

factsheet

BREAST

AWARENESS

It is important to know how your breasts usually look and feel so that if there are any changes you can seek help as soon as possible.

Most breast changes are due to benign (non-cancerous) conditions. If you notice any changes to your breasts, see your doctor so you can rule out breast cancer. Breast cancer is the most commonly diagnosed cancer in women. 1 in 7 Australian women will be diagnosed with breast cancer in their lifetime.

There are three steps to being breast aware:

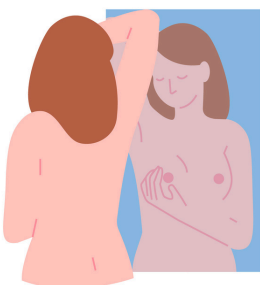
1. get to know the normal look and feel of your breasts
2. see your doctor if you notice any unusual changes
3. if you are aged 50 to 74, have a free mammogram at BreastScreen every 2 years

There is no right or wrong way to examine your breasts – these tips might help:

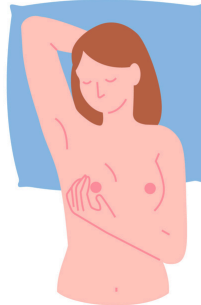
- use a mirror to become familiar with the usual look and shape of your breasts
- become familiar with the normal feel of your breasts at different times of the month - you might find this easiest in the shower or bath, lying in bed or when getting dressed
- remember to check all parts of your breasts, including your armpits and up to your collarbones



In the shower



In front of mirror



Lying down

If you have any breast problems or if you notice any of the following changes, you should see a doctor as soon as possible:

- a lump or lumpiness, especially if it is in one breast
- a change to the shape or size of your breast
- changes to the skin over the breast – like thickening, dimpling or redness
- unusual pain, particularly in one breast
- changes to the nipple - like turning inwards, crusting or redness
- nipple discharge

Most breast changes are not due to cancer - if you do have breast cancer, it's important to find it as early as possible so you can get the right treatment.

What is BreastScreen?

The Australian Government funds a national program called Breastscreen to screen for early signs of breast cancer between the ages of 50 and 74 years. This is done by a mammogram (X-ray of the breasts) every 2 years. This screening is only for those who don't have symptoms in their breasts.

If you're aged 40-49, or 75 and over you can also participate in the program - you should discuss the pros and cons with your doctor first.

If any changes on the mammogram are found, you will be asked to have further investigations, such as a clinical examination, ultrasound and a biopsy.

For more information see the BreastScreen website.



Are there other common breast problems I should know about?

Fibrocystic breast tissue (fibrocystic breast change)

This is the name given to breast tissue that feels lumpy. It is very common. The lumpiness tends to vary throughout the menstrual cycle due to the influences of changing hormone levels.

Breast cyst

This lump is a fluid-filled sac which forms within the breast tissue. Sometimes there can be several cysts present at once. Cysts can be painful and can alter in size with the menstrual cycle. They are most common between ages of 35 and 50. Any new lump should be assessed by your doctor.

Fibroadenoma

This benign breast lump consists of glands and fibrous tissue, and often feels smooth, firm and mobile. It is most common between the ages of 15 and 30. You may have more than one fibroadenoma at the same time. Fibroadenomas should be assessed by your doctor.

Mastalgia (Breast pain)

Breast pain is often linked to the menstrual cycle. It is more common just before the period starts due to hormonal activity and fluid retention.

Pain in the breasts is most common between the ages of 30 and 50 and is not usually a sign of breast cancer or other breast disease.

Your doctor will take a thorough history and examine you and possibly send you for some further tests to be sure that breast cancer is not the cause of the pain. Your doctor can give you advice about treatments for breast pain.

For more information, see our [Breast Pain \(Mastalgia\) fact sheet](#).

Nipple discharge

Discharge from the nipple (outside of normal breastfeeding) can be blood stained, watery or may even contain pus. Nipple discharge after menopause is extremely rare. All nipple discharge, especially if it is originating from one breast only, should be assessed by your doctor.

For more information

- Visit your nearest Family Planning Australia clinic fpnsw.org.au/clinics
- Chat to a nurse via Talkline – 1300 658 886 or fpnsw.org.au/talkline
- [National Relay Service \(for people who are d/Deaf, hard of hearing or have speech communication difficulties\)](#) – 133 677
- Translating and Interpreting Service (TIS National) – 131 450
- Family Planning NSW client resource on contraception – [What suits me?](#) fpnsw.org.au/health-information/contraception/contraception-options
- fpnsw.org.au/health-information/breast-health/breast-pain-mastalgia
- [BreastScreen NSW](#) – breastscreen.nsw.gov.au
- [Cancer Council](#) – cancer.org.au