



Ask the Experts About LGBT Health

BREAST CANCER

Breast Cancer Screenings at Fenway

What Is Breast Cancer?

Breast cancer is a malignant (cancerous) tumor that starts from cells in breast tissue.

How Common Is Breast Cancer?

Second to skin cancer, breast cancer is the most common cancer in American women, and second to lung cancer, breast cancer is the cancer most likely to cause death. Fortunately, with improvements in screening and treatment, many women are living longer lives after a diagnosis of breast cancer.

How Do I Know If I Am At Risk For Developing Breast Cancer?

Breast cancer is 100 times more common in women than men. All women are at risk: across a lifetime, 1 in 8 women will develop the disease.

There is not yet enough research to accurately determine the risk of breast cancer in transgender people. Until more is known, we suggest screening based on physical structure and what is known about the risks of taking estrogen (people with breasts and people taking estrogen for at least 5 years should follow the screening recommendations for women outlined below).

Do Some Women Have A Higher Risk Than Others?

Some women do have a higher risk than other women. Other than gender, risk factors for developing breast cancer include:

- Increasing age (the older you are, the higher the risk).
- A family history of breast cancer.
- A known genetic susceptibility to breast cancer.
- A history of radiation treatment to the chest wall.
- A history of breast biopsies.
- Never having given birth.
- Having children after age 30.
- Beginning menstruation before age 12.
- Undergoing menopause after age 55.
- Heavy alcohol consumption.
- Obesity.

Is There Anything I Can Do To Reduce My Risk?

Although many breast cancer risk factors (e.g. age, family history) cannot be changed, we recommend that you follow a healthy diet and exercise program and avoid heavy alcohol consumption.

The National Cancer Institute has developed a Breast Cancer Risk Assessment Tool (see: <http://www.cancer.gov/bcrisktool/>) to help identify women who have a very high risk for developing breast cancer, since these women may benefit from taking medicines to prevent breast cancer. However, this tool does not apply to every woman, so it is important to talk with your health provider about your individual risk.

For some women who have a very high risk because of family or genetic history, additional prevention strategies, such as surgery to remove the breasts, may also be considered.

What Is Breast Cancer Screening? What Should I Be Doing About It?

The purpose of screening is to find breast cancer early, when the growth of abnormal cells is small and the cancer easier to treat.

A number of healthcare agencies have issued breast cancer screening guidelines, but their recommendations are not always consistent. This is because none of our currently available tests are perfect.

Breast Self-Exam (BSE) involves checking your own breast tissue for lumps, changes in size or shape, or anything out of the ordinary in the breast tissue or underarm area. Studies do not show better outcomes when women do BSE regularly. In addition, doing BSE can make some women feel more anxious about breast cancer, since it is common to find lumpy areas that are not cancerous, but then need a workup to prove they are not cancerous (so-called "false-positives"). That said, many women do find their own breast cancers themselves. Whether or not to do BSE is therefore a personal decision that each woman must make for herself. BSE is not intended to take the place of other breast cancer screenings. If at any time you notice a change in your breasts, please tell your health provider immediately. Abnormalities large enough to be found by BSE in younger women often turn out to be benign lumps such as cysts and can be easily diagnosed by ultrasound.

Clinical Breast Exam (CBE) is an examination by a trained health provider who uses their hands to feel for lumps or other changes.

Mammograms are x-rays of breast tissue that show changes that may be too small for a person or their health care provider to feel in a breast exam. They are rarely recommended for women under 40. Recommendations for how frequently mammograms should be done over 40 have changed and should be discussed between the woman and her physician.

Magnetic Resonance Imaging (MRI) screening uses magnets and radio waves (not x-rays) to create a cross-sectional, detailed image of the breasts. They are usually reserved for special high risk situations such as women with genetic mutations or family histories which increase the likelihood of breast cancer significantly.

Currently, there is no "one size fits all" breast cancer screening strategy. Please talk to your health care provider to determine the best screening program (which test, what age to start, how often to do the test(s), what age to stop) for your individual circumstance.

For more information please visit:

- The American Cancer Society www.cancer.org/breastcancer
- The U.S. Centers for Disease Control and Prevention www.cdc.gov/cancer/breast/