

Breast Self-Exams (BSE)

Breast Self Exam (BSE) is a simple and effective way for women to recognize the early signs and symptoms of breast cancer. Every woman is at risk for breast cancer. Breast cancer is the second most common form of cancer in women (non-melanoma skin cancer is the most common) and has the second highest cancer mortality rate in women (lung cancer has the highest rate). Approximately 200,000 women in the U.S. will be diagnosed with breast cancer and 40,000 women will die from the disease each year. BSE is the first line of defense for women to detect breast cancer at an early stage and increase the chances for a successful recovery.

Men can also develop breast cancer, although the incidence of male breast cancer is low. Approximately 1,500 men will be diagnosed with breast cancer and 400 will die from the disease each year in the U.S.

RISK FACTORS

Adapted from American Cancer Society, "What are the risk factors for breast cancer."

There are different types of risk factors for breast cancer. Some risk factors are inherent - you can't change them. Other risk factors are related to lifestyle choices and can be changed. Some factors can put you at higher risk than others and risk factors can change over time.

Risk Factors You Cannot Change:

- *Gender* - simply being a woman is the main risk factor for developing breast cancer.
- *Age* - your risk of developing breast cancer increases as you get older.
- *Genetics* - Ten percent (10%) of breast cancer cases are hereditary as a result of gene changes (mutations).
- *Family History* - breast cancer risk is higher among women whose close blood relatives have this disease.
- *Personal History* - a woman with cancer in one breast has a 3 to 4-fold increased risk of developing a new cancer in the other breast or in another part of the same breast.
- *Race* - White women are slightly more likely to develop breast cancer than are African-American women. Asian, Latino, and Native American women have the lowest risk of developing breast cancer.
- *Previous Biopsies* - women whose earlier breast biopsies detected proliferative breast disease are at higher risk.
- *Previous Irradiation* - women who as children or young adults have had radiation therapy to the chest area as treatment for another cancer (such as Hodgkin's disease or non-Hodgkin's lymphoma) have a significantly increased risk for breast cancer.
- *Menstrual History* - women who started menstruating at an early age (before age 12) or who went through menopause at a late age (after age 50) have a slightly higher risk of breast cancer.

Risk Factors Affected by Lifestyle Choices:

- *Not Having Children* - Women who have not had children or who had their first child after age 30 have a slightly higher breast cancer risk.
- *Oral Contraceptive Use* - Most studies do not show an increase or decrease in breast cancer risk for most women.
- *Hormone Replacement Therapy* - Most studies suggest that long-term use (5 years or more) of hormone replacement therapy (HRT) after menopause will increase your risk of breast cancer.

- *Not Breast-Feeding* - many studies have shown that breast feeding lowers breast cancer risk.
- *Alcohol consumption* - women who drink 2 to 5 alcoholic beverages a day increase their risk of developing breast cancer 1.5 times the risk of non-drinkers.
- *Obesity & High-Fat Diets* - being overweight is associated with an increased risk of developing breast cancer, especially for women after menopause.

It is important to remember that having one or more risk factors does not guarantee that you will develop breast cancer. Some women with a number of risk factors never develop breast cancer while the majority of women with breast cancer have no identifiable risk factors.

OTHER FACTORS

The National Cancer Institute conducted a study that followed over 13,000 women for over 10 years to examine whether there is an association between having breast implants and having an increased risk for breast cancer. The study found that there was no change in breast cancer risk for women who had breast implants.

If you have implants, you should still perform BSEs. In order to do this effectively, you should ask your medical provider to help you distinguish the implant from your breast tissue. Press firmly inward at the edges of the implants to feel the ribs beneath, checking for any lumps. Be careful not to manipulate (e.g., squeeze) the implant excessively, which may cause the implant to leak or deflate. Any new lumps or sores should be evaluated with a biopsy. If a biopsy is performed, care must be taken to avoid puncturing the implant.

A research study published in the February 2001 issue of *Cancer*, found that women who had breast reduction surgery actually decreased their risk of breast cancer. However, breast reduction surgery is not recommended as a method to prevent breast cancer.

CLINICAL BREAST EXAMS

Women over the age of 20 should schedule a regular clinical breast exam along with a gynecological exam with their health care provider every year.

MAMMOGRAMS

A mammogram is a screening procedure that uses x-ray photographs to look deep into the breast tissue. Mammograms can detect a lump well before it can be felt. The process involves a mildly uncomfortable squeezing of the breast between 2 plastic plates in a x-ray machine. The procedure should not be painful and only lasts a few minutes. Annual mammograms are recommended for women over the age of 50. Women between the ages of 40 and 50 should have a mammogram every 1-2 years, and depending on their medical history, younger women may also decide to have mammograms.

TIMING FOR DOING BSE

BSE should be performed once a month. The procedure itself is simple and should only take a few minutes. The best time to do a BSE is about a week after your period because many women experience breast tenderness and bloating before and during their period. For women on birth control pills, the week you start a new pack can remind you to perform a BSE.

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If you do not have regular periods, you may find it helpful to choose a date each month that is easy to remember (e.g., your birth date or the first of each month). Performing BSEs on a regular basis will allow you to become familiar with the size and feeling of your breasts and can help you detect any changes if they occur.

PERFORMING BSE (Breast Self Exam)

BSE is simple to perform and can quickly become a part of your health routine. You can also ask your partner if they would perform BSE for you.

When performing BSEs you are looking for:

- Any dimpling or puckering of the skin
- Changes in the nipple: inverted, scaliness, discolored, or discharge
- Redness
- Swelling
- Pain in the breast
- A mass that is painless, hard and has irregular edges

To view a picture of these methods, check the American Cancer Society web site.

Step 1: Look in the mirror at your breasts. Put your hands on your hips and bend slightly forward from the waist. Look for any signs of dimpling, puckering, or uneven textures in both breasts. Look again with your arms raised above your head.

Step 2: Standing in the shower, you can use soap to allow your fingers to slide more easily over your skin. With your right hand behind your head, use your left hand to check your right breast.

Using the flat pads of your fingers, start at the upper corner of your breast (closest to your armpit). With firm pressure, move your fingers together in a circular motion in one of 3 ways:

- A circular pattern around the breast moving in towards the nipple, or
- A vertical up and down motion from armpit to rib cage, or
- A diagonal wedge motion from the edge of the breast to the nipple and out again.

Be sure to cover the entire breast and underarm area and use the same method each month.

Step 3: Switch sides by placing your left hand behind your head and use your right hand to check your left breast. Repeat the instructions in #2.

Step 4: Squeeze both nipples to check for signs of discharge (other than breast milk).

Step 5: Repeat the process lying down. Sometimes it can be easier to recognize lumps when the breast tissue is flat against your chest.

IF YOU FIND A LUMP

If you find a lump or are unsure if what you feel is a lump, call the University Health Service at 275-2662 to make an appointment to have your primary care provider or one of our women's health nurse practitioners perform a clinical breast exam to determine whether you need further testing, such as a mammogram, ultrasound or biopsy. These tests will help determine if the lump is cancerous or if the lump is actually a cyst, a symptom of fibrocystic breast condition or another benign (not cancerous) breast condition.

It is important to remember that breast changes are normal, especially in young women. Just because you find a lump or notice a change in your breasts does not mean that you have breast cancer. Some women have lumpy breasts and other women experience regular breast changes during their menstrual cycle.

Of lumps biopsied, 80% are benign. If you feel a lump, enlargement, tenderness, or other unexplained changes in your breasts, talk with your health care provider right away. The sooner you have the lump diagnosed, the more treatment options you will have and the more successful your treatment will be.

SCHEDULING AN APPOINTMENT

Call 275-2662 to schedule an appointment at the University Health Service (UHS). UHS offers a full range of gynecological and contraceptive services. You can schedule an appointment with your primary care provider (PCP) or with one of the women's health nurse practitioners for gynecological care and to discuss contraceptive options. All visits to UHS are strictly confidential.

LINKS

For more information about breast self exams, you can visit:

The Susan G. Komen Foundation:

http://www.komen.org/intradoc-cgi/idc.cgi?isapi.dll?IdcService=SS_GET_PAGE&nodeId=298

The American Cancer Society:

http://www.cancer.org/docroot/CRI/content/CRI_2_4_3X_Can_breast_cancer_be_found_early_5.asp?rnav=cri

MedlinePLUS (diagrams and pictures)

<http://www.nlm.nih.gov/medlineplus/ency/article/001993.htm>