SP727 I Found a Breast Lump ... Now What?

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Is this really a lump? How is a “normal” breast supposed to feel?
The texture of breast tissue varies from person to person but is often normally “lumpy” feeling. In premenopausal women, breast texture often changes during the menstrual cycle in response to hormone levels. If you are premenopausal, it is best to check your breasts for changes in texture or size after your period. A true “lump” has a firmer texture than the rest of the breast tissue. Lumps may be fixed in one place or move around under the skin when touched.

What could the lump be?
The following are some of the most common diagnosed conditions that produce a breast lump:

- **Cysts** — Fluid-filled sacs that can be near the skin surface or underneath breast tissue. About a third of women between the ages of 35 and 50 have breast cysts. Cysts do not increase a woman’s risk of breast cancer.

- **Fibrocystic breast changes** — A variety of symptoms that can change with the menstrual cycle and may cause breast tissue to swell, become lumpy/firm or feel sore. Symptoms differ from individual to individual.

- **Fibroadenoma** — A non-cancerous tumor that is round and smooth to the touch and usually movable beneath the skin. Most common in premenopausal women.

- **Hyperplasia** — When certain cells within the breast grow at a faster than normal growth rate. Hyperplasia may increase a woman’s risk of cancer.

- **Cancer** — If the lump appears to be cancer, your doctor will discuss what additional tests may be needed to confirm the diagnosis. Treatment options will depend on type of breast cancer.

When should I get a lump checked by my health care provider?
The answer to this question depends on whether or not you are familiar with how your breasts normally feel. If you do periodic self-exams, you may know that certain areas of breast tissue get lumpy over the course of your menstrual cycle. If you are premenopausal and notice a new change that you have not felt before, or find a lump that remains after your period, it is a good idea to have it checked by your doctor. If you are postmenopausal and notice any change, you should have it examined by a doctor. Some other symptoms that warrant further examination by your health care provider include:

- Nipple discharge.
- Change in the shape or size of a breast.
- Skin puckering or dimpling.
- Redness, swelling or flaking anywhere on breast.
- Inversion of the nipple (when the nipple turns inward, toward the breast).
- Pain that does not go away.

Where can I find more information?
For more information on breast health, check out the following websites:

- American Cancer Society
  www.cancer.org
  1-800-ACS-2345
- Susan G. Komen for the Cure
  www.komen.org
- Centers for Disease Control and Prevention
  www.cdc.gov/cancer/breast

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  www.cdc.gov/cancer/breast

It’s a day like any other, nothing out of the ordinary, when you suddenly find what feels like a lump in your breast. What do you do? Like most women, you fear the worst: Could it be breast cancer? Did you know that 8 out of 10 identified lumps are not cancer, particularly in younger, premenopausal women?
**I am afraid the doctor may tell me bad news.**

It is natural to have mixed feelings about getting a lump checked by your health care provider. Try focusing on these two advantages of having a lump checked:
- There is a good chance (80 percent) that the lump is not cancer and going to the doctor will relieve the uncertainty and anxiety.
- Even if the lump is cancerous, the sooner you begin treatment the better! Ignoring the condition could make it worse.

It may be helpful to bring a loved one along with you to your appointment. He or she can offer emotional support and can help you remember important information that the doctor or other staff provide to you. Be sure to pick someone who will help you stay calm and not someone who will make you more anxious.

**What tests can a doctor do to determine if the lump is cancer?**

Your doctor will start with the least invasive measures needed to help in the diagnosis of your “lump.” Below are common tools your doctor may use to aid in the diagnosis:
- **Clinical breast exam** — Examination of both breasts to determine how the lump compares to other breast tissue and to feel the texture of the lump. Often includes examination of chest area up to the armpits to check for any lymph node changes.
- **Breast ultrasound** — This test can help your doctor determine whether the lump is solid or fluid-filled.
- **Diagnostic mammogram** — More thorough than a screening mammogram, a diagnostic mammogram is an X-ray of the breast(s) from many different angles and can be used to get a better view of the breast tissue. When a lump is found, a diagnostic mammogram can give your doctor more information of the size and place of a lump.
- **Biopsy** — When a lump looks like it may be cancer or when results from other tests are unclear, your doctor may order a biopsy of the tissue to take a closer look at the cells.
- **MRI (magnetic resonance imaging)** — May be used to get a different image of the breast tissue if results from other tools are unclear.

**Am I at risk for breast cancer?**

One question you may have at this time is whether or not you carry personal risk factors for breast cancer. The most important thing to remember about breast cancer risk is that just being a woman is the number one risk factor for breast cancer. Keep in mind that some women who have risk factors will not get breast cancer and some women who get breast cancer do not have common risk factors for the disease. The following are some of the strongest risk factors for breast cancer:
- **Being female.**
- **Age** (risk increases as you get older).
- **Family history of breast cancer** (especially mother, sister or daughter).
- **Having an inherited BRCA gene mutation** (BRCA1 or BRCA2).
- **Getting your period before age 12.**
- **Not entering menopause until age 55 or older.**
- **Being overweight after menopause.**
- **Drinking more than one alcoholic drink per day.**
- **Use of postmenopausal hormone replacement.**
- **Early exposure to large doses of radiation (ex: spine X-rays for scoliosis).**
- **Not having children or having your first child after the age of 35.**

**How can I help to prevent breast cancer?**

Not all breast cancer risk factors can be controlled; however, there are some things you can do that may reduce breast cancer risk.

**Screening:**
- Follow the American Cancer Society’s recommendations for breast cancer screening based on your age and personal health history:
  - **Starting at age 20** — Have a clinical breast exam at least every three years and annually starting at age 40.
  - **Starting at age 40** — Have an annual mammogram.
- Be familiar with your breasts - know how they normally look and feel so that you will be able to identify any changes that occur.
- When possible, get your mammograms at the same facility so that the physician can compare your current mammogram to previous mammograms. If you cannot use the same facility, make sure your current mammogram provider has access to your past mammograms for reference.

**Lifestyle factors:**
- Limit fat intake.
- Exercise.
- Maintain a healthy weight.
- Limit/avoid alcohol.

**What is the best way to check for lumps?**

Annual mammography is not recommended in women younger than age 40 unless they are at a higher than average risk for breast cancer. Routine breast self-exams can help to pick up changes in women younger than 40. Routinely checking your breast tissue for changes and suspicious lumps (starting at age 20) is a good way to find possible problems early enough that they can be treated. Check your breasts after your period so that any lumpiness due to hormones is not confused with true “lumps.” If you have questions about how to examine your breasts, ask your health care provider.

**Will my insurance cover the tests I need?**

Insurance coverage for individuals can vary greatly. Your insurance may require a “precertification” for certain procedures. Look over your insurance coverage before you see your doctor so you will be aware of the plan’s requirements if certain tests or procedures are recommended.

**I don’t have insurance/I can’t afford to go to the doctor.**

The Tennessee Breast and Cervical Cancer Screening Program can help cover the services necessary to diagnose your lump if you don’t have insurance. The following Web site gives more information about the program, including financial eligibility guidelines: [health.state.tn.us/bcc/index.htm](http://health.state.tn.us/bcc/index.htm).