

Breast Pain



This factsheet gives information on breast pain in women. It explains the different types and causes of breast pain and how it can be diagnosed and treated. Remember that breast pain alone is rarely a symptom of breast cancer. For more information, call the **National Cancer Helpline** on **1800 200 700** or visit **www.cancer.ie**.

What is breast pain?

Breast pain is a very common type of discomfort among women. It is also known as mastalgia. It is more common in younger women who are still having their periods. Many women have breast pain for a few days before their period, but for others it may last up to 2 weeks. If your breast pain is severe it can affect your everyday activities, work and relationships. It can also cause a lot of anxiety and many women worry that they have breast cancer. But breast pain alone is rarely a symptom of breast cancer.

What are the types of breast pain?

The two main types of breast pain are cyclical and non-cyclical. Cyclical means the pain is related to your menstrual cycle (period). Cyclical breast pain is very common – most women will experience this type of pain at some point in their lives. Non-cyclical breast pain is not related to your menstrual cycle and is caused by something else. A third type of breast pain is chest wall pain. This is not true breast pain because the pain comes from the muscles, ribs or other tissues beneath your breasts.

Breast pain alone is rarely a symptom of breast cancer.

National Cancer Helpline **1800 200 700**

What is cyclical breast pain?

Cyclical breast pain:

- Is related to the menstrual cycle.
- Is described as full, heavy or aching.
- Can often occur with breast swelling or lumpiness.
- Usually affects both your breasts, particularly the upper, outer areas, and can spread to your underarm.
- Is most painful during the 1-2 weeks before your period, but eases afterwards.
- Usually affects younger women, (less than 50 years) and women coming into the menopause (peri-menopausal women).

What causes cyclical breast pain?

Cyclical breast pain is linked to changing levels of female hormones, which occur throughout the month. Your breast tissue responds to these hormonal changes and becomes more sensitive. This can cause breast pain. Cyclical breast pain usually settles down once your bleed starts. This type of pain usually stops permanently when your periods have finished for at least a year, which is called the menopause. However, women taking hormone replacement therapy (HRT) after their menopause can also have breast pain. This is because HRT adds some of the hormones back into your body.

What is non-cyclical breast pain?

Non-cyclical breast pain:

- Is not related to the menstrual cycle.
- Is sometimes described as tight, burning or sore.
- Is constant, or comes and goes.
- Usually affects one breast, in one area, but may spread across your breast.
- Can affect anyone.

What causes non-cyclical breast pain?

It is often unclear what is causing non-cyclical breast pain as there can be many possible causes:

- **Size and makeup of your breast**
Non-cyclical breast pain can be caused by an injury to your breast or previous breast surgery. If you have large breasts, you may have breast pain related mainly to the size and weight of your breasts. You can often get neck, shoulder and back pain with this type of breast discomfort.
- **Fatty acid imbalance**
Fatty acids are found in many vegetable and animal oils. An imbalance of fatty acids within your cells can make your breast tissue more sensitive to hormones, which can cause pain. For this reason, evening primrose oil is often used as a remedy for breast pain. It contains gamma-linolenic acid (GLA), a type of fatty acid.
- **Medications**
Some hormone medications may be linked to breast pain. These include infertility treatments and oral contraceptives (the Pill). Breast tenderness is also a possible side-effect of oestrogen and progesterone hormone replacement therapy (HRT). This may explain why some women still have breast pain after the menopause. Breast pain can also be a side-effect of some antidepressants.
- **Other non-cyclical causes**
An infection in your breast (mastitis) due to breastfeeding, fibrocystic breast disease, and liver disease due to alcoholism can all result in breast pain. Stress may also be related to breast pain. It could also be related to a benign (non-cancerous) condition of your breast. In rare cases breast pain can be a symptom of breast cancer. If you have breast pain which is constant and in one part of your breast or armpit, you should go to your GP.

Keep a pain chart of your breast pain. This will help you find out if your pain is cyclical or non-cyclical. There is one at the back of this factsheet.

When is it normal to have breast pain?

Hints & tips

- During pregnancy, especially in the first 3 months (first trimester).
- During lactation and breastfeeding.
- In puberty, in both girls and boys.
- Coming up to your period (cyclical pain).

What is chest wall pain?

Chest wall pain comes from outside your breast – from the chest wall, muscles, joints or heart – but it can feel like the pain is in your breast. For example, the pain could be from pulling a muscle in your chest. Chest wall pain can also be caused by a condition called costochondritis, which makes your chest wall inflamed and sore. The pain comes from the cartilage that connects your ribs to your breastbone and not from your breast itself, but sometimes it can be hard to tell the difference. Your breast can be painful and tender when touched.

When should I see my doctor?

Breast pain alone is rarely a symptom of breast cancer, but if you are worried it's always best to talk to your doctor (GP). It's important to make an appointment to see your doctor (GP) if:

- Your breast pain persists daily for more than a couple of weeks.
- Your breast pain seems to be getting worse over time.
- You have pain in one particular area of your breast.
- Your breast pain interferes with your daily activities.

If you are still having periods, make an appointment for about 3 to 5 days after your period, if possible. Do make a list of all medications, vitamins and supplements that you take regularly. You can also write down any questions you would like to ask your doctor.

How is breast pain diagnosed?

Your doctor may start by asking you some of the following questions:

- How long have you had the breast pain?
- How severe is your pain on a scale of 1 to 10?
- Does the pain occur in one or both breasts?
- Do you have other symptoms, such as a breast lump, thickened area, or nipple discharge?
- Do you have skin changes, such as redness or a rash?

What tests might I need?

• Breast exam

Your doctor will check your breasts and the lymph nodes (glands) in your lower neck and underarm. He or she may also listen to your heart and lungs and check your chest wall and tummy (abdomen). This is to make sure that the pain comes from your breast and is not related to some other condition. If your medical history and exam seem normal, you may not need any more tests.

Sometimes your doctor may send you for further tests to help diagnose the cause of your breast pain. It is rare for these further tests to be carried out for breast pain.

• Mammogram

This is an X-ray exam of your breast tissue. It is not usually done for breast pain, unless your doctor finds a breast lump or unusual thickening.

• Ultrasound scan

An ultrasound scan uses sound waves to look at your breast tissue.

• Breast biopsy

If any suspicious breast lumps or thickened or unusual areas are seen on the X-rays, a biopsy may be needed to help your doctor to make a diagnosis. A needle is used to take a sample of the breast tissue from the area. This is then sent to the laboratory and examined.

Managing breast pain



Here are some hints and tips to help you manage breast pain:

Lifestyle measures

- Stop smoking. Smoking can inflame your breasts and increase breast pain.
- Put hot or cold compresses on your breasts while relaxing.
- Wear a firm support bra, fitted by a professional if possible. Do wear a sports bra during exercise and while sleeping, especially if your breasts are feeling sensitive.
- Limit or avoid caffeine in your diet. Caffeine is found in tea, coffee and soft drinks such as cola.
- Reduce the fat in your diet. This may help your breast pain by changing the fatty acid balance. Also, cut down on your salt intake and eat more fresh fruit and vegetables.

Complementary therapies

- Supplements such as evening primrose oil work by changing the balance of fatty acids in your body, which may reduce breast pain. Speak to your doctor about what dose may be helpful for you and stop taking it if there is no improvement in your breast pain after 3 months.
- Relaxation/visualisation can involve an audiotape or a therapist guiding you to find peaceful and healing pictures in your mind. This may help relieve your breast pain by reducing stress.
- Yoga uses stretching exercises and poses to calm and balance your body and reduce stress. Some find it helpful in reducing breast pain.
- Acupuncture uses very thin needles, which are placed at particular points in your body. This is said to rebalance energy flow and in turn relieve pain.

How is breast pain treated?

Most breast pain does not need to be treated with medication. Often, self-care remedies or small lifestyle changes can help relieve breast pain, such as wearing a bra with extra support, taking a dietary supplement or using relaxation techniques. In some cases your doctor may advise you to take medication or change your contraceptive.

Treatments and drugs

Breast pain often clears up within a few months with the help of the above lifestyle measures. If it does not, you may need medication prescribed by your doctor. For example:

- You may be prescribed an oral contraceptive (the Pill) or the dose might be adjusted if you are already taking one.
- If you are taking hormone replacement therapy (HRT) after the menopause, the dose may need to be reduced or the drug stopped completely.
- Painkillers, such as paracetamol, or anti-inflammatory drugs can help. Discuss with your doctor which one may be best for you.
- If your breast pain is very severe, your doctor may prescribe other medication.





Emotional support

If your breast pain is very severe, it can affect your everyday activities, work and relationships. Do seek help if your breast pain is severe and causing ongoing problems in your life. Talking to your partner or a close friend may help. You can also discuss it with your GP who may recommend further help if needed.

Breast pain chart

This chart will help you and your family doctor (GP) or nurse see when your breast pain occurs. Record the amount of breast pain you experience each day by shading in each box as illustrated below the chart. For example, if you get severe breast pain on the fifth day of the month, then shade in completely the square under the number 5. You should note the day your period starts each month with the letter P.

Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31

Severe  Mild  None  P  First day of period

Useful organisations and websites

HSE Health Promotion

Website: www.healthpromotion.ie

Irish Nutrition & Dietetic Institute

Tel: 01 280 4839

Email: info@indi.ie

Website: www.indi.ie

Daffodil Centres

The Irish Cancer Society's Daffodil Centres provide cancer information, support and advice in local hospitals. Daffodil Centres aim to provide a wide range of information locally to anyone affected by or concerned about cancer.

For details of your nearest Daffodil Centre call the National Cancer Helpline on 1800 200 700 or visit www.cancer.ie.



For more information on breast pain or for confidential advice from our cancer nurse specialists, call the **National Cancer Helpline** on **Freefone**

1800 200 700

(Monday–Thursday, 9am–7pm, Friday 9am–5pm)
or email helpline@irishcancer.ie

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