Calcifications

Deposits of calcium within the breast

When the radiologist (a medical doctor who has specialized training in interpreting x-rays) finds calcifications on a mammogram, they must decide if the calcifications have a benign/non-cancerous appearance or if additional evaluation is needed. This is based on the size, shape, and number of calcifications, and if they are new or increased from the last mammogram study.

Although most calcifications are associated with a benign process, often additional films are requested. In order for the radiologist to get a clear look at the calcifications, magnification views are obtained. These are higher resolution and are magnified to make the breast appear up to two times larger than normal in size. The radiologist then decides if follow-up mammography or biopsy is necessary.

If follow-up is recommended, the radiologist will want to study the calcifications in six months and show stability for two years. If they remain the same, you will return to an annual mammogram schedule at the end of the two-year cycle. However, if the calcifications change in pattern or number, a biopsy may be recommended.

Lastly, the development of breast calcifications is not directly linked to diet or exercise. They have not been proven to be caused by medications, specifically hormones or calcium supplements. There is nothing in your daily life to add or change to prevent these from occurring. Rarely, calcifications will dissipate, or dissolve and go away.