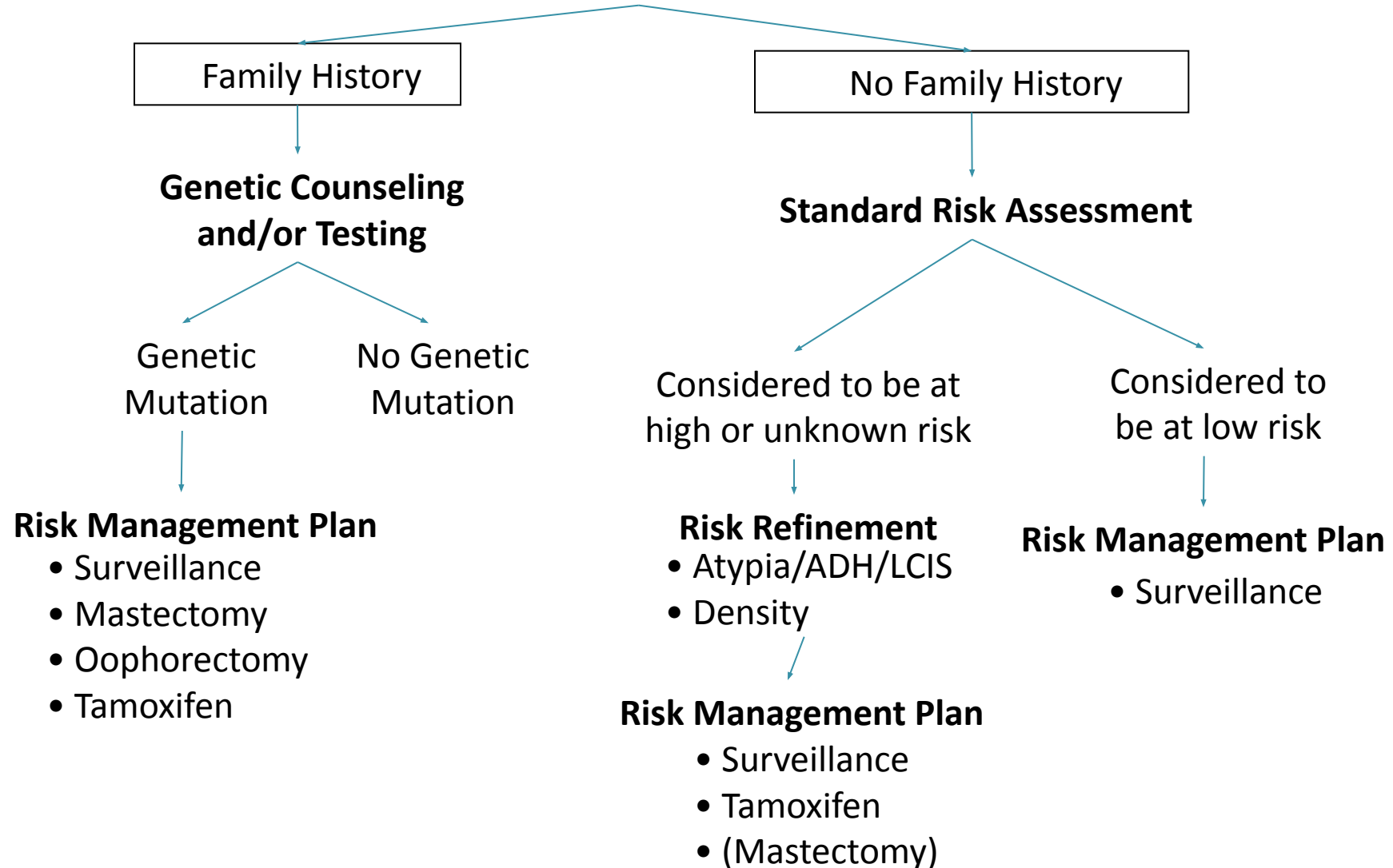
Breast Cancer Risk

Surveillance Tools

- ◆ Recommend clinical breast examination every 6 months.
- ◆ Annual Mammogram and Bilateral Breast MRI.
- ◆ If indicated consultation with a genetic counselor.
- ◆ Chemoprevention with Tamoxifen or Raloxifene.
- ◆ Discuss risk reducing prophylactic surgery, mastectomy or BSO.

Breast Cancer Prevention Framework

Women at risk for breast cancer



TOOLS FOR PREVENTION

- Know you maybe at increase risk for breast cancer due to your family history or history of atypia/LCIS on a breast biopsy.
- Screening mammogram or if appropriate breast MRI.
- Annual breast examination by an experience provider.
- Early Genetic Testing.

TOOLS FOR PREVENTION

- Maintain healthy weight.
- Exercise regularly.
- Mini dose Aspirin, 81 mg daily.
- Reduce stress.

TOOLS FOR PREVENTION

Eat fresh fruit and vegetables, Kale, spinach, blueberries, apple, pears, tomatoes.



Breast Cancer Screening

- Mammograms
- Breast ultrasound
- Breast MRI



What to watch out for:

- Breast lump
- Nipple discharge
- Nipple inversion
- Skin dimpling
- Change in size of breast

The Goal of Screening:

- Accurate
- Test is well tolerated
- Reduces morbidity of disease
- Low number of false positive results
 - Minimizes morbidity of additional procedures
 - Prevents ANXIETY

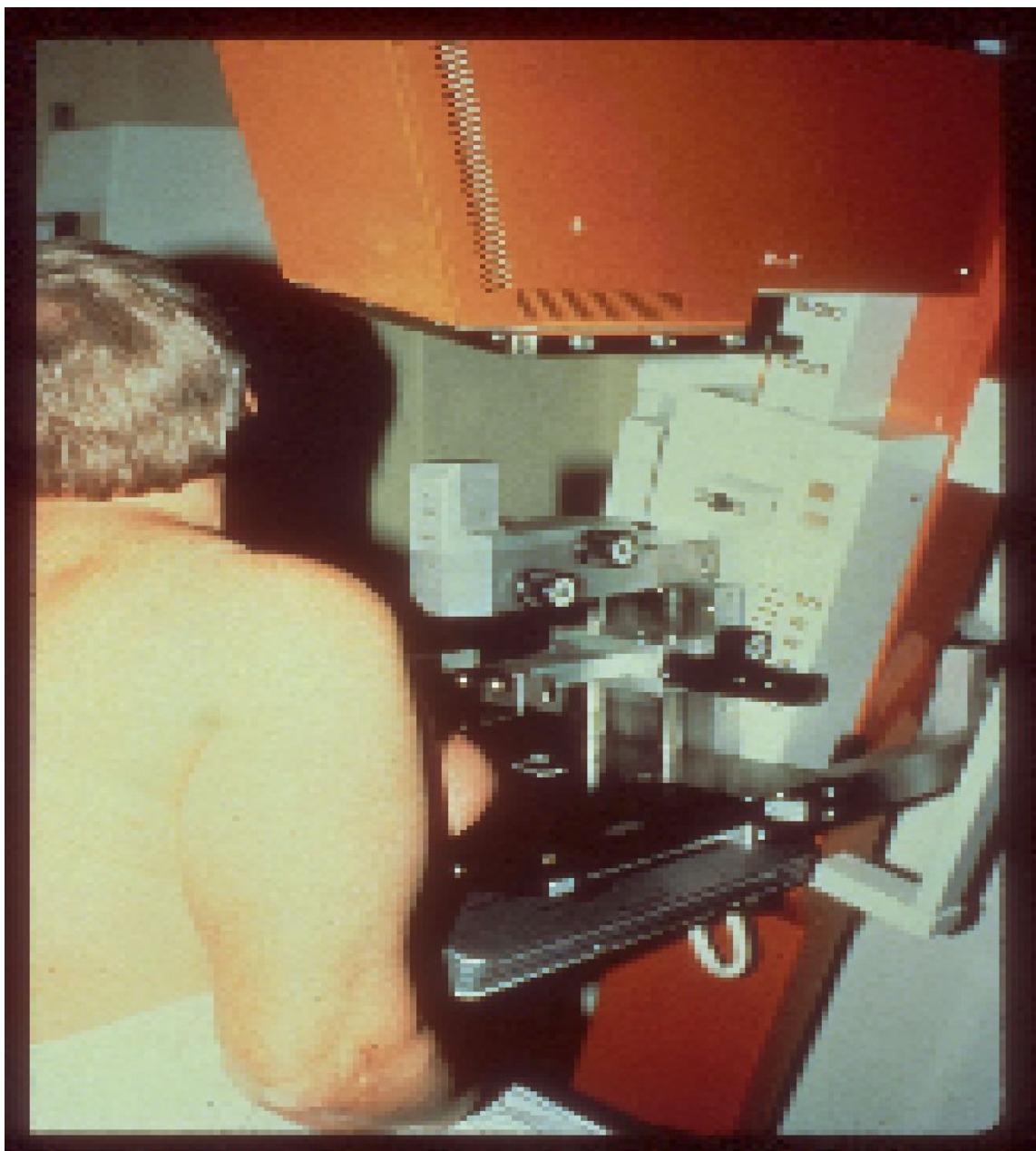
Breast Cancer Screening Guidelines

America Cancer Society

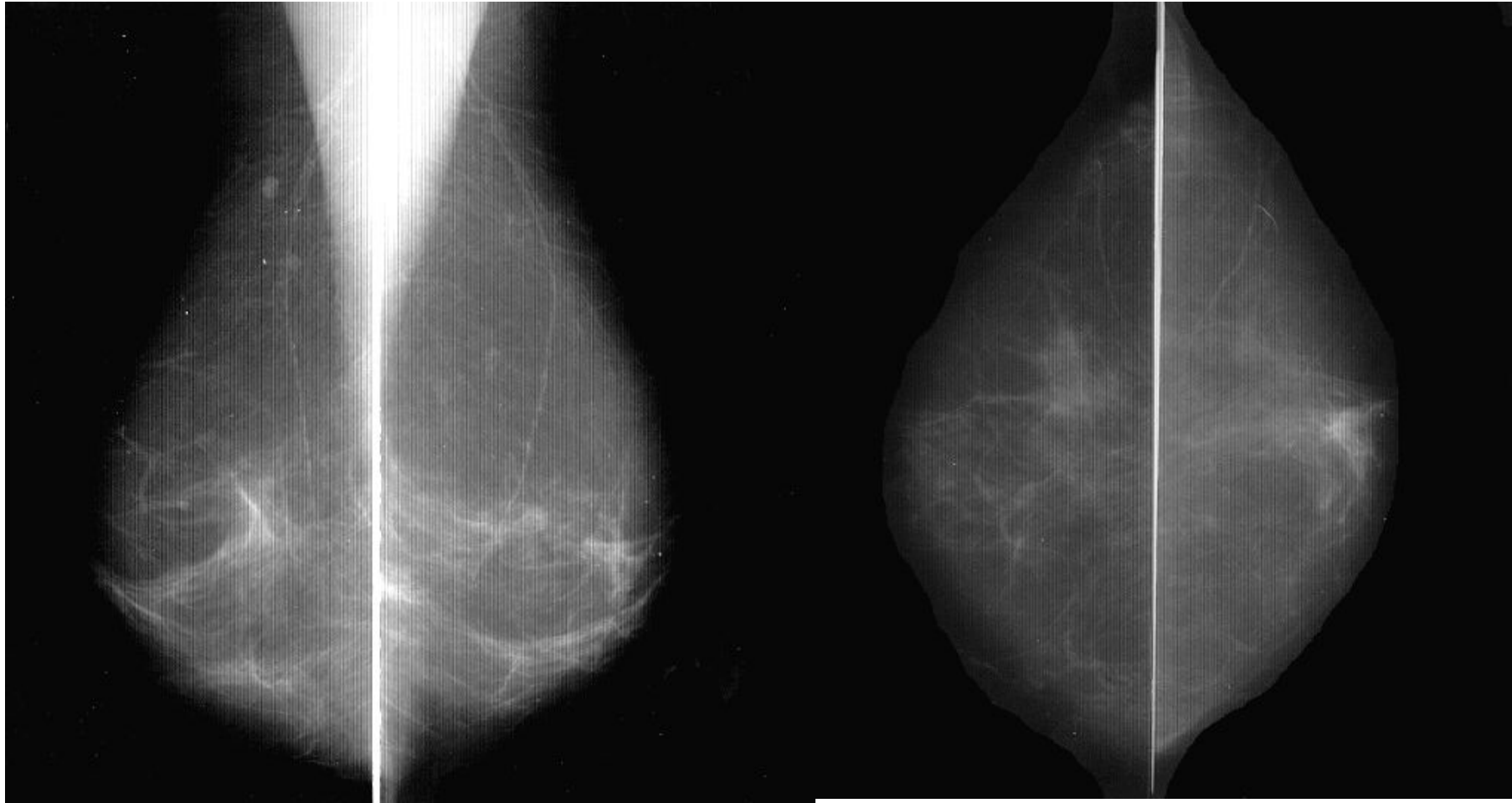
- Annual mammograms beginning at age 40

- Clinical breast exam:
 - Ages 20-39, as part of a periodic health exam at least every 3 years
 - Ages 40+, prior to mammogram as part of a periodic health exam annually.

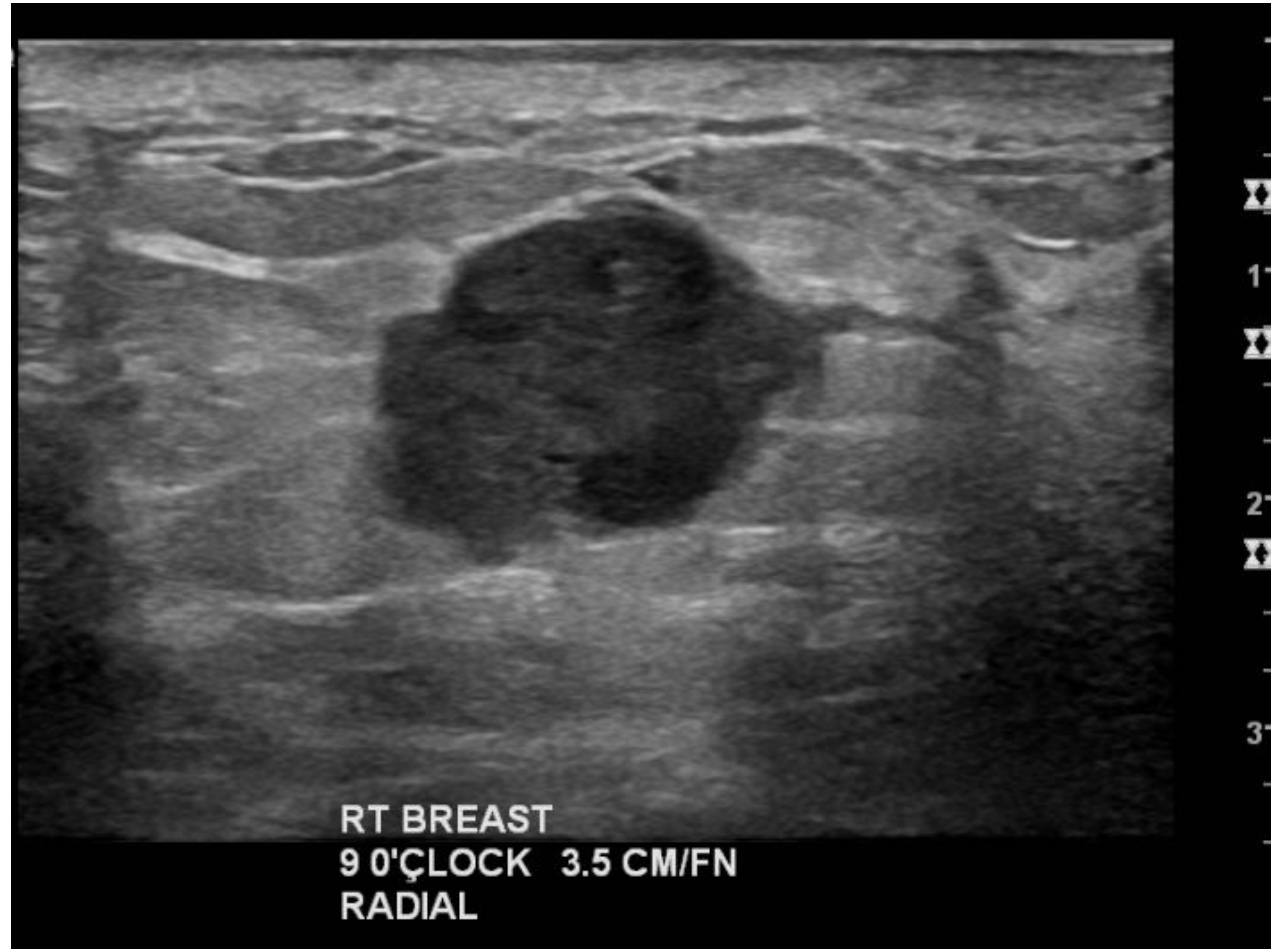
- Breast self-exam:
 - Optional; beginning in their early 20s, women should be told about the benefits and limitations of breast-self examination. Women should know how their breasts normally feel and report any breast changes promptly to their health care providers.



Mammogram MLO and CC views



Breast Ultrasound



Magnetic Resonance Imaging (MRI)

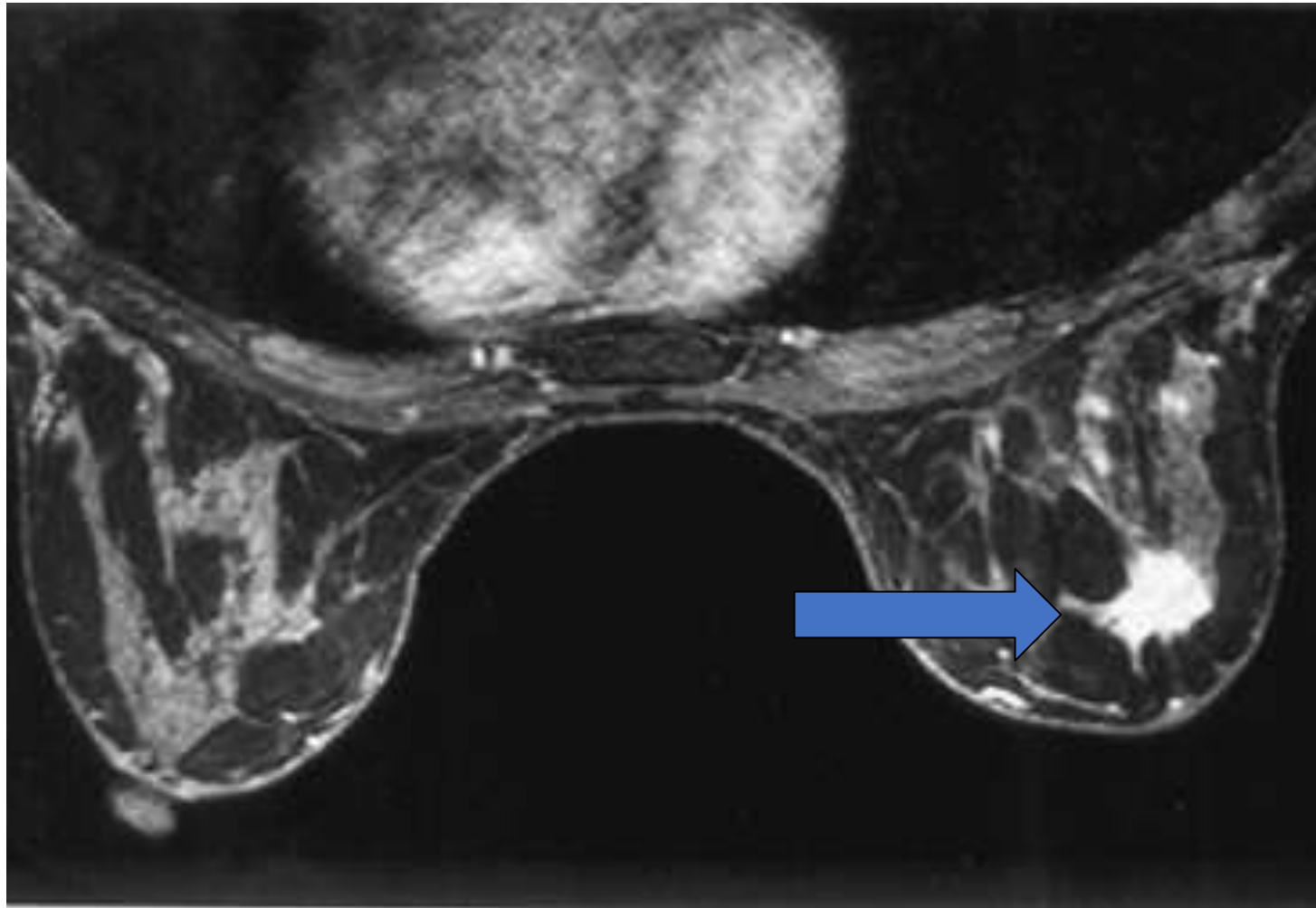
- Extremely sensitive.
- Helpful in treatment planning.



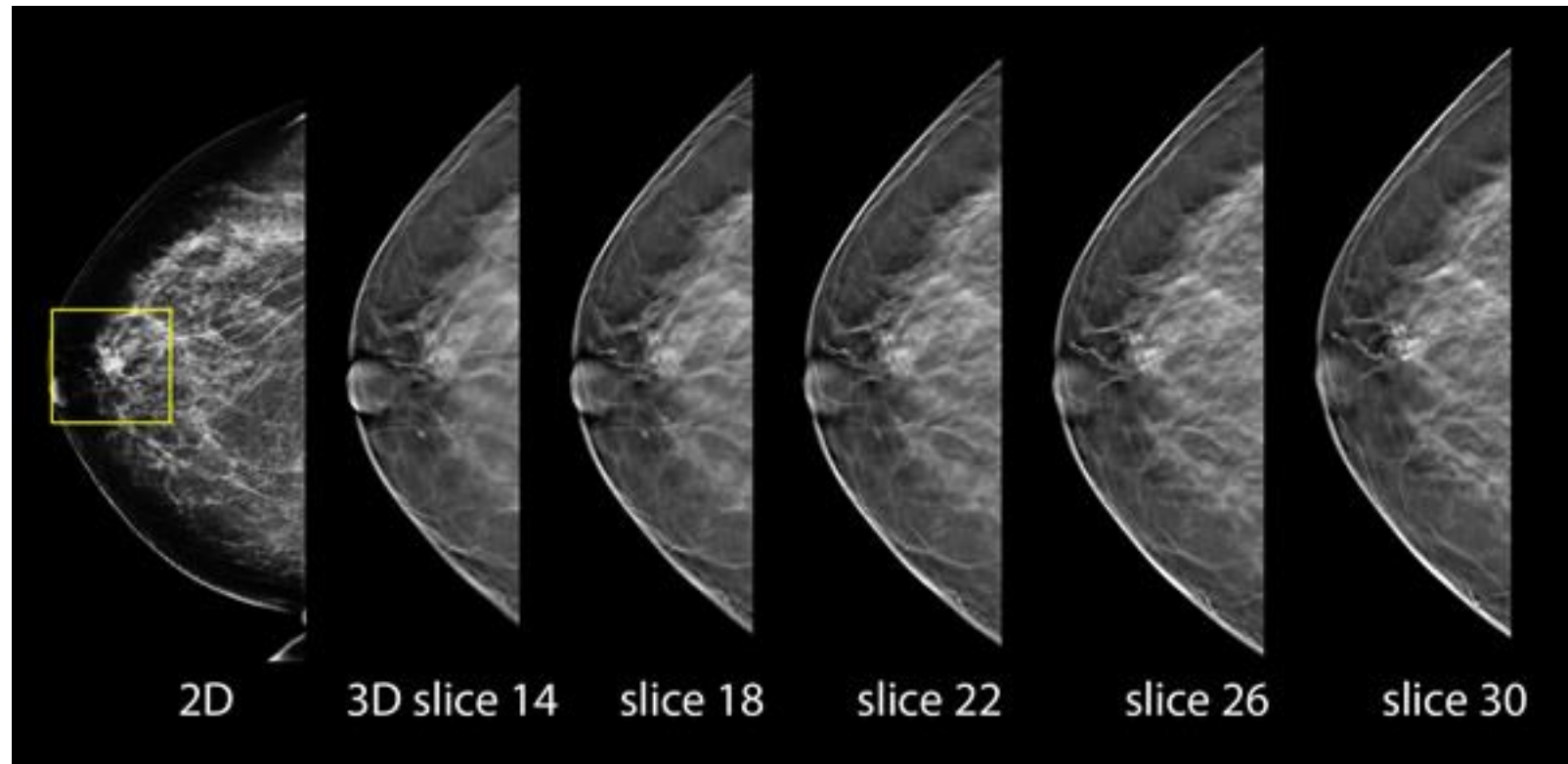
Breast MRI



Breast MRI



Mammography with Tomosynthesis



Ultrasound

- Better Resolution
- 3-D capability
- Evaluate blood flow patterns
- Used to determine if a palpable or mass detected on mammogram is cystic or solid.

Magnetic Resonance Imaging (MRI)

patient wants breast conservation. Indications:

- Young women with breast cancer or high risk for breast cancer.
- Mammographically occult breast cancer.
- Neoadjuvant chemotherapy.
- Lobular cancer diagnosis or known multifocal disease if
- Evaluate extent of disease for breast conservation or a re-excision lumpectomy.

Biopsy-Fine Needle Aspiration or Core

- Stereotactic biopsy.
- Ultrasound guided biopsy.
- MRI directed biopsy.
- Percutaneous biopsy.



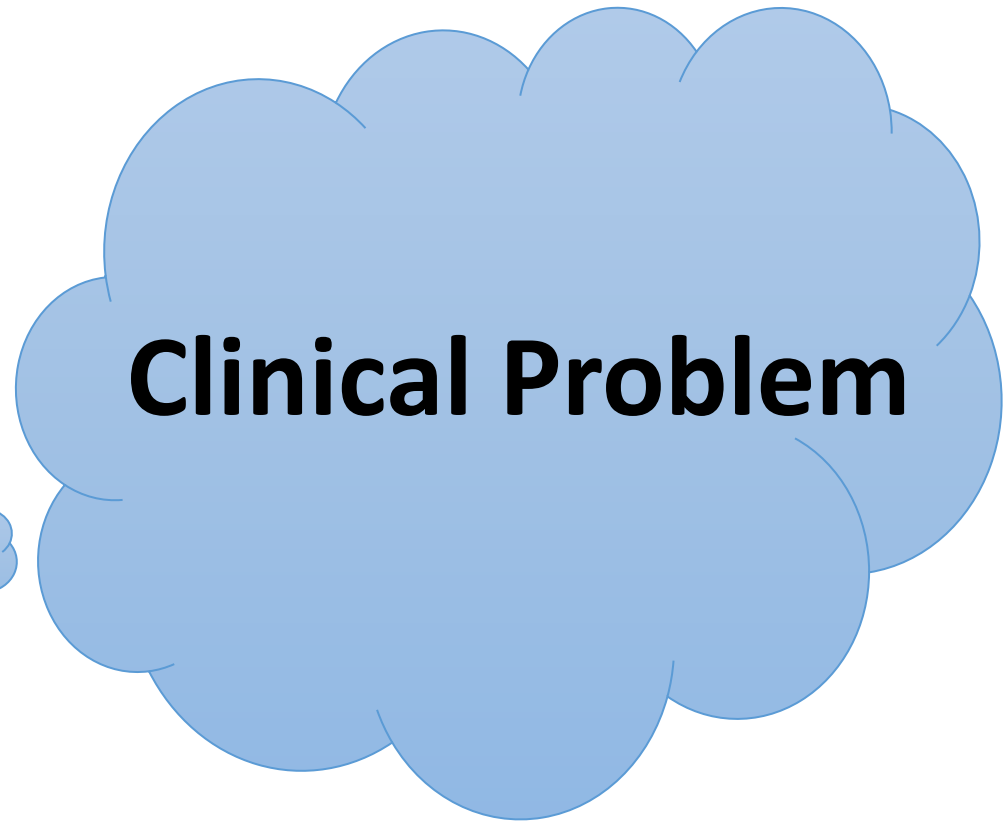
Diagnostic Work-Up: Imaging

- X-ray
- MRI magnetic resonance imaging
- CT scan computed tomography
- PET scan positron emission tomography
- Bone scan



UCSF Innovations

- Total skin sparing mastectomies.
- Wisdom Trial-assess the use of mammogram and define risk in a more tailored fashion
- ISPY2 Neoadjuvant Trial
- TARGIT Trial with intra-operative radiation.
- Senti-mag seed localization for lumpectomies.
- Same Day Assessment Clinic
- Observational only trial for DCIS.



Clinical Problem

Same Day Assessment Clinic

Collaborative clinic with a breast surgeon, nurse practitioner, breast imagery teams to resolve a clinical problem in one clinic visit.



WISDOM Study

Women Informed to Screen Depending On Measures of Risk

Study Compares:

- Personalized breast screening
- Standard (annual) screening

Professional Society	Screening Age	Frequency
USPSTF	40 – 49 50 – 74	Shared decision on whether to screen Biennially (for avg. risk)
ACS	45 – 55 55 – until life expectancy < 10 yrs.	Annually Biennially
ACR / SBI	40 – until life expectancy < 5-7 yrs.	Annually
NCCN	40 – until life expectancy < 10 yrs.	Annually
ACOG (new: July 2017)	40 – 49 50 – 74	Shared decision on whether to screen Shared decision: Annual or biennial

Participation is critical to develop new risk tools

- Most polygenic risk scores have been developed in women of European ancestry, and the performance and clinical utility of the PRS in women of non-European ancestry is unclear
 - This will be a major limitation to the current clinical implementation – companies currently don't return results for women of color
- PRSs are being evaluated in large trials (WISDOM!!!) that will examine their clinical utility and how to effectively communicate this risk to women
- WISDOM is developing a PRS that is race and ethnicity specific --this has not been done before.
- The more women of color who contribute to the WISDOM study, the more accurate this race and ethnicity PRS tool will become. This will help transform breast cancer screening tools and ultimately improve the health of women of color!



How do you participate in WISDOM?



Women enroll and participate online

- Women age 40-74
- Live anywhere in US
- Who have never had breast cancer
- No requirement to travel to a recruitment center
- Study website thewisdomstudy.org

What's involved:

- Annual questionnaire online about your health
- "personalized arm": complete a saliva spit kit to test your genetic risk
- Receive and follow recommendations on when to screen
- We tell you if you are high risk, and if so, provide personal risk reduction strategies with a free, private, MD consult

All study services are rendered virtually

- Breast Health Specialist available telehealth
- No additional visits

Provide information back to participants

- Deliver screening assignments and reports to personal participant account

Personal and Confidential

Help us transform women's health

- Join WISDOM!
 - www.wisdomstudy.org
- Attend our webinar on 5/20 to learn more about the science and “why” of WISDOM (link in chat)
- Connect with us on social
 - ✓ Facebook
 - ✓ LinkedIn
 - ✓ Twitter
 - ✓ Instagram
- Connect us with your networks (send e-blast about WISDOM)
- Be a WISDOM ambassador
 - Connect us with your networks
 - send e-blasts about WISDOM
 - Post on your social



@thewisdomstudy.org



@thewisdomstudy



@joinwisdom



@thewisdomstudy

Next Webinar: 5/20, 12pm PST

Learn more about WISDOM at our upcoming webinar!

The WISDOM Study: Bringing Breast Screening & Prevention into the 21st Century

Thursday, May 20, 12pm PST / 3pm EST

Register at: <https://bit.ly/3aNeMWa>



Ricki Fairley

CEO of TOUCH, The Black
Breast Cancer Alliance
Survivor/Thrivor
Breast Cancer Advocate

Panelist



Laura Esserman, MD, MBA

Founder - WISDOM Study, Director -
UCSF Carol Franc Buck Breast Care
Center, Personalized Medicine
Visionary

Presenter



Nola Hylton, PhD

UCSF Dept Radiology &
Biomedical Imaging,
Director - UCSF Breast Imaging
Research Group

Panelist

Contact us with any questions!

Visit us: www.thewisdomstudy.org

Contact us: info@wisdomstudy.org





**October is
Breast
Cancer
awareness
month!**


Thank you.

Remember to get your mammogram and
take a friend



The background is a vibrant, abstract tropical pattern. It features various shapes and colors: teal, yellow, orange, pink, and blue. There are also patterns of black dots on white backgrounds. The overall style is modern and graphic. A solid teal rectangular box is centered on the page, containing the text "Q & A Session" in white.

**Q & A
Session**




Thank You!
Dr. Cheryl Ewing,
SMC-BHRS-ODE, Elvia, Memo &
The BACHAC Team
Please remember to complete
your evaluation


For more information about Bay Area Community Health Advisory Council go to www.bachac.org

*I'm getting the vaccine because:
I want to volunteer
again at my church.*

— Lisa Tealer, Executive Director
Bay Area Community Health Advisory Council

#StopTheBerger
@healthpolicyberger
smchealth.org/coronavirus



COUNTY OF SAN MATEO 

COVID-19 TESTING

Quick and easy testing at no cost to you
No information shared with ICE
Simple oral swab test
Children 5+ can be tested with guardians
Walk-ups are welcome (pre-registration preferred)
If you are COVID positive resources are available to you and your family.
See below for more information*

Register online:
<https://www.bachac.org/registration>

Every Wednesday Starting
Wednesday, November 11th
4:00 PM-7:00 PM
St. James Church
825 Monte Diablo Avenue,
San Mateo



*If you had a positive COVID health contact tracer will call you to talk about your recent close contacts and how we can help support you and your family if you need to isolate. You may be eligible for rental support, housing and meals at a hotel, or food delivery and care for loved ones while you isolate at home.

A positive test for COVID-19 can be scary and unsettling.
We want to provide the support you need to focus on your care.

Additional Information

BACHAC has a Community Mammogram for uninsured residents of San Mateo County, for more details go to: www.bachac.org/community-mammogram-program

¡ALGUIEN QUIERE CUIDAR DE TI!

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- También podría querer hacer este mamograma de lunes a sábado.
- Para hacer cita de su mamograma de detección temprana gratuita entre semana, por favor llame al 650.696.4494 (Línea telefónica de programación de citas del Mills Peninsula) y dígame al planificador que contesta que la refieren a la evaluación de los senos del Community Mammogram Program.
- Si tiene seguro médico o esta sin seguro médico, puede calificar para recibir asistencia financiera.

UN MAMOGRAMA DE DETECCIÓN TEMPRANA ES PARA USTED SI:

- Si no ha tenido un mamograma en el último año
- Si no tiene síntomas como, dolor, bolas o enrojecimiento en el área del seno
- Si usted es mayor de 40 años

BAY AREA Community Health Advisory Council | Sutter Health Mills-Peninsula Medical Center

To learn more about the WISDOM Study, go to:

[www. https://www.thewisdomstudy.org](https://www.thewisdomstudy.org)

"Communities and countries and ultimately the world are only as strong as the health of their women."
Michelle Obama

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