



Curve Lurve

While most of us women are quite conscious of our bodies, breast health is one aspect of our overall wellbeing that we often forget. But just because breasts don't demand much from us (let's face it, they mostly just kind of sit there) it doesn't mean they don't need some TLC. And the fact is, regular monitoring is the most effective way we can keep our breasts, and ourselves, healthy.

All you need to know about breast awareness

Why do I need to be breast aware?

Breast cancer affects women of all ages, so it's important that all women check their breasts regularly to pick up any changes - from your early 20s and onwards. Yep, that means you. Breast awareness is important because if you know how your breasts normally look and feel, you're more likely to pick up any changes if any develop.

How often do I need to check my breasts?

As well as seeing your doctor for a clinical breast examination, you should start checking them yourself from time to time when you become breast aware in your early 20s. The aim? To get to know how your breasts look and feel, so any change is easy to see or feel.

How can I be breast aware?

There's no right or wrong way to check your breasts. The first step is just to try to get used to looking at them and feeling them. Look at your breasts in the mirror to see if there are any changes, and get to know the way they feel.

You can check your breasts standing up, in the shower or lying down. If you have a partner, they can help keep an eye out for any changes in your breasts too (and they probably will be more than happy to do so!).

Look at the shape and appearance of your breasts and nipples in the mirror with your hands by your sides. Raise your arms above your head and look for a change in the shape of your breasts, and feel for lumps in your nipple area and in the armpit. Feel the breast tissue, from the collarbone to below the bra-line, and under the armpit.

Need some more inspiration? Check out our Curve Lurve Breast Awareness video online.

What to look out for?

- A general change in size or shape.
- A lump or lumpiness, or even a change in appearance of your breast (such as dimpling redness and appearance of veins).
- An area that feels different to the rest of your breast.
- Any pain in your breast that is not usually present.
- Any change in the shape or appearance of your nipple, such as your nipple being pulled in or development of a rash.
- A discharge from your nipple, particularly if it's bloody.
- A swelling in your armpit or around your collarbone.

When's the best time?

A good time to do a self-exam is after the last day of your menstrual cycle. This is because during your period, your breasts can feel a little tender or lumpy - so it's best to give them a chance to settle down before you examine them.

If you do notice a lump just before or during your period, it is generally OK to wait until after your period to see if it goes away. If it hasn't disappeared then, see your GP right away to be properly checked out.

And, if you don't have periods, the best idea is just to self-check regularly when your breasts are soft and not tender (such as on the first day of the month).

What if I do find a change in my breast?

First of all, don't panic. Most changes in the breast are not related to breast cancer, so chances are you'll be just fine. However if you do find a lump, or notice a change in your breast, it's important to visit your GP immediately. Remember, the sooner you see your GP after finding a change in your breast, the better. Your

A bit about mammograms

Mammograms have two purposes;

1. As a screening tool to detect breast cancer. Screening is recommended for women over the age of 50 (women over 40 are also welcome to have screening mammograms) every two years.
2. As breast imaging for diagnostic purposes. So if you find something unusual in your breast, a mammogram may be required to find out more information about what's going on.

Screening mammography, especially for women aged 50-69 years, is currently the best method available for detecting breast cancer early.

Regular screening mammograms are not recommended for women under 40 years of age. The tissue of young women's breasts tends to be denser than that of older women. This is due to the influence of hormones. On a mammogram, dense breast tissue shows up as a white area. Breast cancers also appear white and are therefore more difficult to find on younger women's mammograms. Finding a tumour in a mammogram of a woman under the age of 40 is like "looking for a snowball in a blizzard." However if you are sent for investigative screening is likely that you will receive a mammogram and an ultra sound even if you are under 40.

Breast Cancer and Risk Factors

What is breast cancer?

Breast cancer is the most common cancer diagnosed in Australian women. Breast cancer starts when a single cell in the breast begins to divide and grow in an abnormal way. There are several types of breast cancer, and cancers can be found at different stages of development and grow at different rates. This means that people can be given different treatments, depending on what will work best for them.

Luckily, advances in breast cancer means there are better treatments available and more and more people are now living long and full lives after breast cancer.

Risk Factors and Risk Reduction

While there's been a lot of research into breast cancer, the cause is still unknown. There doesn't seem to be one single cause, but rather a combination of lots of different things. We do know some things that increase the risk of getting breast cancer, but we still don't know why some people get it and some don't.

Here's what we know about what does (and what doesn't) increase the risk of getting breast cancer. Oh, and one thing to remember - Most changes in the breast are hormonal, and not related to breast cancer.

...being a woman?

Yes. Being a woman is the strongest risk factor for breast cancer. Women are 100 times more likely to develop breast cancer than men. Not all women get breast cancer, nor do all men avoid breast cancer.

...growing older?

Yes. The risk of breast cancer increases with age. About 24 per cent of new breast cancer cases diagnosed in 2006 were in women younger than 50 years; 51 per cent in women aged 50-69; and 25 per cent in women aged 70 and over. About six per cent of all new breast cancer diagnoses are in women younger than 40.

...smoking?

Yes. Smoking is the biggest single cause of cancer in the world and recent evidence suggests it does appear to affect the risk of breast cancer. Smoking is definitely not a good idea - it's known to increase the risk not only of lung cancer but also of cancer of the bladder, cervix, kidney, voice box (larynx), mouth, food pipe (oesophagus), pancreas, stomach and some types of leukaemia. Smoking has also been proven to increase the risk of heart disease and some respiratory conditions. Reducing or eliminating exposure to active and passive smoke benefits your health in all sorts of ways (blood pressure, circulation, lung function, reproduction and lower risk for a number of other diseases including breast cancer).

A bit about mammograms

...using deodorant?

No. A hoax email first linked antiperspirants and deodorants to breast cancer. It claimed that deodorants stop the body from sweating out toxins and that these toxins build up in the lymph glands under the armpit and cause breast cancer.

Our bodies have several ways of getting rid of toxins, and while sweating is one of them, this doesn't involve the lymph glands. There has been research done on this subject, which did not find any convincing evidence that antiperspirants or deodorants cause breast cancer.

...wearing an underwire bra?

No. It's been suggested that underwire bras constrict the body's lymph glands, leading to breast cancer. This is not true. A poorly fitting bra might cause discomfort and pain, but it won't increase the risk of developing breast cancer.

...bumping or bruising the breast?

No. An injury such as falling, bumping or being hit in the chest may cause bruising and swelling to the breast (and it may hurt!). But it will not increase the risk of breast cancer.

...having my nipple pierced?

No. Nipple piercing will not increase the risk of breast cancer. However if you're considering one, it's worth noting nipple piercings may increase the risk of infection (in both boys and girls). Plus for girls, it may damage the milk ducts, which can make breastfeeding difficult later in life.

...drinking alcohol?

Yes. Alcohol increases your risk of breast cancer, so keep your alcohol consumption down. Your risk increases with each standard drink per day. This includes beer, wine and spirits.

...being physically active?

No. Active women of all ages are at reduced risk of breast cancer compared to women who do not exercise. And the more exercise you do, the bigger the benefits. Aim to do 30 minutes, 3-4 times a week, and make sure you include weight-bearing exercises in your routine.

...taking the contraceptive pill?

This one's a grey area. A small number of studies have suggested that taking the oral contraceptive pill for a long time may slightly increase the risk of developing breast cancer later in life. However, after stopping taking the pill the risk goes back to normal after 10 years. Breast cancer is rare in younger women, for whom taking the pill is still an effective way of preventing pregnancy and managing skin conditions. The majority of women who take it will not develop breast cancer. Taking the pill has also been shown to reduce the risk of ovarian and endometrial cancer. So the jury's out, though if you have any concerns, talk to your GP.

...eating a healthy diet?

No. Eating a healthy diet isn't a factor that puts you at risk of breast cancer - in fact, it can actually reduce the risk of getting cancer later in life. It can also protect against heart disease, high blood pressure, stroke and diabetes. Also those who don't eat a healthy diet and are very overweight (obese) do have an increased risk of getting breast cancer as they get older.

So what is a healthy diet? Well, Recommended Daily Intake (RDI) includes:

5-11 servings of cereals (including breads, pasta, noodles, preferably wholegrain),

4-8 servings of vegetables

2-4 servings of fruit

3 servings of dairy

1 serving of lean meat, fish, poultry, nuts and legumes

1 serving of extra foods

Eating a healthy diet is important for overall health and wellbeing, too. While our genes play an important part in whether we are likely to develop certain conditions, our lifestyle can also have an impact on our risk. For example, having a grandparent and parent with high blood pressure and eating a diet high in fats could increase the risk of developing high blood pressure. So eating a healthy diet is important to improve overall health and wellbeing.

http://www.nhmrc.gov.au/_files_nhmrc/file/publications/synopses/n30_pamphlet.pdf

... sleeping in a bra, especially one with an underwire?

No. There is no scientific proof to show that sleeping in a bra can give someone breast cancer.

...topless sun baking?

No. Sunbaking topless will not cause breast cancer. There is actual evidence that keeping vitamin D levels topped up via sun exposure may prevent breast cancer. But the bottom line is this - the skin on the breast is very delicate. That means it's more likely to get burnt than other areas of the body, and as we all know, too much exposure to ultraviolet (UV) rays can cause skin cancer. That goes for exposure to real sunlight and the light from solariums.

So, while there are benefits of sun exposure, be careful when spending time in the sun. Use a sunscreen with a sun protection factor (SPF) of at least 30, be careful never to burn and cover up with a hat, shirt and sunglasses.

...strong family history?

Yes. A woman's risk of breast cancer is two or more times greater if she has a first degree relative (mother, sister or daughter) who developed the disease before the age of 50. The younger the relative was when she developed breast cancer, the greater the risk.

That said, many women tend to over-emphasise family history as a risk factor. The fact is eight out of nine women who develop breast cancer do not have a first degree relative who's been similarly affected.

...breast implants and breast reductions?

No. Surgery to reduce, enlarge or lift your breasts does not increase your risk of breast cancer. However, do keep in mind that changing the size or shape of your breasts through surgery is a serious decision that requires careful thought. Breast implants may also make mammography technically more difficult.

...Using hormone replacement therapy (HRT)?

Yes. There is a small risk between HRT and breast cancer but it applies to long-term users (over 3 years) of HRT. The risk decreases when HRT is ceased and is back to baseline 5 years after HRT is ceased.

...Starting menstruation earlier or starting menopause later?

Yes. There is a correlation between early menstruation (younger than 12) and late menopause (over 55) and a small to medium increased risk in developing breast cancer. This is due to extended time exposed to oestrogen and that this increased risk suggests that hormones are involved in breast cancer risk.

...Giving birth?

In fact, women who have given birth before 30 have a slightly lower risk of breast cancer than those who have not carried a pregnancy to term. Women who have given birth to at least one child at any age also have a slightly lower risk of breast cancer than women who have never had kids - and those who have had multiple births have an even lower risk.

...Breastfeeding?

No. Breastfeeding for at least 12 months or longer is generally regarded as being associated with a modest decrease in the risk of developing breast cancer



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