Patient Version

American Cancer Society®

Breast Cancer Fact Sheet

About Breast Cancer

Breast cancer can start in any area of the breast. In the US, breast cancer is the most common cancer (after skin cancer) and the second-leading cause of cancer death (after lung cancer) in women.

Risk Factors

Risk factors for breast cancer that you cannot change include:

Being born female

This is the main risk factor for breast cancer. But men can get breast cancer, too.

Getting older

As a person gets older, their risk of breast cancer goes up. Most breast cancers are found in women age 55 or older.

Personal or family history

A woman who has had breast cancer in the past or has a close blood relative who has had breast cancer (mother, father, sister, brother, daughter) has a higher risk of getting it. Having more than one close blood relative increases the risk even more. It's important to know that most women with breast cancer don't have a close blood relative with the disease.

Inheriting gene changes

Certain gene changes (most commonly in *BRCA 1* and *BRCA 2* genes) can lead to inherited breast cancer.

Having dense breast tissue

Women whose breasts show as dense on mammograms have a higher risk of breast cancer. Dense breast tissue can also make it harder to see cancers on mammograms.

Lifestyle-related risk factors for breast cancer

- Drinking alcohol
- Being overweight or obese, especially after menopause
- Not being physically active
- Getting hormone therapy after menopause with estrogen and progesterone therapy
- Starting menstruation early or having late menopause
- Never having children or having first live birth after age 30
- Using certain types of birth control
- Having a history of non-cancerous breast conditions

Prevention

There is no sure way to prevent breast cancer, and some risk factors can't be changed, such as being born female, age, race, and personal or family history of the disease. But there are things a person can do that can help lower the risk for breast cancer. Avoiding or limiting alcohol, getting regular physical activity, and getting to and staying at a healthy weight might help lower risk. Sometimes, women at higher risk are referred to a genetic counselor to decide if they should have genetic testing, or might choose to take medications or have procedures that help reduce their risk.

Screening and Early Detection

The earlier breast cancer is found, the better the chances for successful treatment. The American Cancer Society recommends the following for finding breast cancer early in women at average risk:

- Women ages 40 to 44 should have the choice to start yearly breast cancer screening with a mammogram (x-ray of the breast) if they wish to do so.
- Women ages 45 to 54 should get a mammogram every year.
- Women 55 and older can switch to a mammogram every 2 years, or can continue yearly screening. Screening should continue as long as a woman is in good health and is expected to live at least 10 more years.
- All women should understand what to expect when getting a mammogram for breast cancer screening what the test can and cannot do. They should also be familiar with how their breasts normally look and feel and report any changes to a health care provider right away.
- Screening MRI is recommended for certain women at high risk of breast cancer. Talk to a health care provider for more information.

Signs and Symptoms

The most common sign of breast cancer is a new lump or mass, but not all lumps or masses are found to be cancer. Other signs include a swelling of all or part of a breast (even if no lump is felt); skin irritation or dimpling (sometimes looking like an orange peel); nipple pain or retraction (turning inward); nipple discharge (other than breast milk); nipple or breast skin that is red, dry, flaking, or thickened; or swollen lymph nodes. It is important to have any new breast mass, lump, or breast change checked by an experienced health care provider.

Treatment

Treatment for breast cancer depends on the type and stage of the cancer, special testing that might be done on the tumor, as well as the person's age, other health problems, and personal choices. People who are diagnosed with breast cancer should discuss all treatment options and make informed treatment decisions together with their doctors.

Living With Breast Cancer

From the time a person is diagnosed with breast cancer, their quality of life is affected in some way. Different physical, social, psychological, spiritual, and financial issues can come up at any time during the cancer experience and after treatment is over.

Some types of breast cancer can be serious. Palliative care is focused on helping to improve the quality of life and dealing with issues that people living with a serious illness might have. People with advanced breast cancer may benefit from having palliative care at any time from the point of diagnosis, throughout treatment, and beyond.

Good communication between a person with cancer and the health care team is important and involves:

- Asking and answering questions
- Working together to set care goals
- Making shared decisions
- Managing side effects and other issues
- Making sure to schedule follow-up tests and care

To learn more, visit www.cancer.org/cancer/breast-cancer.html.



