

Your breasts, your health – throughout your life

This booklet aims to help you understand how your breasts develop and age, and the normal changes to the breasts that can occur at different times throughout your life.

There's also information on breast screening and what this involves.

Introduction

We hope this information will help you to be breast aware so that you feel more confident about noticing any breast changes that are unusual for you, and go to see your GP (local doctor) about them. Most breast changes aren't because of breast cancer, but the sooner breast cancer is diagnosed, the more effective treatment may be.

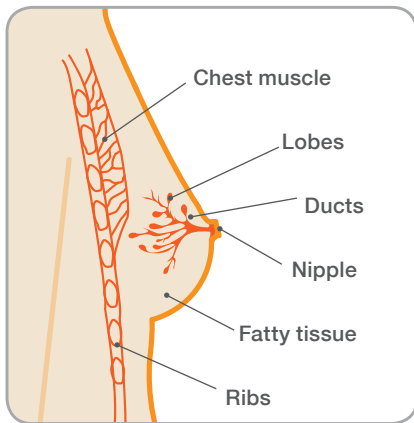
Although this booklet is for women, men also need to be aware of any changes in their breast tissue, as around 400 men in the UK get breast cancer each year.

If you care for someone with learning disabilities, we have a free information resource designed to help people with learning disabilities be breast aware with the support of their carer. See **Your breasts, your health – supporting people with learning disabilities to be breast aware.**

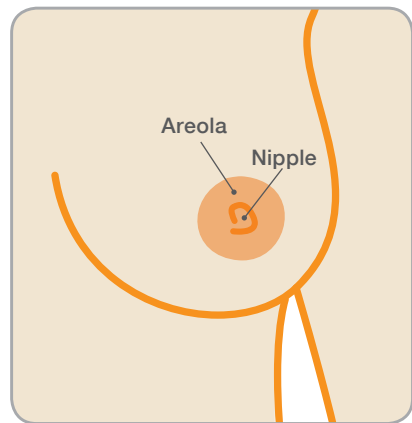
About your breasts

Breasts are made up of glandular, fibrous and fatty tissue. They sit on the front of the chest and extend up into the armpit. Breast tissue is supported by ligaments (which attach deeper layers of tissue to the skin) and the large chest muscle that extends over most of the ribs.

The breast



The nipple



The glandular tissue contains lobes, with many smaller lobules inside each one. The lobules are the milk-producing glands. During lactation (when milk is produced by the breasts to feed a baby), breast milk is carried through tubes called ducts to the nipple ready for breastfeeding.

The darker area of skin around the nipple is called the areola. On the areola there are some little raised bumps called Montgomery glands. They produce fluid to moisturise the nipple.

Normal breast changes

Your breasts change constantly throughout your life from puberty, through adolescence, the childbearing years and then the menopause (when periods stop permanently). This is because of the varying levels of the female hormones oestrogen and progesterone in your body.

During the menstrual cycle

Oestrogen and progesterone play a vital part in regulating a woman's periods. These hormones are responsible for the changes you may notice in your breasts just before your period.

Your breasts may feel heavier and fuller. They may also be tender or lumpy. After a period, this usually lessens or disappears altogether, although some women have tender, lumpy breasts all the time.

Many women also have breast pain linked to their menstrual cycle (cyclical breast pain), which is normal. For more information see our **Breast pain** booklet.

During pregnancy

Breast changes can be an early sign of being pregnant. Many women feel a change in sensation in their breasts such as tingling and soreness (particularly of the nipples). This is due to increased levels of progesterone and the growth of the milk ducts. The breast and the areola begin to get bigger. The nipple and areola become darker and stay that way during pregnancy.

When breastfeeding

Large amounts of milk are produced to breastfeed a newborn baby and the breasts can change size many times a day according to the baby's feeding pattern. Nipples can sometimes become sore and cracked, but this generally gets better over time. When breastfeeding stops, the

breasts gradually go back to how they were before pregnancy although they may be a different size and less firm than before.

For more information see our **Breast changes during and after pregnancy** booklet.

Before, during and after the menopause

From around the mid-30s onwards the breasts begin to age and the glandular and fibrous tissue is gradually replaced by fat. As oestrogen levels fall during and after the menopause, the breasts may change size, lose their firmness, feel softer and may droop. Changes, such as a lump or tenderness, are also common at this time. Lumps often turn out to be breast cysts (fluid-filled sacs). For more information see our **Breast cysts** booklet. Some people get tenderness in their breast not linked to the menstrual cycle. For more information, see our **Breast pain** booklet.

It's important to see your GP (local doctor) about any changes that are new for you, even though for most women these will be benign (not cancer).

Wearing a well-fitting bra

A woman's breasts change size and shape many times during her life due to the menstrual cycle, pregnancy and breastfeeding, the menopause and putting on or losing weight. Wearing a well-fitting bra can help if you are feeling any discomfort or back pain. For more information see our **Your guide to a well-fitting bra** leaflet.

Breast problems

Breast changes can be a sign of a benign (not cancer) breast condition that may need treatment although this is not always the case.

For example, breast pain linked to your periods is common. However, talk to your GP if it's severe and long lasting.

There are many benign breast problems. You can find out more about these on our website or in our booklets.

Being breast aware

Whatever your age, size or shape it's important to take care of your breasts. Breast cancer is the most common cancer in the UK, so look after your breasts by being breast aware.

Being breast aware is an important part of caring for your body. It means getting to know how your breasts look and feel so you know what is normal for you. You can then feel more confident about noticing any unusual changes.

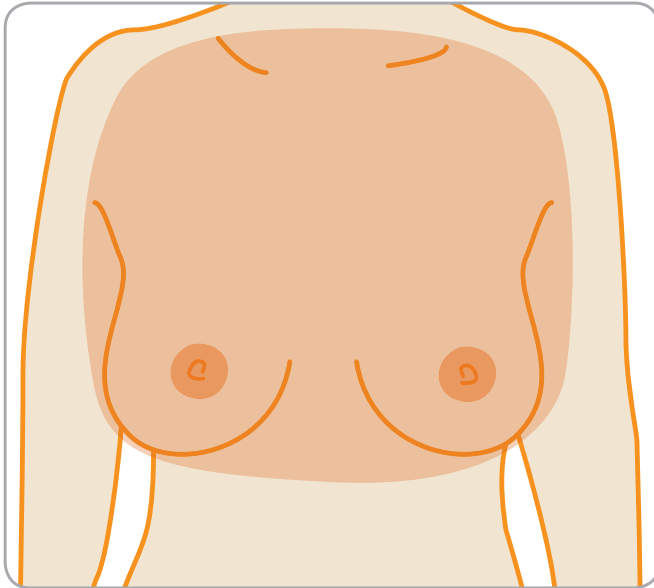
Some people think if they have breast cancer they'll have other symptoms apart from a breast change, such as feeling tired, having less energy or losing weight, but this isn't the case. If you notice a change, even if you feel well, it's still important to visit your GP.

How do I check my breasts?

There's no right or wrong way to check your breasts for any changes. Try to get used to looking at and feeling your breasts regularly. You can do this in the bath or shower, when you use body lotion or when you get dressed. There's no need to change your everyday routine. Just decide what you're comfortable with and what suits you best.

Areas to check

Remember to check all parts of your breast, your armpits and up to your collarbone.



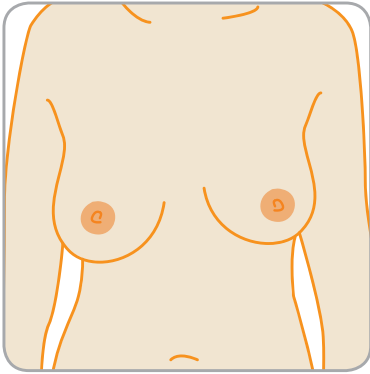
The Breast Cancer Care checklist

- Look at and feel your breasts so you know what's normal for you.
- Do this regularly to check for changes.
- Tell your doctor as soon as possible if you notice anything.

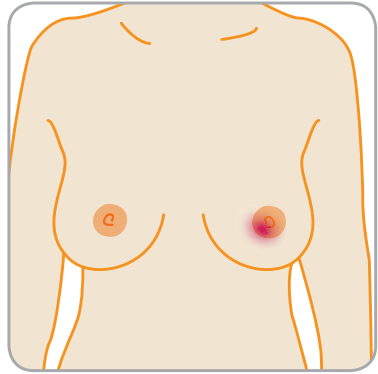
What changes should I look and feel for?

Everyone's breasts look and feel different. Some people have lumpy breasts, one breast larger than the other or breasts that are different shapes. Some have one or both nipples pulled in (inverted), which can be there from birth or happen when the breasts are developing.

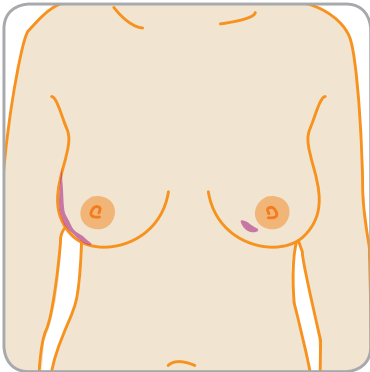
When you check your breasts, try to be aware of any changes that are different for you. The next pages show what these could be.



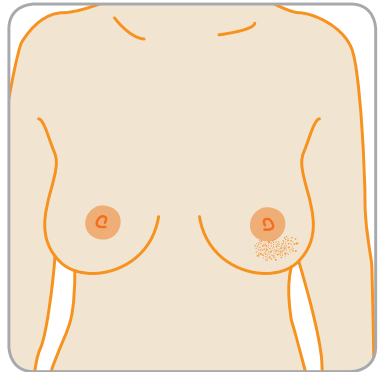
A change in size or shape



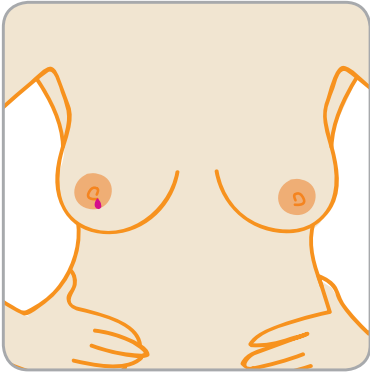
Redness or a rash on the skin and/or around the nipple



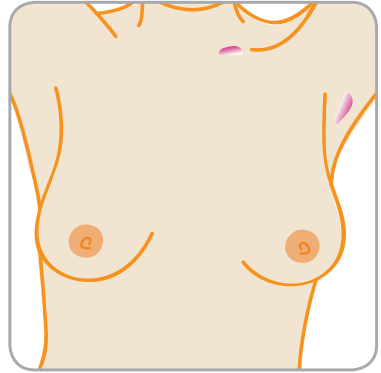
A lump or thickening that feels different from the rest of the breast tissue



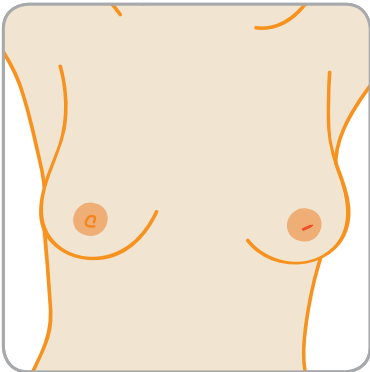
A change in skin texture such as puckering or dimpling (like orange skin)



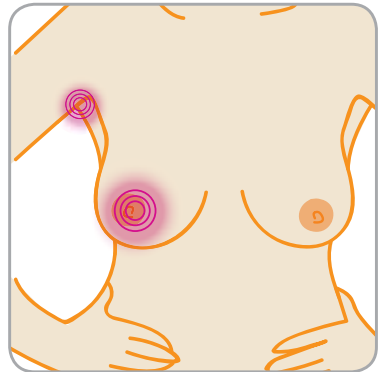
Discharge (liquid) that comes from the nipple without squeezing



A swelling in your armpit or around your collarbone



Your nipple becoming inverted (pulled in) or changing its position or shape



Constant pain in your breast or your armpit

What should I do if I find a change?

You know better than anyone how your breasts look and feel normally so if you notice a change, go to your GP as soon as you can.

Most breast changes are likely to be normal or because of a benign breast condition rather than being a sign of breast cancer.

If your GP is male and you don't feel comfortable going to see him, you can ask if there's a female doctor available. You can also ask for a female nurse to be present at your appointment. Or you can take a friend or relative with you. But you need to find out what is causing the change.

When your GP examines your breasts they may feel that there is no need for further investigation or they may refer you to a breast clinic.

For more information about what happens at a breast clinic see our booklet **Your breast clinic appointment**.

Breast screening

Breast screening (mammography/mammogram) is an x-ray examination of the breasts. It can help detect breast cancer even before there are any obvious signs and symptoms. The sooner breast cancer is diagnosed, the more effective treatment is likely to be.

Going for screening

In the UK, women between 50 and 70* are invited for breast screening every three years as part of a national breast screening programme.

Women under 50 are not invited for routine breast screening. This is because the number of women who get breast cancer is much lower in this age group: 81% of breast cancers occur in women over the age of 50 and the risk continues to increase with age. Also, younger women's breast tissue can be dense, which can make the x-ray image less clear.

To be invited for screening you have to be registered with a GP. The screening service will take your name from your GP's list and you'll be sent an appointment to come for a mammogram. This may not happen the year you turn 50, but it will happen by the time you are 53.

If you're over 70 you won't be sent an invitation for screening. However, you can continue to have breast screening every three years if you ask for it.

The results of your screening mammogram are sent by post to you and your GP. Some women will be sent a recall letter asking them to come back. It will explain if another mammogram is needed because of technical reasons (if the image is unclear) or if further tests are needed to assess a problem seen on the mammogram. This doesn't necessarily mean that it will be breast cancer, just that further tests are needed to find out what it is.

Your GP surgery can provide you with the contact details of your local breast screening unit or you can look this up online:

Scotland

www.nhsinform.co.uk/Screening/breast/screeningcentres

Wales

www.breasttestwales.wales.nhs.uk/screening-centres-in-wales

England

www.cancerscreening.nhs.uk/breastscreen/bsu-regions.html

*In England the age range has been extended to invite women from 47–73 years as part of a trial that will include all women by the end of 2016.

Northern Ireland

www.cancerscreening.hscni.net/1965.htm

Why you are being invited for screening

Breast cancer is the most common cancer in the UK and the number of people diagnosed each year is rising. However, death (mortality) from breast cancer is falling. This is due to a number of factors such as earlier diagnosis, improved treatments and patients taking part in clinical trials. The fall may also be due to breast screening.

Is breast screening reliable?

Mammograms are the most reliable way of detecting breast cancer sooner but, like other screening tests, they're not 100% reliable. For example, not all breast cancers can be seen on a mammogram, some breast cancers are very difficult to see or, very occasionally, the doctors reading the mammogram may miss the cancer, no matter how experienced they are.

Review of breast screening

There have been concerns in the past about women being able to make a well informed decision on whether to attend breast screening or not. This was because the information given to women invited to attend for breast screening by the National Health Service Breast Screening Programme (NHSBSP) did not explain the possible risks. So an independent review was set up to look at the benefits and risks of the NHSBSP. The review was published in 2012. Below is information on the benefits and risks of breast screening. You can read more about the independent review on Cancer Research UK's website www.cancerresearchuk.org

What are the possible benefits of breast screening

Going for breast screening will not prevent breast cancer from developing, but it can find a breast cancer sooner – before it can be felt. Invasive breast cancers (that have the potential to spread to other parts of the body) found through screening are more likely to be small and respond very well to treatment so that a mastectomy (removal of all the breast tissue including the nipple area) is not always needed.

The recent review of screening showed it prevented 1,300 deaths from breast cancer a year.

What are the possible risks of breast screening

Having a mammogram can be a very uncomfortable experience for some women and can cause a lot of worry before an appointment.

Having a screening mammogram every three years means being exposed to a small amount of radiation, which can very slightly increase your risk of developing breast cancer in the future.

Breast screening cannot prevent cancer and it's possible for a cancer to develop in between each routine screening mammogram. This is called an interval cancer. When this happens the doctors will look at your previous mammograms to see if there was a change which may have been a cancer that was too small to notice at the time, or if this is a new finding. They will discuss the results with you. That's why it's important to continue to be breast aware and report any changes to your GP even if you've had a mammogram recently.

Mammograms can show an area of concern, which, after further investigations such as a biopsy, turns out not to be a cancer. This is called a false positive result.

Some cancers diagnosed through breast screening may not develop any further or may grow so slowly that they would never cause any harm during a woman's life. At the moment it's not possible for the doctors to tell which cancers can be left alone, so all cancers are treated. This means that some women will be given treatment that they didn't need. This is the main risk of screening. The recent screening review concluded that for every woman whose death was prevented by screening there would be around three women treated for breast cancer when it would never have become life threatening.

Some benign conditions diagnosed through screening cannot be confirmed by the mammogram alone. Further investigations and sometimes an operation may be needed to confirm the diagnosis. This can cause anxiety and fear as well as being painful and uncomfortable.

If you'd like to discuss breast screening, contact our Helpline on **0808 800 6000**.

Does breast cancer run in families?

Breast cancer is a common disease, with one in eight women in the UK developing it during their lifetime.

Because breast cancer is the most common cancer in women in the UK, having someone in your family with breast cancer doesn't always mean your own risk is increased. For most people, having a relative with breast cancer does not increase their risk.

However, a small number of women and men may have an increased risk of developing breast cancer because they have a significant family history. A family history may be called significant if there are a number of cases of breast and ovarian cancer in the family, or cases at a young age, or male relatives with breast cancer.

Our booklet **Breast cancer in families** has more information on this.

Can I reduce my risk of breast cancer?

We don't know exactly what causes breast cancer, but we do know that being female and getting older are the main risk factors.

You can look after your general health, which may help reduce your risk by:

- eating a well-balanced diet with plenty of fruit and vegetables and limiting your intake of saturated fats
- maintaining a healthy weight, especially after the menopause
- taking regular exercise
- not drinking more alcohol than the recommended daily amount (see www.nhs.uk/change4life)

For more information about risk in general, visit our website www.breastcancercare.org.uk



Got a question about breast health?

As well as supporting people who have breast cancer we highlight the importance of early detection and can answer your questions about breast health and breast problems.

Ask us

You can call our free Helpline if you have a breast health or breast awareness query. Calls are answered by specialist nurses and trained staff. Or you can Ask the Nurse by email via our website.

Free Helpline **0808 800 6000** (Text Relay 18001)

Monday–Friday 9am–5pm

Saturday 10am–2pm

www.breastcancercare.org.uk/ATN

Expert information

Written and reviewed by healthcare professionals and reviewed by members of the public, our free booklets and other information resources cover a range of information on breast health, including leaflets on a number of benign (not cancer) breast problems.

Download or order information from our website or call the Helpline.

www.breastcancercare.org.uk

About this booklet

Your breasts, your health – throughout your life was written by Breast Cancer Care's clinical specialists, and reviewed by healthcare professionals and members of the public.



**For a full list of the sources
we used to research it:**

Phone 0845 092 0808

Email publications@breastcancercare.org.uk



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the breast cancer
support charity

Breast Cancer Care is the only UK-wide charity providing specialist support and tailored information for anyone affected by breast cancer.

Our clinical expertise and emotional support network help thousands of people find a way to live with, through and beyond breast cancer.

Visit www.breastcancercare.org.uk or call our free Helpline on **0808 800 6000** (Text Relay 18001).

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