



Fat necrosis



About this leaflet

This leaflet tells you about fat necrosis. It explains what fat necrosis is, how it's found and what will happen if it needs to be treated or followed up.

Although more common in women, men can also be affected by benign breast conditions.

What is fat necrosis?

The breasts are made up of lobules (milk-producing glands) and ducts (tubes that carry milk to the nipple), which are surrounded by fatty tissue and supportive tissue. Sometimes a lump can form if an area of the fatty breast tissue is damaged in some way. This is fat necrosis.

Fat necrosis is benign (non-cancerous) and does not increase the risk of developing breast cancer. It can affect women of any age. If you've been told you have fat necrosis you may feel worried or anxious. We hope this information helps you understand more about what it is and what it means for you.

The damage to the fatty breast tissue may have been caused by a bruise or injury to the breast, previous breast surgery or radiotherapy to the breast. Many women may not remember any specific injury.

Fat necrosis feels like a firm, round lump (or lumps) and is usually painless, but in some people it may feel tender or even painful. The skin around the lump may look red, bruised or occasionally dimpled. Sometimes the nipple can also be pulled in (retracted).

How is it found?

Fat necrosis usually becomes noticeable as a lump in the breast. After a breast examination your GP (local doctor) is likely to refer you to a breast clinic where you'll be seen by specialist doctors or nurses.

At the breast clinic you'll probably have three different tests, known as triple assessment, so that a definite diagnosis can be made. These include a:

- breast examination
- mammogram (breast x-ray) or ultrasound scan (which creates a picture of the breast using high-frequency sound waves)
- fine needle aspiration (FNA) or core biopsy.

However, if the ultrasound or mammogram clearly shows fat necrosis, a FNA or core biopsy may not be needed.

FNA is where a fine needle and syringe is used to take a sample of cells from the lump. A core biopsy uses a larger needle to remove a sample of breast tissue rather than cells. A local anaesthetic is usually given before a core biopsy. These samples are then sent to the laboratory to be looked at under a microscope.

FNA and core biopsy can themselves cause fat necrosis.

If you are under 35 you're more likely to have an ultrasound scan than a mammogram. This is because younger women's breast tissue is usually too dense to give a clear image on a mammogram.

Please call our free helpline if you'd like more information about any tests you may be having, or see our **Referral to a breast clinic** booklet.

Treatment and follow up

If you've been told you have fat necrosis you won't usually need any treatment or follow up.

Fat necrosis often goes away by itself. If the lump doesn't disappear, or gets bigger, you may need to have a small operation to remove it. You may also need an operation if the biopsy hasn't given enough information to confirm fat necrosis, this is called an excision biopsy and may be done using either a local or a general anaesthetic.

If your breast is painful after the operation you may want to take pain relief such as paracetamol. The operation will leave a small scar but this will fade in time.

What this means for you

You may feel anxious about having fat necrosis. Even though you may feel relieved that it's a benign condition, you may still worry about breast cancer. Having fat necrosis does not increase your risk of developing breast cancer. However, it's still important to be breast aware and go back to your GP if you notice any other changes in your breasts.

You can find out more about being breast aware in our **Your breasts your health: throughout your life** booklet.

If you'd like any further information or support, call our free helpline on **0808 800 6000** (Text Relay **18001**). You may also find it helpful to chat to someone who's had a similar experience to you by visiting our online benign breast conditions forum at **www.breastcancercare.org.uk**

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.

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www.breastcancercare.org.uk/donate-to-us



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.

For any breast health concerns, 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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