

Breast cancer

Breast cancer is the most common cancer in Australian women. One in nine women will be diagnosed with breast cancer by the age of 85. In Australia, about 13,000 women are diagnosed with breast cancer each year. Around 3,265 Victorian women are diagnosed with the disease every year.

Breast cancer can occur at any age, but it is most common in women over the age of 60 years. Around one quarter of women are younger than 50. Men can also develop breast cancer, although this is extremely rare. Each year, about 30 men are diagnosed in Victoria.

There are different types of breast cancer, but they all begin in the milk ducts or the milk lobules (or both). Some breast cancers are found when they are 'in situ'. This means they have not spread outside the milk duct or lobule where they began.

Most breast cancers are found when they are 'invasive'. This means the cancers have grown beyond the duct or lobule, where they began, into other breast tissue or out of the breast. Breast cancer that spreads out of the breast may spread to lymph nodes in the armpit nearest the breast affected by cancer (axillary lymph nodes). It can also spread to other parts of the body such as the bones, lungs and liver.

Risks and causes

The exact cause of breast cancer is unknown, but factors that seem to increase risk include:

- **Gender** – being a woman
- **Getting older** – women over 50 years of age are invited to take part in yearly mammograms to screen for breast cancer
- **Heredity** – having several close family members (mother, sister or daughter) who have had breast cancer
- **Previous history of breast cancer** – women who have had breast cancer have a greater risk of developing it again
- **Certain breast diseases** – some types of breast disease that are found through mammograms indicate an increased risk.

Other risk factors

Other factors that seem to increase risk include:

- Not having children or having children after the age of 30
- Early age at first period
- Later age of natural menopause (55 years or older)
- Alcohol intake (more than one standard drink per day)
- Obesity or gaining a lot of weight after menopause
- Using the contraceptive pill – the risk is higher while taking the pill and for about ten years after stopping use
- Using hormone replacement therapy (HRT) – also known as hormone therapy (HT) – the risk increases the longer you take it, but disappears within about two years of stopping use.

Having some of these risk factors does not mean that you will get breast cancer. Most women with breast cancer have no known risk factors, aside from getting older. More research needs to be done before we can be definite about risk factors.

In men, the main risk factor is abnormal enlargement of the breasts (gynaecomastia) due to drug, chemical or hormone treatments, or because of Klinefelter's syndrome (a sex chromosome disorder). Men's risk increases where there is a family history of male breast cancer or a strong family history of breast cancer.

Changes in the breast

Breasts undergo many changes in a woman's life – due to puberty, the menstrual cycle, pregnancy, breastfeeding, changes in weight or ageing. It is important for all women to get to know the normal look and feel of their breasts.

By regularly checking your breasts, you may be able to recognise changes that could be a sign of breast cancer. Such changes include:

- Thickening of the tissue
- A lump or lumpiness
- Discharge from the nipple
- An inverted or 'turned-in nipple' (unless the nipple has always been turned in)
- Puckering or dimpling of the skin
- A change in the shape of the breast or nipple
- A painful area
- Anything that is not 'usual' for you.

Please be aware that some of these symptoms occur without any serious disease being present. Nine out of 10 breast changes are not breast cancer. However, any unusual breast change should be checked by a doctor, just to be sure.

Diagnosis of breast cancer

Breast changes are investigated through a series of tests organised by your doctor or specialist. Most breast changes are diagnosed as benign (non-cancerous). If your tests show that you may have or have cancer, your doctor will refer you to a specialist who will advise you about treatment options.

Initial tests you may have include:

- **Physical examination** – breasts and armpits are examined
- **Diagnostic mammogram** – an x-ray of the breast tissue
- **Ultrasound** – a device that uses sound waves to scan the breast.

If further tests are required, one or more of the following procedures may be used:

- **Fine needle aspiration** – a very narrow needle is used to withdraw cells from the area for testing.
- **Core biopsy** – a larger needle is used to take a tissue sample for testing.
- **Open biopsy** – surgery is performed under general anaesthetic to remove the whole area for testing.
- **Hormone tests** – if a cancer is found, it can be checked for special markers called hormone receptors to see if it will respond to hormone treatment.
- **Ductogram or discharge test** – this is for breast cancers that are causing a discharge from the nipple.

Other tests – these may include blood tests, bone scans and chest x-rays.

Test results can take a few days to come back. It is very natural to feel anxious waiting to get your results. It can help to talk to a close friend or relative about how you are feeling. You can also contact the Cancer Council Helpline on 13 11 20 and speak with a cancer nurse.

Treatment for breast cancer

Treatment options for breast cancer include surgery, radiotherapy, chemotherapy and hormone therapy. Usually more than one is used. Treatment for breast cancer in men is similar to (and as effective as) the treatment for breast cancer in women.

Treatment depends on several factors, including:

- Whether you have had your menopause
- The type of breast cancer you have
- The size of your breast tumour in relation to your breast
- The stage of your breast cancer (whether or not the cancer is confined to the breast or has spread to other parts of the body)
- The grade of your cancer cells
- The results of tests on your cancer cells
- Your age, general health and personal preferences.

Surgery

This is usually the first choice of treatment. An operation to remove the cancer, surrounding breast tissue and often the nearby lymph nodes is the preferred first treatment. Surgery options include:

- **Breast-conserving surgery** – a smaller operation removes the cancer and some of the surrounding tissue, and usually some lymph nodes, leaving the bulk of the breast intact.
- **Mastectomy** – the entire breast is removed, along with lymph nodes from the armpit. Extra cancer treatment such as chemotherapy or radiotherapy is often unnecessary.
- **Breast reconstruction surgery** – women who have a mastectomy may choose to have reconstruction surgery (at the time of the mastectomy or later). Options include silicone gel or saline-filled implants or the use of your own muscle and skin to create a breast-like shape. (If you don't choose reconstruction, you may use a breast form or prostheses. These are pads that are worn inside your bra. They help to restore balance and are designed to look like a normal breast under clothes.)

All surgery has some risks. Possible side effects of breast surgery include infection, bleeding, blood clots in the leg (deep vein thrombosis), nerve damage and swelling of the arm. These are not common, but you need to understand the risks.

Other treatments

Depending on the cancer, other treatment options can include:

- **Radiotherapy** – using x-rays (radiation) to kill any remaining cancer cells. Women who have had breast-conserving surgery often have a course of radiotherapy. Side effects can include a short-term reddening of the skin, which looks like sunburn, or longer term thickening of skin.
- **Chemotherapy** – cancer-killing drugs given intravenously (directly into a vein). Chemotherapy can be offered to women with early breast cancer as an extra treatment to surgery, radiotherapy or both. Chemotherapy has side effects that will depend on the type of drug you have, but can include nausea, vomiting and hair loss.
- **Hormone treatments** – many breast cancers are influenced by the sex hormones oestrogen and progesterone. Hormone treatment can reduce the chances of breast cancer developing again.
- **Complementary and alternative therapies** – when used alongside your conventional cancer treatment, some of these therapies can make you feel better and improve quality of life. Others may not be so helpful and in some cases may be harmful. Details of the Cancer Council Victoria's booklet *Complementary and alternative cancer therapies* are in the **Where to get help** section.

All treatments can cause side effects. Many of these are only temporary, but some may be permanent. Your medical team will discuss these with you before you begin treatment.

When a cure isn't possible

If breast cancer has been diagnosed in its later stages, the cancer may have spread to the point where a cure is no longer possible. Treatment then focuses on improving quality of life by relieving the symptoms (this is called 'palliative' treatment). Medications to relieve pain, nausea and vomiting.

Your sexuality and breast cancer

Having breast cancer and its treatment can affect the way you feel about your body, who you are, your relationships, the way you express yourself sexually and your sexual feelings (your 'sexuality'). These changes can be very upsetting.

Your medical team should discuss these issues with you before and during your treatment. If you feel you would like to discuss things further, ask your doctor for a referral to a counsellor or speak to a cancer nurses on the Cancer Council Helpline (13 11 20).

Caring for someone with cancer

Caring for someone with cancer can be a difficult and emotional time. If you or someone you know is living with or caring for someone with breast cancer they may find it helpful to download and read some of the Cancer Council Victoria information booklets

Where to get help

- Your doctor
- Breast cancer specialist
- Surgeon (specialist in breast surgery)
- Breast care nurse or cancer nurse
- Breast cancer support groups
- Cancer Council Helpline Tel. 13 11 20
- Multilingual Cancer Information Line, Victoria Tel. (03) 9209 0169
- Cancer Council Victoria's booklet *Complementary and alternative cancer therapies*.

Things to remember

- Breast cancer affects one in nine Australian women.
- It is important for all women to get to know the normal look and feel of their breasts.
- Although most breast changes aren't caused by breast cancer, you should always consult your doctor if you notice an 'unusual' change.
- Treatment for breast cancer may include surgery, radiotherapy, chemotherapy and hormone treatment.

This page has been produced in consultation with, and approved by:

Cancer Council Victoria

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