

BREASTS



Many women today are health conscious; they take the time to get regular exercise, and eat healthy foods. This however, is not enough to prevent or detect cancer of the breasts. The breasts must be examined regularly for changes, such as those caused by hormonal fluctuations (during the menstrual cycle), and during pregnancy. When symptoms occur (breast pain, fluid discharges from nipples, lumps and any other abnormalities), immediate action must be taken to rule out the possibility of breast cancer. More than 80 percent of breast lumps eventually prove to be noncancerous, however, this does not lessen the importance of seeing your doctor as soon as possible after symptoms begin.

Following are things that you can do to help you to take the best possible care of your "breast health":

Breast Self Exam (BSE) A mirror and your three middle fingers are all you need for a BSE. It is an easy way for learning what is normal in your breasts.

Mammography (Breast X-rays) Mammography is best for locating abnormalities that are too small to feel.

Professional Breast Exam This is to assure you that you did not miss anything when you did your BSE. Your physician is someone who is skilled at identifying problems and knowing when and how to follow up.

Ultrasound Ultrasound is a procedure used to differentiate between cysts (usually noncancerous) and solid tumors.

Newer Imaging Technology Similar to MRI (Magnetic Resonance Imaging) may increase diagnostic sensitivity and accuracy.



COMMON BREAST DISORDERS

When you hear the term “breast condition,” you may think of cancer. Fortunately, most breast conditions are benign (noncancerous) and cause no serious harm. However, there is no way of knowing how serious the condition is unless it is evaluated by a physician. All women are at risk for breast cancer, especially as they grow older, and should always have a professional breast exam if any breast changes are noticed. The following are a few of the more common benign (noncancerous) conditions:

■ BREAST INFECTIONS

One of the most common types of breast infection is mastitis. This is an inflammation of the mammary glands that develops during breastfeeding. This occurs after the nipple cracks from nursing and allows bacteria to enter the breast tissue.

SIGNS AND SYMPTOMS	Skin redness; warmth; pain.
TREATMENT	Massage and dry heat can be helpful to relieve pain.
DRUG TREATMENT	Antibiotics are used.
SURGICAL TREATMENT	If an abscess occurs, incision and drainage of the abscess are usually necessary.

■ FIBROADENOMA

Benign (noncancerous) lumps come in all shapes, sizes, and textures. A lump made of fibrous and glandular tissue (fibroadenoma) usually feels smooth, firm, and rubbery, and is usually painless and movable.

SIGNS AND SYMPTOMS	Lump in breast.
TREATMENT	A fibroadenoma is usually watched by a physician for further changes.
SURGICAL TREATMENT	If the fibroadenoma enlarges, removal by surgery (excisional biopsy) is usually recommended and it generally will not recur after this surgery.



■ FIBROCYSTIC CONDITION

Fibrocystic changes are the most common cause of breast lumps in women ages 30 to 50. These changes are also referred to as fibrocystic disease, chronic cystic mastitis, or mammary dysplasia. At least 50 percent of the women in their reproductive years have lumpy breasts as a result of these noncancerous cysts. This condition is not completely understood, but is felt to be related to the way breast tissue responds to monthly changes in the levels of estrogen and progesterone. Each month during one's menstrual cycle, the breast tissue swells and returns to normal. Hormonal stimulation of the breast tissue causes the blood vessels to swell, the milk glands and ducts to enlarge, and the breast to retain water. The breasts frequently feel swollen, painful, tender, and lumpy. As a result of repeated hormone stimulation, there is an increase in firmness of the tissue, and pockets of fluid (cysts) may form in obstructed or enlarged milk ducts. The breast tissue may feel like an irregularly-shaped area of thicker tissue with a lumpy or ridge-like surface. Fibrocystic tissue may also feel like tiny beads scattered throughout the breast.

SIGNS AND SYMPTOMS

Breasts feel swollen, painful, lumpy, and tender; worse prior to menses.

TREATMENT

A firm supportive bra, and avoiding caffeine in coffee, tea, chocolate, and soft drinks may help decrease discomfort. Occasionally, vitamin E may ease the pain in fibrocystic disease (800 iu per day).

DRUG TREATMENT

Aspirin or other pain relievers is given for pain relief. Oral contraceptives (ovarian suppressants) and danazol (pituitary suppressants) may be considered.

SURGICAL TREATMENT

If the cyst(s) becomes too uncomfortable, your surgeon may choose to draw out the fluid through a fine needle (fine needle aspiration).

■ GYNECOMASTIA

This is an enlargement of the male breast tissue on one or both sides. Possible causes are hormone disorders, side effects from drugs, alcohol abuse, or cancer.

TREATMENT

Fine needle aspiration to obtain tissue for examination under a microscope is helpful for diagnosis.

SURGICAL TREATMENT

Simple mastectomy, (removal of excess breast tissue) is a corrective procedure to consider.



■ NIPPLE DISCHARGE

A tiny amount of clear or milky discharge from both nipples is normal. A pinkish discharge can be caused by a benign growth (intraductal papilloma) in a duct near the nipple. If the discharge is bloody or happens without squeezing the nipples, be sure to have it checked by a physician.

■ PREMENSTRUAL TENDERNESS AND SWELLING

Normal hormones (estrogen and progesterone) can cause your breasts to become swollen and tender, often during the menstrual cycle. Estrogen and progesterone are the female hormones produced by the ovaries during a woman's reproductive years.



■ BREAST CANCER

Approximately one in nine women develops breast cancer. Risk factors are: increasing age, breast cancer in a mother or sister, diet, women who have never been pregnant, and women who had their first pregnancy after the age of 30. The outlook depends on the type of cancer, if it has spread, and to what extent.

SIGNS AND SYMPTOMS

A hard or soft, distinct lump that feels different from the surrounding tissue; change in the skin texture or color, such as redness, skin dimpling (a depression or flattening in one part of the breast), retracted (pulled-in) nipple in a previously normal breast; blood or spontaneous discharge from a nipple.

DIAGNOSTIC TOOLS

Mammography A mammogram is a simple x-ray procedure that is used to determine breast cancer. This technique enables some cancers to be detected and treated more successfully at an early stage, even before it can be discovered by other means. If a mammogram or a professional breast exam reveals a suspicious lesion (lump), the following tests are sometimes used:

Ultrasound Ultrasound uses echoes from sound waves to create a picture of the breast. This is the best method to determine if the lump is solid or fluid-filled.

Needle Aspiration A needle is sometimes used to remove cells from a lump. If the lump is a cyst, all the fluid is removed and further treatment is rarely needed.

Open Biopsy A biopsy is done to rule out or confirm a suspicion of cancer. The tissue is surgically removed and the cells are examined under a microscope. Sometimes a procedure called needle localization is used with mammography to help locate tiny growths for biopsy.

SURGICAL TREATMENT

Surgery is the primary treatment for breast cancer; both for the diagnosing (biopsy) and removing the cancerous tissue. A range of operations can be performed to remove breast cancers. The procedure used depends on the size of the tumor and whether it has metastasized (spread to other body parts).

Lumpectomy In this procedure, only the breast lump is removed with a small area of the surrounding tissue. For cancers that are localized, this may offer as good a chance for survival as more extensive surgeries.



Partial Mastectomy This is the surgical removal of part of the breast. Occasionally the cancer and a segment of the surrounding tissue are removed (segmental mastectomy). In other cases, the affected quarter of the breast is removed (quadrantectomy).

Lymph nodes in the armpit are also removed (axillary dissection).

Subcutaneous Mastectomy Most of the breast tissue is removed in this procedure, but the nipple and overlying skin are left intact. This is only used for women who are at high risk but do not have cancer. Most surgeons do not perform this procedure on a patient with breast cancer.

Modified Radical Mastectomy In this procedure, the entire breast and the lymph nodes under the arm are removed. The breast can be reconstructed either at the time of surgery or at a later date.

RADIATION THERAPY

Radiation therapy may be used as the primary treatment or in combination with surgery, chemotherapy, or hormonal therapy. This is used to kill the cancer cells that were not able to be removed surgically. Radiation is also used to treat cancer when it metastasizes (spreads), particularly to relieve pain in bone metastases.

HORMONAL THERAPY

If the cancer has spread, recurs, or is too advanced for surgery, life may be prolonged and symptoms relieved by the use of hormones. Some tumors (estrogen receptor positive) respond to an anti-estrogen drug called Tamoxifen. Occasionally, the male hormone, androgen, is used.

CHEMOTHERAPY

Anti-cancer drugs are often used alone or in combination with other treatments. See also page 128



AMERICAN CANCER SOCIETY GUIDELINES

MONTHLY BREAST SELF EXAM (BSE)

If you had a technique at your fingertips that could potentially save your life, you would definitely use it. Unfortunately, many women avoid BSE altogether because of fear, embarrassment, inexperience, or simply not remembering to do it. The arguments for doing BSE are much stronger today and you can give yourself a head start against potential problems. You can know the “landscape” of your breasts better than anyone else, and with monthly practice, you can become skilled at looking and feeling for changes in your breasts. See page 229 of this chapter for illustrated instructions on how to do self exams.

Ages 20 to 50 Breast self-exam seven to ten days after your period starts

Ages 50+ Postmenopausal women: the same day each month

MAMMOGRAPHY

A mammogram is a safe, low-dose x-ray of the inside of your breasts. It can show changes that are too small to feel. It can screen for unexpected problems in women with no symptoms and help in the diagnosis of a lump or other changes found by you or your doctor during a breast exam. Get regular mammograms, and ask your doctor how often you should be tested if you are at high risk, and follow these guidelines:

Ages 35 to 40 First mammogram

Ages 40 to 50 Every one to two years

Ages 50+ Every year

In preparing for your mammography, wear something two-piece since you will be undressing from the waist up. Do not use deodorant, talcum powder, or cream on your breasts or underarms — they can interfere with the results of the test.

REMEDIES FOR PAINFUL BREASTS

Wear a sports bra for support

Apply heat (hot bath or heating pad) or cold (ice pack)

Eat food high in fiber and low in salt

Ask your physician about limiting caffeine and taking certain vitamins



LIFESTYLE TIPS FOR BREAST HEALTH

Although breast cancer is not preventable, you may be able to lower your risk by maintaining a healthy lifestyle, such as:



Reducing your fat intake



Maintaining your normal weight



Eating a high fiber diet, including whole grains, fruits, and vegetables



And—remembering your three-step approach to breast health care: regular BSE, mammograms, and professional breast exams



Daily exercise has been recently reported to lower risk of breast cancer



BREAST SELF EXAMS (BSE)

HOW:

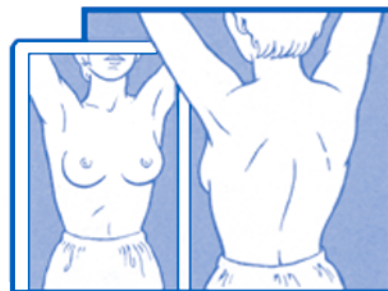
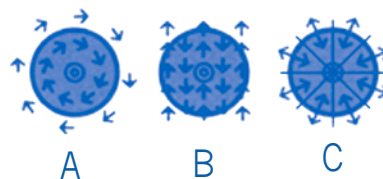
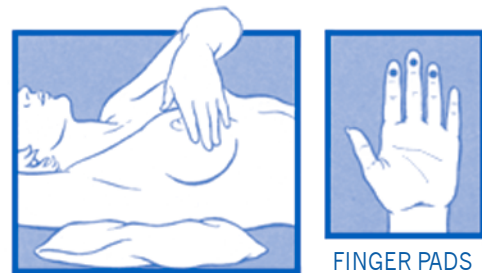
1. Lie down and put a pillow under your right shoulder. Place your right arm behind your head.
2. Use the pads of your three middle fingers on your left hand to feel for lumps or thickening. Your finger pads are the top third of each finger.
3. Press firmly enough to know how your breast feels. If you're not sure how hard to press, ask your health care provider. Or try to copy the way your health care provider uses the finger pads during a breast exam. Learn what your breast feels like most of the time. A firm ridge in the lower curve of each breast is normal.
4. Move around the breast in a set way. You can choose either the circle (A), the up and down line (B), or the wedge (C). Do it the same way every time. It will help you make sure that you've gone over the entire breast area, and to remember how your breast feels.
5. Now examine your left breast using right hand finger pads.

If you find any changes, see your doctor right away.

FOR ADDED SAFETY:

You should also check your breasts while standing in front of a mirror right after you do your breast self-exam each month. See if there are any changes in the way your breasts look: dimpling of the skin, changes in the nipple, or redness or swelling.




You might also want to do a breast self-exam while you're in the shower. Your soapy hands will glide over the wet skin making it easy to check how your breasts feel.



SOURCE: THE AMERICAN CANCER SOCIETY



WHAT TO DO

SEVERITY LEVEL	SYMPTOM	POSSIBLE DIAGNOSIS
 <p>Seek Medical Help Immediately!</p>	Distinct hard or soft lump (different from surrounding tissue)	Malignant growth
	Change in texture or color of skin	Malignant growth
	Flattening in one part of breast	Malignant growth
	Bloody discharge	Malignant tumor
 <p>Make an appointment to see your doctor</p>	Softer lump in breast	Fibroadenoma
 <p>Try the home treatment outlined in this chapter</p>	Painful and tender breasts	Fibrocystic conditions
	Milky nipple discharge	Benign growth
	Skin redness, warmth, and pain	Infection or abscess