

Your breasts, your health throughout your life



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Introduction

This booklet will help you to understand a bit more about your breasts, how they develop and age, and the normal changes to the breasts that can occur at various stages throughout your life. It also includes some information about breast screening.

We hope it will help you to be breast aware, so that you can feel more confident about noticing any breast changes that are unusual for you. Most changes won't turn out to be breast cancer, but if it is breast cancer, the sooner it 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 300 men in the UK get breast cancer each year.

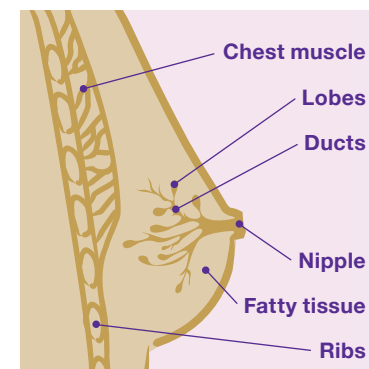
About your breasts

Breasts are mainly made up of glandular, fibrous and fatty tissue. They sit on the front of the chest and extend down and around into the armpit. The 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.

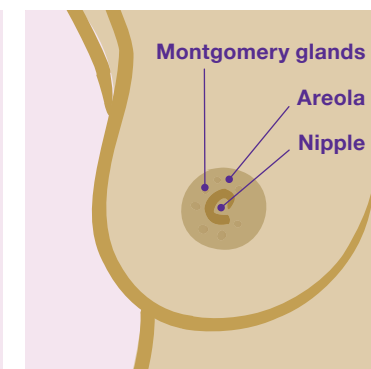
The glandular tissue contains lobes, with many smaller lobules inside each one. The lobules are the milk-producing glands. During lactation breast milk is carried through tubes called ducts to the nipple ready for breastfeeding.

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

The breast



The nipple





Normal breast changes

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

Before a period

From puberty onwards oestrogen and progesterone play a vital part in regulating a woman's menstrual cycle, which results in having periods. It is these hormones that 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 lumpiness becomes less obvious or may disappear 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). 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 nipples and areola become darker and remain 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](#) leaflet.

Before, during and after the menopause

From around the mid-30s onwards the breasts begin to age and the glandular 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. Breast lumps are also common at this time, and these often turn out to be breast cysts (benign fluid-filled sacs). For more information see our [Breast cysts](#) leaflet.

It's still important to see your GP (local doctor) about any changes that are new for you, even though most of these will be benign (harmless).

Breast problems

Sometimes breast changes can indicate a benign breast condition that may need treatment.

For example, breast pain linked to your periods is common and usually seen as normal. However, when it's severe and long lasting, talk to your GP as it may need to be treated.

For more information see our Benign breast conditions leaflets about the different kinds of benign breast problems.



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.

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 it's important to 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.

How do I check my breasts?

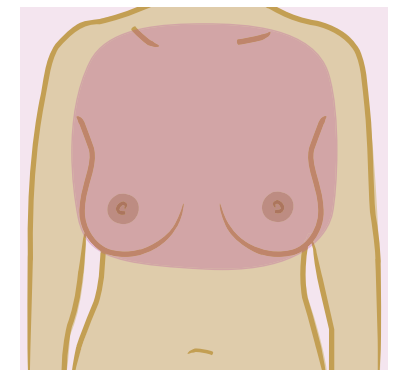
There's no right or wrong way to check your breasts. Try to get used to looking at and feeling your breasts regularly. You can do this in the bath or shower, when you use body lotion, or when you get dressed. There's really no need to change your everyday routine. Just decide what you are comfortable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

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

The breast awareness 5-point code

- 1 You should know what is normal for you
- 2 Know what changes to look for
- 3 Look and feel
- 4 Tell your GP about any changes straightaway
- 5 Go for breast screening when invited

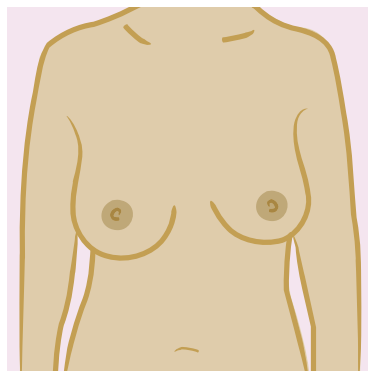
Areas to check



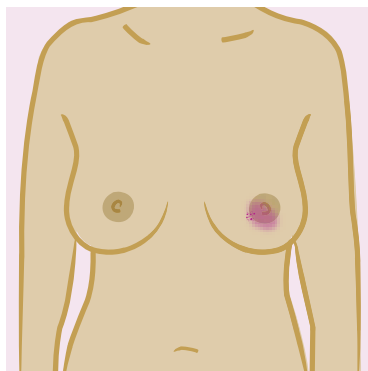
What changes should I look and feel for?

Everyone's breasts look and feel different. Some people have lumpy breasts, or 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.

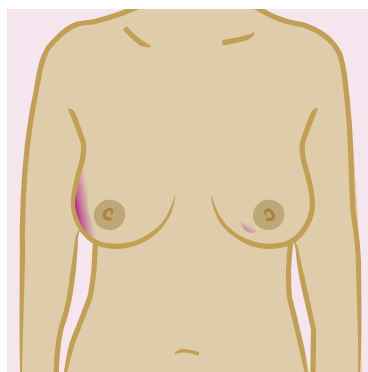
When you check your breasts, try to be aware of any changes that are different for you. The next pages show what these could be.



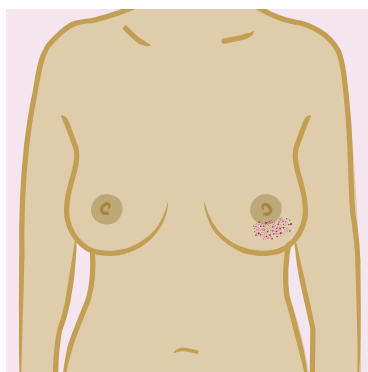
A change in size or shape



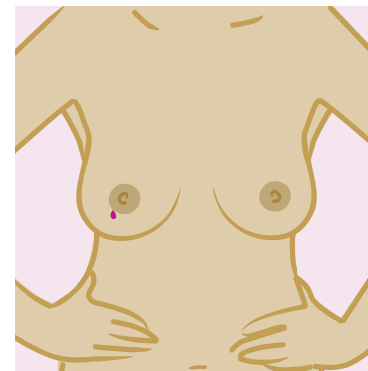
Redness or a rash on the skin and/or around the nipple



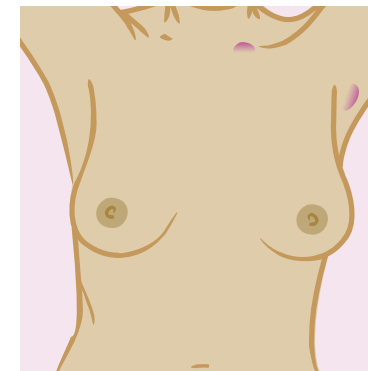
A lump or thickening that feels different from the rest of the breast tissue



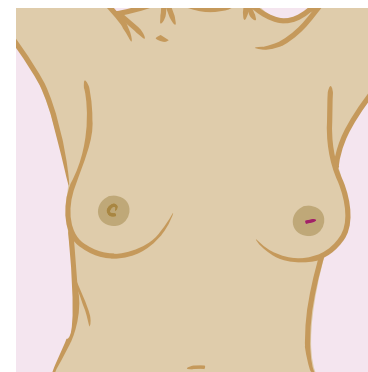
A change in skin texture such as puckering or dimpling (like orange skin)



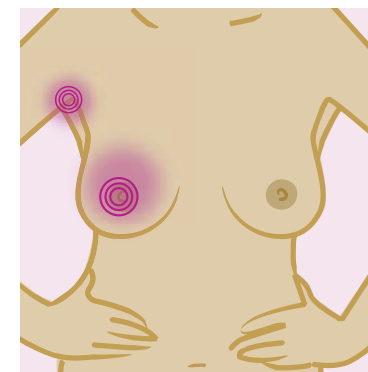
Discharge (liquid) from one or both of your nipples



A swelling in your armpit or around your collarbone



If your nipple becomes inverted (pulled in) or changes 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, do go and see your GP as soon as you can.

Most breast changes are likely to be normal, and not a sign of breast cancer. But you do need to find out what is causing the change. If you prefer you can ask if there will be a female doctor available. You can be assured that there will always be a female nurse present at your appointment. You can also take a friend or relative with you.

When your GP examines your breasts they may be able to reassure you that there is nothing to worry about, or they may refer you to a breast clinic for a more detailed examination and assessment.

For more information about what happens at a breast clinic and the tests you may have, see our [Referral to a breast clinic](#) leaflet.



Most breast changes are likely to be normal, and not a sign of breast cancer. But you do need to find out what is causing the change.

Breast screening

Breast screening (mammography) is an x-ray examination of the breasts. It may help to detect breast cancer before there are any signs or symptoms. The sooner breast cancer is diagnosed the more effective treatment may be.


Going for screening

In the UK, women between 50 and 70 are invited for breast screening every three years as part of the National Health Service Breast Screening Programme (NHSBSP). (Please note: this age range is to be extended to 47 to 73 in the future.)

Women under 50 are not invited for routine breast screening. This is because in younger women the density of the breast tissue makes it more difficult to interpret the mammogram (breast x-ray) and detect problems. Also, the incidence of breast cancer is much lower in this age group – 80 per cent of breast cancers occur in women over the age of 50 and the risk continues to increase with age.

To be invited for screening you have to be registered with a GP. Your name will be taken from your GP's list and you'll be sent an appointment from the screening service 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 appointment for screening. However, you're still entitled to breast screening every three years if you ask for it. You can contact your local breast screening unit by calling NHS Direct on 0845 4647 (or NHS 24 on 08454 242 424 in Scotland). Or ask your GP or practice nurse to arrange an appointment for you.



To be invited for screening you have to be registered with a GP. Your name will be taken from your GP's list and you'll be sent an appointment from the screening service to come for a mammogram.

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, but further tests are needed to find out what it is.

Going for breast screening will not prevent breast cancer from occurring. It's important to continue to be breast aware and report any changes to your GP even if you've had a mammogram recently, as breast cancer can develop in between screening mammograms.

Limitations of routine screening

Mammography is the most reliable way of detecting breast cancer early, but like other screening tests it is not perfect. 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.

Concerns about screening

Certain conditions diagnosed through screening may never develop further or may grow so slowly that they would never cause harm during a woman's life. However, it is currently recommended that they are all treated, because it is not possible to determine how they will develop in the future. Some doctors think that this can result in unnecessary treatment and anxiety.

If you have any questions about breast screening, talk to your GP, practice nurse or to a breast care nurse at your local breast screening unit. Or you can visit www.cancerscreening.nhs.uk/breastscreen

Does breast cancer run in families?

Breast cancer is a common disease, with 1 in 9 women in the UK developing it during their lifetime.

So it is not unusual to have one or two people in an extended family who have had breast cancer. However, in a small number of families breast cancer may be caused by a faulty gene (5–10 per cent of all cases).

For more information see our **Breast cancer in families** booklet.

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 may help to reduce your risk – and look after your general health by:

- eating a well-balanced diet with plenty of fruit and vegetables
- maintaining a healthy weight
- doing some regular exercise
- not drinking too much alcohol.

For more information about risk in general see our **Breast cancer risk: what it means to you** booklet or visit our website www.breastcancercare.org.uk

For more information see our booklets on:

Breast pain BCC71

Breast cysts BCC73

Referral to a breast clinic BCC70

Breast cancer in families BCC32

Breast cancer risk: what it means to you BCC158

To order, or download a copy, please visit

www.breastcancercare.org.uk/publications

Notes

A large print version of this leaflet can be downloaded from our website, www.breastcancercare.org.uk. It is also available in Braille or on audio CD on request by phoning **0845 092 0808**.

This leaflet has been produced by Breast Cancer Care's clinical specialists and reviewed by healthcare professionals and members of the public.

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Breast Cancer Care is here for anyone affected by breast cancer. We bring people together, provide information and support, and campaign for improved standards of care. We use our understanding of people's experience of breast cancer and our clinical expertise in everything we do.

We promote the importance of early detection of breast cancer and provide accurate answers to questions about breast health. We believe that up-to-date information, based on clinical evidence, builds confidence and helps people take control of their health. Our training, workshops and resources explain how to be breast aware and what changes to look and feel for.

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

Interpreters are available in any language. Calls may be monitored for training purposes. Confidentiality is maintained between callers and Breast Cancer Care.

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