## Appendix 2 (as supplied by the authors): Canadian Task Force on Preventive Health Care recommendations concerning clinical breast exam and breast self exam

Population	Women aged 40-74 without personal or family history of breast cancer, known BRCA1 or 2 mutation, or prior chest wall radiation		
Burden of illness	There were approximately 22,700 new cases of breast cancer and 5,400 deaths from breast cancer in Canada during 2009. Incidence and case-fatality rates increase with age.		
Intervention	Routine Clinical Breast Exam by a health professional	Breast Self Exam	Magnetic Resonance Imaging
Recommendation	We recommend <u>not routinely</u> <u>performing</u> Clinical Breast Exam alone or in conjunction with mammography to screen for breast cancer.	We recommend <u>not advising</u> women to routinely practice Breast Self Exam	We recommend <u>not routinely</u> <u>screening with magnetic resonance</u> <u>imaging</u>
	(Weak recommendation; low quality evidence).	(Weak recommendation; moderate quality evidence).	(Weak recommendation; no evidence)
Basis of Recommendation	No evidence was found indicating that Clinical Breast Exam or Breast Self Exam reduced breast cancer mortality or all-cause mortality. Two large trials identified no reduction in breast cancer mortality associated with teaching Breast Self Exam to women aged 31 to 64, but found evidence of increased harm for benign breast biopsy.  This recommendation reflects concerns with the potential harms of Clinical Breast Exam and Breast Self Exam and the corresponding lack of evidence of their effectiveness in decreasing mortality.		Since no studies demonstrate that the type of mammography influences the anticipated mortality reduction associated with screening, either digital or film mammography is acceptable. There are no data evaluating whether screening average-risk women with magnetic resonance imaging reduces mortality as compared with mammography or no screening. Therefore, screening average-risk women with magnetic resonance imaging is not recommended.
Considerations for implementation	Clinical Breast Exam remains appropriate when women present with, or physicians have concerns about, abnormal breast changes.		