Breast Lump Assessment

You've noticed a breast lump?

Breast lumps may differ in size and feel hard or spongy and some may cause pain.¹ It is understandable that you would be worried about breast cancer. However, most breast lumps are benign (not cancerous). It is still important to have any breast lump assessed by a doctor.

It is helpful to become familiar with how your breasts usually look and feel so it's easier to detect any breast or nipple changes and report to your doctor.¹

When to consult a doctor?

- New breast lump or thickening
- Change in breast size or shape
- · Breast pain that doesn't resolve
- · Skin changes on your breast such as dimpling or redness
- Newly inverted nipple
- Spontaneous nipple discharge²

What does the assessment involve?

Determining whether the lump is cancerous involves the "triple assessment": clinical examination, radiological examination (imaging) and pathological examination (biopsy).

Clinical examination

Evaluation of a breast lump typically begins with a clinical breast examination. Your doctor will generally do the following:

- Ask about symptoms related to your breast lump
- Ask about risk factors related to breast cancer or benign breast conditions
- Examine your breasts and lymph nodes (immune system glands) in your armpits
- · Check for nipple problems such as inversion or discharge

Imaging

You will require imaging to further assess the breast lump. The most common imaging tests include a mammogram and an ultrasound.

- **A mammogram** is a specialised breast X-ray that can identify changes in your breast.
- A breast ultrasound uses sound waves to create images
 of the inside of your breast. Ultrasounds are useful in
 identifying whether the lump is solid or filled with fluid.

 A breast MRI uses magnets and radio waves to create detailed pictures of the interior of your breast. Breast MRIs are usually reserved for certain situations, such as when there is an inconsistency between your clinical examination and mammogram/ultrasound

Biopsy

To complete your "triple assessment", your doctor may arrange a biopsy if imaging tests do not clearly show that the lump is benign. A biopsy is when a tissue sample is removed and examined under a microscope. There are different types of biopsies depending on the type of breast lump:

- A fine-needle aspiration biopsy (FNA) is when cells and fluid are removed with a thin needle attached to a syringe.
- A core needle biopsy is a larger needle with a special tip that samples the breast tissue.
- A **stereotactic biopsy** is when the mammography (special breast X-ray) is used to help the biopsy target the suspicious area.
- A **surgical biopsy** is when your surgeon makes a small cut in the skin and breast tissue to remove part or all of the lump.

After the biopsy, the tissue is analysed in a lab.

What happens after the results have arrived?

Your doctor will explain the results with you. Although this whole process seems daunting, your doctor will guide you step by step. It may be helpful to write down all the questions you have prior to your doctor's appointment.

In general, if the breast lump is benign, you may still require monitoring to check whether the lump has changed, grown or disappeared. If the breast lump is cancerous, your doctor will guide you through the treatment plan. The type and stage of breast cancer will determine your treatment options. For more information on Dr Ruben Cohen-Hallaleh:

For more imormation on Dr Ruben Conen-Hallalen

www.sydneybreast.com.au

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