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Breast cancer

Definition

Breast cancer is cancer that starts in the tissues of the breast. There are 2 main types of breast cancer:

- Ductal carcinoma starts in the tubes (ducts) that carry milk from the breast to the nipple. Most breast cancers are of this type.
- Lobular carcinoma starts in the parts of the breast, called lobules, which produce milk.

In rare cases, breast cancer can start in other areas of the breast.

Alternative Names

Cancer - breast; Carcinoma - ductal; Carcinoma - lobular; DCIS; LCIS; HER2-positive breast cancer; ER-positive breast cancer; Ductal carcinoma in situ; Lobular carcinoma in situ

Causes

<u>Breast cancer risk factors</u> are things that increase the chance that you could develop breast cancer:

- Some risk factors you can control, such as drinking alcohol. Others, such as family history, you cannot control.
- The more risk factors you have, the more your risk increases. But, it does not mean you will develop cancer. Many women who develop breast cancer do not have any known risk factors or a family history.
- Understanding your risk factors can help you know how to prevent breast cancer.

Breast implants, using antiperspirants, and wearing underwire bras do not increase the risk for breast cancer. There is also no evidence of a direct link between breast cancer and pesticides.

Symptoms

Early breast cancer often does not cause symptoms. This is why regular breast exams and mammograms are important, so cancers that don't have symptoms may be found earlier.

As the cancer grows, symptoms may include:

- Breast lump or lump in the armpit that is hard, has uneven edges, and usually does not hurt.
- Change in the size, shape, or feel of the breast or nipple. For example, you may have redness, dimpling, or puckering that looks like the skin of an orange.
- · Fluid from the nipple. Fluid may be bloody, clear to yellow, green, or look like pus.

In men, breast cancer symptoms include breast lump and breast pain and tenderness.

Symptoms of advanced breast cancer may include:





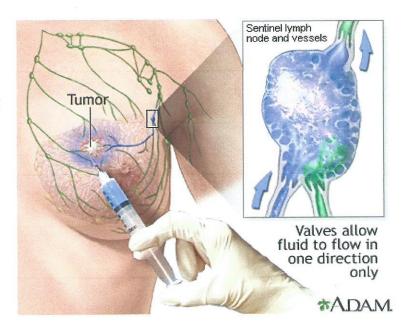


Breast lump









- Bone pain
- · Breast pain or discomfort
- Skin ulcers
- Swelling of the lymph nodes in the armpit (next to the breast with cancer)
- · Weight loss

Exams and Tests

The health care provider will ask about your symptoms and risk factors. Then the provider will perform a physical exam. The exam includes both breasts, armpits, and the neck and chest area.

Women are encouraged to perform breast self-exams each month. However, the importance of self-exams for detecting breast cancer is debatable.

Tests used to diagnose and monitor people with breast cancer may include:

- Breast MRI to help better identify the breast lump or evaluate an abnormal change on a mammogram
- · Breast ultrasound to show whether the lump is solid or fluid-filled
- Breast biopsy, using methods such as needle aspiration, ultrasound-guided, stereotactic, or open
- · CT scan to check if the cancer has spread outside the breast
- · Mammography to screen for breast cancer or help identify the breast lump
- · PET scan to check if the cancer has spread
- · Sentinel lymph node biopsy to check if the cancer has spread to the lymph nodes

If your doctor learns that you do have breast cancer, more tests will be done. This is called staging, which checks if the cancer has spread. Staging helps guide treatment and follow-up. It also gives you an idea of what to expect in the future.

Breast cancer stages range from 0 to IV. The higher the stage, the more advanced the cancer.

Treatment

Treatment is based on many factors, including:

- · Type of breast cancer
- · Stage of the cancer (staging is a tool your providers use to find out how advanced the cancer is)
- · Whether the cancer is sensitive to certain hormones
- Whether the cancer overproduces (overexpresses) the HER2/neu protein

Cancer treatments may include:

- · Hormone therapy.
- · Chemotherapy, which uses medicines to kill cancer cells.
- · Radiation therapy, which is used to destroy cancerous tissue.
- Surgery to remove cancerous tissue: A <u>lumpectomy</u> removes the breast lump. <u>Mastectomy</u> removes all or part of the breast and possibly nearby structures. Nearby lymph nodes may also be removed during surgery.
- Targeted therapy uses medicine to attack the gene changes in cancer cells. Hormone therapy is an example of targeted therapy. It blocks certain hormones that fuel cancer growth.

Cancer treatment can be local or systemic:

- Local treatments involve only the area of disease. Radiation and surgery are forms of local treatment. They are most effective
 when the cancer has not spread outside the breast.
- Systemic treatments affect the entire body. Chemotherapy and hormonal therapy are types of systemic treatment.

Most women receive a combination of treatments. For women with stage I, II, or III breast cancer, the main goal is to treat the cancer and prevent it from returning (recurring). For women with stage IV cancer, the goal is to improve symptoms and help them live longer. In most cases, stage IV breast cancer cannot be cured.

- Stage 0 and ductal carcinoma: Lumpectomy plus radiation or mastectomy is the standard treatment.
- Stage I and II: Lumpectomy plus radiation or mastectomy with lymph node removal is the standard treatment. Chemotherapy, hormonal therapy, and other targeted therapy may also be used after surgery.
- Stage III: Treatment involves surgery, possibly followed by chemotherapy, hormone therapy, and other targeted therapy.
- Stage IV: Treatment may involve surgery, radiation, chemotherapy, hormone therapy, other targeted therapy, or a combination
 of these treatments.

After treatment, some women continue to take medicines for a time. All women continue to have blood tests, mammograms, and other tests after treatment to monitor for the return of cancer or development of another breast cancer.

Women who have had a mastectomy may have reconstructive breast surgery. This will be done either at the time of mastectomy or later.

Support Groups

You can ease the stress of illness by joining a <u>cancer support group</u>. Sharing with others who have common experiences and problems can help you not feel alone.

Outlook (Prognosis)

New, improved treatments are helping people with breast cancer live longer. Even with treatment, breast cancer can spread to other parts of the body. Sometimes, cancer returns, even after the entire tumor has been removed and nearby lymph nodes are found to be cancer-free.

Some women who have had breast cancer develop a new breast cancer that is not related to the original tumor.

How well you do after being treated for breast cancer depends on many things. The more advanced your cancer, the poorer the outcome. Other factors that determine the risk for recurrence and the likelihood of successful treatment include:

- · Location of the tumor and how far it has spread
- · Whether the tumor is hormone receptor-positive or -negative
- · Tumor markers
- · Gene expression
- · Tumor size and shape
- · Rate of cell division or how quickly the tumor is growing

After considering all of the above, your provider can discuss your risk of having a recurrence of breast cancer.

Possible Complications

You may experience side effects or complications from cancer treatment. These may include temporary pain or swelling of the breast and surrounding area. Ask your provider about the possible side effects from treatment.

When to Contact a Medical Professional

Contact your provider if:

- · You have a breast or armpit lump
- · You have nipple discharge

After being treated for breast cancer, call your provider if you develop symptoms such as:

- Nipple discharge
- Rash on the breast
- · New lumps in the breast
- · Swelling in the area
- · Pain, especially chest pain, abdominal pain, or bone pain

Prevention

Talk to your provider about how often you should have a <u>mammogram</u> or other <u>tests to screen for breast cancer</u>. Early breast cancers found by a mammogram have a good chance of being cured.

Tamoxifen is approved for breast cancer prevention in women age 35 and older who are at high risk. Discuss this with your provider.

Women at very high risk for breast cancer may consider preventive (prophylactic) mastectomy. This is surgery to remove the breasts before breast cancer is diagnosed. Possible candidates include:

- · Women who have already had one breast removed due to cancer
- · Women with a strong family history of breast cancer
- · Women with genes or genetic mutations that raise their risk for breast cancer (such as BRCA1 or BRCA2)

Many risk factors, such as your genes and family history, cannot be controlled. But making healthy lifestyle changes may reduce your overall chance of getting cancer. This includes:

- · Eating healthy foods
- Maintaining a healthy weight
- · Limiting alcohol consumption to 1 drink per day (women at high risk for breast cancer should not drink alcohol at all)

References