



## FACTS FOR LIFE

# Breast Cancer Facts

### What you need to know

#### How can I prevent breast cancer?

The causes of breast cancer are not fully understood, although it is clear that a woman's age, gender and lifetime exposure to estrogen and her age at the time of her first childbirth play an important role. Because no one knows exactly what causes breast cancer, there are no sure ways to prevent it. However, there are steps that every woman can take that may make developing breast cancer less likely. These include eating healthy, maintaining a healthy weight, exercising regularly and limiting the amount of alcohol you drink. Leading a healthy lifestyle will not eliminate your chance of getting breast cancer, but it may help reduce your risk. For women at higher risk, the antiestrogen drug tamoxifen can also help to reduce the risk of developing breast cancer.

#### Who gets breast cancer?

Anyone can get breast cancer. For example, did you know...

- the older a woman is, the more likely she is to get breast cancer?
- white women are more likely to get breast cancer than women of any other racial or ethnic group? They also have a better chance of survival, primarily because their cancer is usually detected earlier.
- African American women are more likely to die from breast cancer than white women.
- men can get breast cancer too, although it is rare. Less than one of every 100 cases of breast cancer in the U.S. occurs in men.
- in 2007, it is estimated that men will account for 2,030 cases of breast cancer.<sup>1</sup>

#### How do I know if I am at risk for breast cancer?

All women are at risk for breast cancer. Known risk

factors like having a family history of breast cancer, starting menopause after age 55 or never having children account for only a small number of new breast cancer cases every year. That means that most women who get breast cancer have no known risk factors except being a woman and getting older.



#### I have a family history of breast cancer. Does that mean I'll develop breast cancer, too?

Just because other family members have had breast cancer doesn't mean that their disease was inherited. Only about 5 to 10 percent of all breast cancers occur because of inherited mutations.<sup>2</sup>

#### If I am diagnosed with breast cancer, what are my chances of surviving?

In general, pretty good. The 5-year survival rate for all women diagnosed with breast cancer is 90 percent.<sup>2</sup> This means that 90 out of every 100 women with breast cancer will survive without a recurrence for at least five years. Most will live a full life and never have a recurrence. Your chances of surviving are better if the cancer is detected early, before it spreads to other parts of your body. In fact, when breast cancer is confined to the breast, the 5-year survival rate is 98 percent.<sup>2</sup> That is why it is so important to take steps to detect breast cancer in its earliest stages.

<sup>1</sup> American Cancer Society, Cancer Facts & Figures 2007.

<sup>2</sup> American Cancer Society, Breast Cancer Facts & Figures 2005-2006.

## Your best defense

The best way to find breast cancer in its earliest stages is to routinely check your breasts for signs and symptoms of the disease. There are three basic methods:

**Mammograms** are X-ray pictures of the breast. They can find breast cancer in its earliest stages, even before a lump can be felt. All women 40 and older should have a mammogram every year. If you are younger than 40 with either a family history of breast cancer or other concerns talk with your health care provider about when to start getting mammograms and how often to have them.

**Clinical breast exam** is performed by a health care provider who carefully checks your breasts and underarm areas for any lumps or changes that may be present. Many women have a clinical breast exam performed when they get their Pap test. Women should have a clinical breast exam at least every 3 years between the ages of 20 and 39 and every year starting at 40.

**Breast self-exam (BSE)** involves two main steps, looking at and feeling your breasts for any change from normal. If you notice any change in the normal look or feel of your breasts, see your health care provider. All women should perform monthly BSE by age 20. BSE should be done once a month, a few days after your period ends. If you no longer have periods, do BSE on the same day each month. At your next appointment, ask your health care provider to show you the steps for BSE. (For step-by-step BSE instructions, go to [www.komen.org/bse](http://www.komen.org/bse) or call 1-877 GO KOMEN (1-877-465-6636) to request a free BSE card.)

## Are you at risk?

Most women have more than one known risk factor for developing breast cancer, yet will never get the disease. Some risk factors are things that you do not have any control over, while others can be changed by making changes in your lifestyle (see list below). What is the most important risk factor? Simply being a woman. But remember, there is no *one* cause of breast cancer. If you are concerned about your breast cancer risk, discuss your options with your doctor.

### Known and probable risk factors:

- being a woman
- getting older
- having a mutation in the BRCA1 or BRCA2 breast cancer genes
- having a previous biopsy showing hyperplasia or carcinoma in situ
- having a family history of breast cancer or ovarian cancer
- having high breast density on a mammogram
- having a personal history of breast or ovarian cancer
- starting menopause after age 55
- never having children
- having your first child after age 35
- being overweight after menopause or gaining weight as an adult
- having more than one drink of alcohol per day
- currently or recently using combined estrogen and progestin hormone replacement therapy (HRT)
- having your first period before age 12

### Related fact sheets in this series:

- Breast Cancer Risk Factors
- Racial & Ethnic Differences
- Healthy Living
- Breast Cancer in Men

## What affects your risk of getting breast cancer?

The causes of breast cancer are not fully known. However, health and medical researchers have identified a number of factors that increase a woman's chances of getting breast cancer. These are called risk factors. Risk factors are not necessarily causes of breast cancer, but are associated with an increased chance of getting breast cancer. Importantly, some women have many risk factors but never get breast cancer, and some women have few or no risk factors but do get the disease. Being a woman is the number one risk factor for breast cancer. For this reason, it is important to have routine mammograms, get regular clinical breast exams and perform monthly breast self-exams (BSE) in order to detect any problems early. See your health care provider to discuss your personal risk and your breast health needs.

There are some risk factors you can control, and others you cannot. Remember, even if you do not have any of these risk factors, you can still develop breast cancer.

## Factors that may increase your risk of breast cancer

- getting older — the older you get, the greater your risk of breast cancer
- having an inherited mutation in the BRCA1 or BRCA2 breast cancer genes
- having a previous biopsy showing hyperplasia or carcinoma in situ
- a family history of breast cancer
- having high breast density on a mammogram
- being exposed to large amounts of radiation, such as having very frequent spine X-rays during scoliosis treatment or treatment for Hodgkin's disease at a young age
- a personal history of breast or ovarian cancer
- starting menopause after age 55
- never having children
- having your first child after age 35
- high bone density
- being overweight after menopause or gaining weight as an adult
- having more than one drink of alcohol per day
- currently or recently using combined estrogen and progesterone hormone replacement therapy (HRT)
- being younger than 12 at the time of your first period
- current or recent use of birth control pills

### Age: a major factor

A woman's chance of getting breast cancer increases with age. Your chance by your current age is:

age 20	1 in 1,985
age 30	1 in 229
age 40	1 in 68
age 50	1 in 37
age 60	1 in 26
age 70	1 in 24
ever	1 in 8

Source: American Cancer Society Surveillance Research, 2005.

## Get the facts on breast cancer

Because the causes and cure of breast cancer are not yet fully known, many people have misconceptions about the disease. Here is what we know for sure:

### Myth Fact

*I'm only 35. Breast cancer happens only in older women.*

While the risk of breast cancer increases with age, all women are at risk for getting breast cancer.

*Women with a family history of breast cancer are the ones who typically get breast cancer.*

Actually, most women who get breast cancer have no family history of the disease. However, a woman whose mother, sister or daughter had breast cancer has an increased risk.

*If I don't have a mutated BRCA1 or BRCA2 gene, I won't get breast cancer.*

Just because you do not have a mutated BRCA1 or BRCA2 gene, you can still get breast cancer. About 90 to 95 percent of women who get breast cancer actually do not have an inherited form of breast cancer, or a mutated BRCA1 or BRCA2 gene.<sup>1</sup>

*Women with more than one risk factor are the ones who typically get breast cancer.*

A majority of women diagnosed with breast cancer have no known risk factors outside of their gender. All women are at risk.

*You can prevent breast cancer.*

Because the cause of breast cancer is not yet fully known, there is no way to absolutely prevent it, although the antiestrogen drug tamoxifen can help reduce the risk. If you develop breast cancer, early detection and treatment are the keys to surviving.

*If I had a mammogram every year, I would be exposed to too much radiation, and that would cause cancer.*

The small level of radiation from mammograms is believed to be safe, with the benefits outweighing the risks.<sup>2</sup>

*Breastfeeding can increase my risk of breast cancer.*

Breastfeeding may decrease a woman's risk of getting premenopausal breast cancer.

*For more information about risk factors go to [www.komen.org/riskmatrix](http://www.komen.org/riskmatrix)*

#### Related fact sheets in this series:

- Genetics & Breast Cancer
- How Hormones Affect Breast Cancer
- Breast Cancer Detection

1 American Cancer Society, Breast Cancer Facts & Figures 2005-2006.

2 American College of Radiology,  
[www.radiologyinfo.org/content/mammogram.htm/](http://www.radiologyinfo.org/content/mammogram.htm/).



## Breast cancer screening methods

**Mammogram** — A mammogram is an X-ray picture of the breast. It is done with a special X-ray machine designed just for this purpose. A mammogram can find many cancers before they can be felt. Find your age on the chart below to see which screening methods you should use and how often.

**Clinical breast exam** — A breast exam by a health care provider should be part of your regular medical checkup. If it is not, ask for it. A clinical breast exam includes a visual examination and carefully feeling the entire breast and underarm area. If you are 40 or older, schedule your mammogram close to the time of your clinical breast exam.

**Breast self-exam (BSE)** — Learn the normal look and feel of your breasts, and check for changes every month just as your period is ending. If you no longer have periods, do BSE the same day each month. Many women have a pattern of lumpiness in their breasts, which is normal. But if you feel any change or a new lump in your breasts or underarms, ask your doctor to examine the area. (For step-by-step BSE instructions, go to [www.komen.org/bse](http://www.komen.org/bse).)

Women under age 40 with either a family history of breast cancer or other concerns about their personal risk should talk with their health care provider about when to start getting mammograms and how often to have them.

Age 20-39	Frequency	Age 40 and older	Frequency
clinical breast exam	at least every three years	mammogram	once a year
breast self-exam	once a month	clinical breast exam	once a year
		breast self-exam	once a month

## Now is the best time

Believe it or not, the best time to check for breast cancer is when your breasts feel fine. If you can find cancer early, there is a much better chance for survival. Three basic screening methods are used to look for breast cancer: mammograms, clinical breast exams and breast self-exams. Mammography is the best screening method widely available today for finding breast cancer early. However, it is not perfect. Many breast lumps found by these methods turn out not to be cancer, and sometimes a real cancer is missed. But if you do *all* the methods regularly (based on your age — see below), a problem missed one time may be caught the next. Or one method might find a problem that another does not.

Remember, even if you feel healthy now, just being a woman and getting older puts you at risk for breast cancer. Getting checked regularly can put your mind at ease. And finding cancer early could save your life.

## Questions to ask

Talk with your health care provider about your breast health needs. If you have not had any of the screening methods before, ask which ones are right for you.

Here are some questions you might want to ask:

1. Do I need a mammogram? If not, why not?
2. Where can I go to get a mammogram?
3. What if I cannot afford a mammogram?
4. Is there any reason I should have a mammogram more often than usual?
5. What is the best way to do a breast self-exam?
6. How often do I need a clinical breast exam?
7. What is my personal risk for getting breast cancer?
8. Should I consider additional tests or treatments related to my risk?

## Resources

You can receive information about mammograms and clinical breast exams by contacting the organizations listed on this page. You may also go to [www.komen.org/bse](http://www.komen.org/bse) for step-by-step BSE instructions.

Susan G. Komen for the Cure  
1-877 GO KOMEN  
[www.komen.org](http://www.komen.org)

American Cancer Society  
1-800-ACS-2345  
[www.cancer.org](http://www.cancer.org)

National Cancer Institute's Cancer Information Service  
1-800-4 CANCER  
[www.cancer.gov](http://www.cancer.gov)

## Trouble signs that should not be ignored

Although doctors are specially trained to find breast lumps or other changes and a mammogram can find even smaller changes, many breast lumps are found by women themselves at home. A woman who knows the look and feel of her own breasts may notice a new lump or a change between doctor visits.

When you do your breast self-exam every month, look and feel for the following signs of possible problems in your breast or underarm area. If you notice any of them, make an appointment to show them to your health care provider right away.

- lumps, hard knot or thickening in any part of the breast
- unusual swelling, warmth, redness or darkening that does not go away
- change in the size or shape of your breast
- an itchy, scaly sore or rash on the nipple
- dimpling or puckering of the skin of your breast
- pulling in of the nipple or other parts of the breast
- nipple discharge that starts suddenly
- pain in one spot that does not vary with your monthly cycle

### Related fact sheets in this series:

- Breast Cancer Facts
- Mammography
- When You Discover a Lump
- Benign Breast Changes

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The above list of resources is only a suggested resource and is not a complete listing of breast health and breast cancer materials or information. The information contained herein is not meant to be used for self-diagnosis or to replace the services of a medical professional. Komen for the Cure does not endorse, recommend or make any warranties or representations regarding the accuracy, completeness, timeliness, quality or non-infringement of any of the materials, products or information provided by the organizations referenced herein.

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# Inflammatory Breast Cancer

## What is inflammatory breast cancer?

Inflammatory breast cancer (IBC) is the most aggressive form of breast cancer. It is called inflammatory breast cancer because its main symptoms are swelling and redness of the breast. It is a less common form of invasive ductal cancer. Unlike other forms of breast cancer, IBC often lacks a distinct lump or tumor. Instead, it grows in nests or sheets that spread through the breast. IBC is not usually found by mammograms or ultrasounds unless there is a defined lump. If no lump is present, it can be hard to diagnose. Because IBC cells spread easily to other parts of the body, it requires prompt diagnosis and treatment.

## Who is at risk?

IBC accounts for about one to five percent of all breast cancer cases in the United States. The average age at diagnosis of IBC in the U.S. is younger for both white and African American women.<sup>1</sup>

- It is slightly more common in African American women. As many as ten percent of new breast cancer cases in African American women are IBC, compared to six percent of breast cancer cases in Caucasians and five percent in women of other races.
- It is more common in younger women than other forms of breast cancer. It has been seen in women who are pregnant and in women who are breastfeeding.
- Like other forms of breast cancer, it has been seen in men.

<sup>1</sup> Merajver SD, Sabel MS. Inflammatory breast cancer in Harris JR, Lippman M, Morrow M and Osborne C. Diseases of the breast Philad Lippincott Williams & Wilkins, 2004.

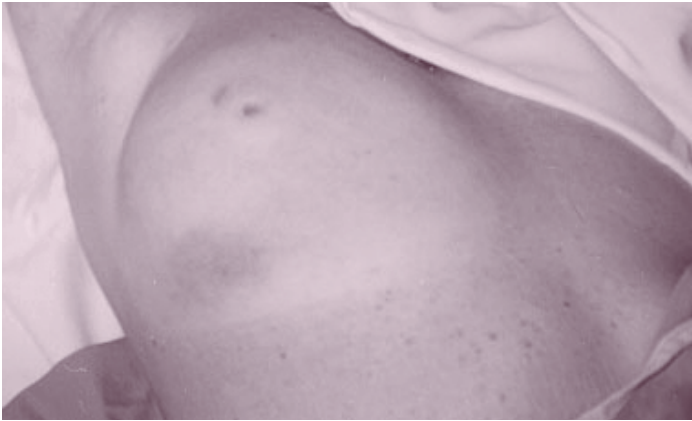
## Symptoms of inflammatory breast cancer

There are many symptoms of inflammatory breast cancer. It is important to see your doctor if you have any of these symptoms:

- one breast becomes much larger than the other one (often sudden)
- warmth and swelling in the breast (often sudden)
- redness or pinkness that may look like an infection
- itching or pain in the breast that won't go away
- dimpling of the skin that may look like the skin of an orange (called peau d' orange)
- ridges or thickened areas of skin
- nipple discharge
- nipple retraction or flattening
- change in the color of the areola (the dark skin around the nipple)
- a bruise that does not go away
- swollen lymph nodes on the neck or under the arm
- a lump (although often there is no lump)



*Enlarged right breast with nipple retraction. Peau d' orange on underside of breast not visible in the photo above is shown in the next photo.*



Photos courtesy the Inflammatory Breast Cancer Research Foundation

*Peau d'orange on underside of breast, not visible when standing. The small irregular red spot at the 11 o'clock position in this photo is the scar remaining from a skin biopsy, not a symptom of inflammatory breast cancer.*

The symptoms of IBC are not always the same. It is often misdiagnosed as a breast infection. Any of these symptoms may be a sign of either IBC or a benign breast infection (not cancer). If the symptoms last longer than a week after starting antibiotics, insist that your doctor do a biopsy to see if cancer cells are present. If you do not feel that your doctor listens to your concerns, get a second opinion.

## Treatment for inflammatory breast cancer

Treatment for inflammatory breast cancer often starts with several rounds of a systemic treatment like chemotherapy, hormone therapy or both. These treatments affect the whole body. They are used to kill or control any cancer cells that might have spread to other parts of the body. Then local treatments, such as radiation therapy and surgery, are used to target the remaining cancer cells in the breast and under the arm. Sometimes systemic treatments are used again after the local treatments. Systemic treatments used at follow-up may include chemotherapy, hormone therapy and biological therapy.

If you have been diagnosed with inflammatory breast cancer, know that there is hope. Advances in the treatment of breast cancer have improved the 5-year survival rates of women with IBC. Recent studies have shown as much as a 50 percent survival rate after 5 years and a 35 percent survival rate after 10 years. Relapses after 10 years are rare and new research is ongoing. Staying positive is vital to your quality of life. Ask your doctor about sources of help and support in your area.

## Resources

### Organizations

Susan G. Komen for the Cure  
1-877 GO KOMEN  
[www.komen.org](http://www.komen.org)

American Cancer Society  
1-800-ACS-2345  
[www.cancer.org](http://www.cancer.org)

IBC Research Foundation  
1-877-STOP-IBC  
[www.ibcresearch.org](http://www.ibcresearch.org)

National Cancer Institute  
1-800-4 CANCER  
[www.cancer.gov](http://www.cancer.gov)

### Internet

IBC Support  
[www.ibcsupport.org](http://www.ibcsupport.org)

#### Related fact sheets in this series:

- Biopsy
- What is Breast Cancer
- Types of Breast Cancer
- Treatment Choices — An Overview