

BREAST SORENESS

Breast soreness is very common. It affects most women at some time in their lives.

The degree of soreness, and where and how it is felt, differs for each woman. It might be sharp, stabbing, dull, throbbing or aching. It might be felt in all or part of the breasts, one breast or both. It can also affect the armpit area.

For many women, the soreness is barely noticeable. For others, the pain is so great that it affects their everyday lives. Usually the condition goes away in time.

The medical name for breast soreness is mastalgia.

There are many reasons for breast soreness.

Hormonal breast soreness

(often called cyclical mastalgia)

Women who are having periods or taking Hormone Replacement Therapy (HRT) often have breast soreness. This happens when the tissue in their breasts responds to hormones.

The most common hormonal breast soreness comes from an increase in the level of oestrogen before a period. This causes milk ducts and glands to swell, trapping fluid in the breasts. Many women have tenderness or pain in the lead-up to a period, and sometimes right through it.

Some women experience regular breast soreness at other stages of their menstrual cycles.

The hormones that cause breast soreness might also cause cyclical swelling or lumpiness. They can also affect the size, shape or sensitivity of cysts and fibroadenomas.

Hormonal breast soreness usually stops when a woman's periods stop, although it might continue if she is taking HRT.

Hormonal breast soreness is normal, but it is not usually very severe. Pain that lasts more than a week around the time of a period, or pain that stops a woman from everyday activities is considered to be not normal.

Other breast soreness

Other common reasons for soreness in one or both breasts are:

- » wearing a bra that doesn't fit or isn't supportive enough
- » stress
- » consuming a lot of caffeine (for example, in coffee, tea, cola, chocolate and energy drinks like Guarana)
- » weight gain (this can cause breasts to get heavier)
- » injury to the breast (this might include scarring from surgery)
- » taking certain medicines, especially the contraceptive pill or medicines that reduce cholesterol
- » breast cysts or fibroadenomas
- » physical activity that puts strain on the chest, shoulder or pectoral muscles (for example, heavy lifting)
- » conditions affecting the chest wall, ribs or muscles that lie underneath the breasts

Breast soreness and cancer

For many women, the biggest concern about breast soreness is that it is a sign of cancer.

Breast soreness is not often associated with cancer.

Your doctor has found no sign of cancer in your breasts.

Diagnosing breast soreness

To try to find a cause for breast soreness, your doctor will have considered:

- » whether there is any obvious cause for the pain (for example, a scar or an injury)
- » the history of the pain
- » where, when and how you feel the pain
- » the results of a physical examination and any ultrasounds, mammograms or other tests that were needed
- » whether you are still having periods or taking HRT.

Sometimes, even with all this information, it will still not be possible to tell you what is causing your pain. This doesn't mean that the pain is not real.

Managing breast soreness

Everyone manages the impact of pain differently. The list below contains tips that might help you to relieve breast soreness or discomfort. Most have not been scientifically proven, however some women find them effective.

Tips to reduce breast soreness

These might take a few weeks to work:

- » wearing a supportive, well-fitting bra
- » cutting down on caffeine (coffee, tea, cola, chocolate and energy drinks)
- » taking evening Primrose Oil (but not if you have epilepsy)
- » taking b group vitamins (check with your doctor or pharmacist about dosage)
- » cutting out or cutting down on smoking and/or marijuana use.
- » These might work straight away, but they won't prevent the soreness returning:
- » Applying anti-inflammatory gels or creams to the sore area (ask your doctor or pharmacist for advice)
- » Using a hot pack on your breasts or having a hot bath or shower
- » Using an ice pack on your breasts
- » It is important to talk with your doctor if you are regularly taking medicines for pain relief.

If you are taking prescription medicines, it is also worth discussing with your doctor whether any of these might be causing the soreness.

What happens now?

Your breast soreness does not put you at any increased risk of breast cancer. You should follow the recommendations for screening for breast cancer for women of your age and family history.

All women need to be alert to any changes in their breasts that are not normal for them. If you have any change in your breast that is different to your normal hormonal changes, you should have it checked by your General Practitioner (GP).

Feelings

For many women, breast soreness is upsetting. It can bring up many different feelings and worries. It's understandable to fear cancer. It's also common to find tests stressful and invasive.

Most of the time, women feel relieved to know that breast soreness is a common condition that is not harmful or dangerous. Sometimes, however, women feel anxiety or frustration. It's understandable to feel like this, especially if doctors cannot find a reason for the breast soreness or cannot suggest a way to relieve it. Sometimes women continue to worry about cancer.

Some women find that breast soreness affects how they feel about themselves, their sexuality, relationships or work performance. Living with pain of any kind is difficult. Living with breast pain might be especially hard because people don't always feel comfortable to talk openly about breasts.

If breast soreness is having a negative impact on your life or if you are still worried, it might help to share your feelings with supportive family members or friends. You could also get information or advice from your GP or a Women's Health Nurse at your local community health centre. You are welcome to talk with a specialist or Breast Care Nurse at a Breast Clinic if you feel this would help to put your mind at rest. Talking with a counsellor might also help.

This information sheet is written for women who have been examined by a breast specialist and found to have a benign (non-cancerous condition). It is not intended as a substitute for the advice of a qualified doctor.

Language link

በርስዎ ቋንቋ መረጃ ለማግኘት በድረገጻችን ላይ ይትብኙ للحصول على المعلومات بلغتكم زوروا موقعنا الإلكتروني

用您說的語言瞭解詳情,請瀏覽我們的網站

Για πληροφορίες στη γλώσσα σας επισκεφθείτε την ιστοσελίδα μας अपनी भाषा में जानकारी प्राप्त करने के लिए हमारी वेबसाइट पर जाइए Per informazioni nella vostra lingua visitate il nostro sito web Macluumaad intaas ka badan oo af Somali ah booqo websaytkayaga Kendi dilinizde bilgi almak için web sitemizi ziyaret edin Để biết thông tin bằng ngôn ngữ của quý vị, hãy truy cập trang

www.thewomens.org.au

mạng của chúng tôi

DISCLAIMER The Royal Women's Hospital does not accept any liability to any person for the information or advice (or use of such information or advice) which is provided in this fact sheet or incorporated into it by reference. We provide this information on the understanding that all persons accessing it take responsibility for assessing its relevance and accuracy. Women are encouraged to discuss their health needs with a health practitioner. If you have concerns about your health, you should seek advice from your health care provider or if you require urgent care you should go to the nearest hospital Emergency Department. © The Royal Women's Hospital, November 2003. Reviewed November 2018