



August 2026

Position Statement

Population-Based Breast Cancer Screening in India

The Association of Breast Surgeons of India (ABSI). Founded in 2011, **ABSI** is South Asia's largest professional body representing **breast surgery** in the country (including general surgeons, surgical oncologists, and plastic surgeons). It is recognized as the definitive "Voice for Breast Surgery in India."

The Breast Imaging Society, India (BISI): Founded in 2013, BISI is the umbrella organization that represents **radiologists** practicing the art and science of breast radiology in India. It is the national "Voice for Breast Radiology"

ABSI and BISI recognise that India requires an approach to breast cancer screening that is evidence-based, affordable, scalable and appropriate to the country's diverse healthcare settings.

Mammography remains the gold-standard imaging modality for breast cancer screening and should be offered for opportunistic screening to women in whom it is appropriate and accessible. However, for organised population-based screening in resource-constrained and underserved settings where mammography cannot be delivered equitably at scale, Clinical Breast Examination (CBE) performed by appropriately trained healthcare workers represents the most evidence-based, scalable and practical approach to early detection.

CBE can be integrated into existing primary healthcare systems, delivered close to where women live, and linked directly to diagnostic imaging, biopsy, pathology, patient navigation and timely treatment. Importantly, large Indian randomised studies have demonstrated that organised CBE screening can reduce breast cancer mortality, providing evidence of meaningful clinical benefit rather than simply demonstrating the ability to detect abnormalities. This evidence-based approach should not be replaced by technologies that have not demonstrated comparable clinical benefit.

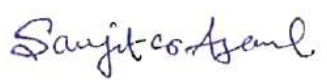
The U.S. FDA states that Mammography remains the most effective primary screening method for detecting breast cancer at an early, treatable stage, and warns that replacing Mammography with Thermography-based screening may result in missed cancers.

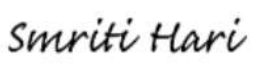
Breast thermography and iBreast have not demonstrated sufficient evidence to support their use as breast cancer screening or diagnostic modalities, nor have they established equivalence to CBE or conventional breast imaging ie mammography or demonstrated population-level outcome benefit. Thermography does not demonstrate the morphological abnormalities of breast cancer and also a normal thermogram does not exclude a breast cancer. **Both Thermography and iBreast technologies also carry the potential for false-positive and false-negative results.** False-positive findings may lead to unnecessary investigations, anxiety and additional healthcare costs. Of greater concern, however, are false-negative results that may falsely reassure women that they do not have breast cancer. A woman who subsequently notices a breast lump or other warning sign may delay seeking medical attention because of this false reassurance, potentially resulting in diagnosis at a more advanced stage and adversely affecting treatment outcomes.

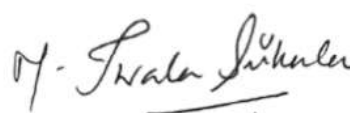
ABSI and BISI support responsible innovation, but innovation must complement—not dilute—the standard of care for Indian women. Any emerging technology proposed for population-level screening should undergo rigorous independent evaluation in representative Indian populations and demonstrate acceptable diagnostic performance, safety, feasibility, cost-effectiveness and, ultimately, meaningful clinical benefit before being considered for incorporation into a national screening programme. The societies therefore do not recommend the use or promotion of breast thermography /iBreast/infrared imaging with or without AI ,for primary breast cancer screening or as an adjunctive diagnostic test for the detection or exclusion of breast cancer. **References to support the above joint statement enclosed along with this document.**

Accordingly, neither Thermography nor iBreast should be used for population-based breast cancer screening in India or as a replacement for CBE or established breast-imaging pathways.


24.8.26
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24.08.2026
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