



# BREAST CANCER

— AWARENESS MONTH —  
— OCTOBER —

CLAYTODAY



# What to know about breast lumps

Breast cancer is a cause for concern for millions of women. Each year about 264,000 cases of breast cancer are diagnosed in women in the United States, according to the Centers for Disease Control and Prevention. The Canadian Cancer Society indicates around 28,600 Canadian women

will be diagnosed with breast cancer this year. Globally, data from the World Health Organization indicates roughly 2.3 million women were diagnosed with breast cancer in 2020.

One of the more notable symptoms of breast cancer is the presence of a lump

in the breast. Though not all lumps are malignant, it's important that women learn about breast anatomy and lumps as part of their preventive health care routines.

Mount Sinai says that breast lumps can occur at any age in both men and women. Hormonal changes can cause breast enlargement and lumps during puberty, and boys and girls may even be born with lumps from the estrogen received from their mothers.

It is important to note that the vast majority of breast lumps are benign. The National Institutes of Health says 60 to 80 percent of all breast lumps are non-cancerous. The most common causes of breast lumps are fibroadenomas and fibrocystic changes. Fibroadenomas are small, smooth, moveable, painless round lumps that usually affect women who are at an age to have children, indicates the Merck Manual. They are non-cancerous and feel rubbery.

Fibrocystic changes are painful, lumpy breasts. This benign condition does not increase a woman's risk for breast cancer. Symptoms often are worse right before one's menstrual period, and then improve after the period begins.



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Additional factors can contribute to the formation of lumps. Breast cysts are fluid-filled sacs that likely go away on their own or may be aspirated to relieve pain. Complex cysts may need to be removed surgically. Sometimes cysts also may form in milk ducts throughout the breasts.

Lumps also may be the result of injury. Blood can collect under the skin and form a type of lump called a hematoma. Other lumps may be traced to lipomas, which is a collection of fatty tissue or breast abscesses, which typically occur if a person is breastfeeding or has recently given birth.

Additional causes of lumps can be discussed with a doctor. Though the majority of lumps are not a cause for concern, it is important for people to regularly feel their breasts to check for abnormalities. Doctors may recommend annual mammograms to women age 40 and older. In its earliest stages, breast cancer may produce little to no visible symptoms, but a mammogram may be able to catch something early on.

## How to conduct a breast self-exam

Catching cancer in its earliest stages, when it can be treated most successfully, can increase the chances individuals who develop the disease go on to live long, healthy lives. Doctors are not as familiar with their patients' bodies as the patients themselves, so it is vital for people to be aware of anything that seems out of the ordinary regarding their physical well-being. In regard to breast health, familiarizing oneself with how the breasts look and feel can help women detect breast cancer sooner rather than later.

The Mayo Clinic says breast self-exams encourage breast awareness. A self-exam is a visual and manual inspection of the breasts that people perform on their own at home. Opinions on the efficacy of breast self-exams are mixed. For example, a 2008 study of nearly 400,000 women in China and Russia reported that breast self-examination does not have a meaningful effect on breast cancer survival rates and may even lead to unnecessary tissue biopsies. In response to this and similar studies, the American Cancer Society stopped recommending breast self-exam as a screening tool for those with an average risk of breast cancer. Still, other organizations, such as Breastcancer.org, advocate for breast self-exams when they are part of a comprehensive screening program that includes regular physical exams by a doctor, mammography, and ultrasounds and MRI testing.

The National Breast Cancer Foundation, Inc. (says a breast self-exam can be performed at least once a month. Establishing a baseline early on can help women detect abnormalities that much sooner. The exam should be done a few days after a menstrual period ends. For those who have reached menopause, the exam should be performed on the same day of each month to establish consistent results.

There are a few different ways to conduct a breast self-exam. The Cleveland Clinic offers these three options and instructions.

**1 While standing:** Remove your shirt and bra. Use your right hand to examine your left breast, then vice versa. With the pads of your three middle fingers, press on every part of one breast. Apply light pressure, then increase the pressure to firm. Feel for any lumps, thick spots or other changes. A circular pattern often helps you ensure you check the entirety of the breast. Then you should press the tissue nearest your armpit. Check under your areola (the area around the nipple) and squeeze the nipple to check for any discharge. Repeat these steps on the other breast. A standing exam is easily performed in the shower.

**2 While lying down:** Breast tissue spreads out more evenly while lying down, so this is a good position to feel for breast changes, particularly for women with large breasts. Lie down and put a pillow under your right shoulder. Place your right arm behind your head. Using your left hand, apply the same technique as described in option 1, using the pads of your fingers to check the breast. Change the pillow to the other shoulder, and check the other breast and armpit. Remember to check the areolas and nipples.



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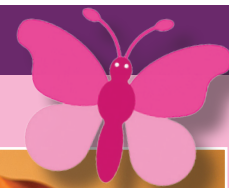
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## What the different stages of breast cancer signify

Upon being diagnosed with breast cancer, women and their families are presented with a wealth of information regarding the disease. Some of that information is unique to each patient, but much of it is based on decades of research and millions of successful treatments.

The American Cancer Society reports that cancer staging is a process during which doctors will attempt to determine if a cancer has spread and, if so, how far. Breast cancer stages range from stage 0 to stage IV. Each stage signifies something different, and recognition of what each stage indicates can make it easier for women to understand their disease.

### Stage 0

The Memorial Sloan Kettering Cancer Center notes that when a woman is diagnosed with stage 0 breast cancer, that means abnormal cells are present but have not spread to nearby tissue. The National Breast Cancer Foundation, Inc. (indicates stage 0 breast cancer is the earliest stage of the disease and is highly treatable when detected early. Indeed, the American Cancer Society reports a five-year survival rate of 99 percent among individuals diagnosed with stage 0 breast cancer.

### Stage I

Stage I is still considered early stage breast cancer. The MSKCC notes a stage I diagnosis indicates tumor cells have spread to normal surrounding breast tissue but are still contained in a small area. Stage I breast cancer may be characterized as stage IA, which indicates a tumor is about as large as a grape and cancer has not spread to the lymph nodes, or stage IB, which indicates the tumor may be slightly smaller but is accompanied by small clusters of cancer cells in the lymph nodes or there is no tumor and only the small clusters in the lymph nodes. The ACS also reports a 99 percent five-year survival rate for patients.

### Stage II

A stage II breast cancer diagnosis indicates the tumor is at least 20 millimeters (about the size of a stage IA tumor) and potentially as large as 50 millimeters. The tumor also can be larger than 50 millimeters if no lymph nodes are affected (stage IIB). The ACS notes the size of the tumor may indicate if the cancer is stage IIA or stage II B. The MSKCC notes that a stage IIA diagnosis could indicate there is no tumor or there is a tumor up to 20 millimeters and the cancer has spread to the lymph nodes under the arm. A tumor determined to be between 20 and 50 millimeters that has not spread to the lymph nodes also indicates a stage IIA diagnosis. A stage IIB diagnosis indicates the tumor in the breast is between 20 and 50 millimeters and has spread to between one and three nearby lymph nodes. According to Cancer Research UK, the five-year survival rate for stage II breast cancer is around 90 percent.



### Stage III

Stage III breast cancer is considered regional, which the ACS reports notes had a roughly 86 percent survival rate between 2013 and 2019. The MSKCC notes that a stage III diagnosis indicates the tumor is larger than 50 millimeters and has affected lymph nodes across a wider region than in less developed stages of the disease. Cancers that have reached stage III may be categorized as stage IIIA, stage IIIB or stage IIIC.

The American College of Surgeons reports that stage IIIA indicates a tumor of any size that has spread to between four and nine lymph nodes or a tumor larger than five centimeters that has spread to between one and three lymph nodes. Stage IIIB indicates any size tumor and that the cancer has spread to the chest wall. A stage IIIC diagnosis indicates the tumor can be any size and has spread to 10 or more lymph nodes.

### Stage IV

Stage IV is the most advanced form of breast cancer. If the cancer has reached stage IV, that indicates the tumor can be any size and has spread beyond the breast to other parts of the body, potentially including organs and tissues. The ACS reports that survival rate for this stage, which is considered distant, is 31 percent. However, the breast cancer advocacy organization Susan G. Komen notes that only around 6 percent of breast cancer diagnoses in women diagnosed for the first time have reached stage IV at the time of diagnosis. Staging makes it easier to understand a breast cancer diagnosis. More

information about breast cancer staging is available at [mskcc.org](http://mskcc.org) and [cancer.org](http://cancer.org).



**3 Mirror examination:** With shirt and bra removed, stand in front of a mirror. Place your arms down by your sides and look for any changes in breast shape, or any swelling and dimpling of the skin. Look for changes in the positioning of nipples. Next, place both hands on your hips and flex your chest muscles, once again looking for any changes while the muscles are in this position. Remember to look at both breasts.

Breast tissue extends to the armpit, collarbone and the top of the abdomen, so it is essential to look at all these areas, not just the cleavage and nipples.

A self-examination is not sufficient to detect breast cancer. The NBCF says mammography can usually detect tumors before they can be felt, making a mammogram the best exam for early detection. However, self-exams can be yet another tool for women to use to maintain breast health.

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# Debunking MYTHS Surrounding Breast Cancer

Events like National Breast Cancer Awareness Month and the Susan G. Komen have been integral to raising awareness about the most commonly diagnosed cancer in women across the globe. Though such campaigns and events have helped many women better understand breast cancer and their own risk for the disease, certain myths surrounding breast cancer persist. Such myths are not harmless and can, in fact, lead to unsafe outcomes that jeopardize women's health.

Questions about breast cancer should always be directed to a physician. Though physicians may not have all the answers, they remain useful allies in the fight against a disease that the World Cancer Research Fund International reports will be discovered in roughly three million women this year. As women seek more knowledge of breast cancer, it can be just as important to recognize some common myths surrounding the disease.

## MYTH

### MRIs are more effective than mammograms

The National Breast Cancer Coalition notes that no evidence exists to support the assertion that a magnetic resonance imaging exam is a more effective screening test for breast cancer than a mammogram. The NBCC acknowledges that an MRI can be an effective diagnostic tool when doctors suspect something is wrong. However, the NBCC advises against using MRI to screen for breast cancer since it is more likely to yield a false-positive result than a mammogram. Indeed, the National Breast Cancer Foundation identifies mammography as the gold standard for the early detection of breast cancer.



## MYTH

### Breast size and breast cancer risk are connected

This myth typically suggests breast cancer is more common in women with large breasts. The NBCF notes there is no connection between breast size and breast cancer risk. Breast density, not size, may be associated with a greater risk for breast cancer. The Mayo Clinic notes dense breast tissue refers to the ways breast tissue appears on a mammogram. Women with dense breasts, which the National Cancer Institute notes affects roughly half of all women over age 40, are at higher risk for breast cancer because the dense tissue makes screening for the disease more difficult. But breast size and breast density are not one and the same.

## MYTH

### All breast lumps are cancerous

The NBCF indicates only a small percentage of breast lumps end up being cancerous. Lumps should never be ignored, and should be reported to a physician immediately. But it's important to avoid jumping to conclusions after finding a breast lump. A clinical breast exam can determine what's behind the lump, and women who discover a lump should remain calm until such an exam is conducted.

These are just some of the many myths circulating about breast cancer. More information about the disease can be found at [nationalbreastcancer.org](http://nationalbreastcancer.org).

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