

ABOUT INLAND IMAGING

At Inland Imaging, our specialty trained radiologists, nurses, and technologists make sure that you get detailed answers quickly and accurately. Because when it comes to your health, better answers can lead to better outcomes.

SCHEDULING: (509) 455.4455

BREAST IMAGING CENTER LOCATIONS

For a list of our breast imaging center locations, please refer to: www.inlandimaging.com/locations. To find out more, talk with your doctor or call Inland Imaging at 509.363.7799.



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BREAST PAIN

Should I be Worried?

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BREAST PAIN. SHOULD I BE WORRIED?

If you have breast pain, you are not alone. Breast pain, also known as mastalgia, is common and accounts for 45-70% of breast-related health care visits. The good news is that most causes of breast pain are benign (non-cancerous) and usually related to hormonal changes in your body or something as simple as a poor fitting bra. Breast pain varies a lot from person to person and may feel like a dull ache, tenderness, burning sensation, sharp pain or just a sense of uncomfortable fullness. To understand what causes breast pain and what to do about it, it is important to understand a little bit about the different types of breast pain.

Types of Breast Pain

There are two main types of breast pain. The first type is cyclical and changes with hormonal changes in your body. Cyclical breast pain typically involves both breasts, involves either the entire breast or the upper outer portion, and may radiate to the armpit. Most importantly, it varies with your menstrual cycle. Cyclical breast pain is usually worse during the week before you start your period. The pain usually subsides or improves after your period. With cyclic breast pain, it is also common to feel like your breasts are lumpier during the week before your period. Cyclical breast pain is the most common type of breast pain and usually does not require any treatment or medical evaluation.

The second main type of breast pain is noncyclic breast pain. Noncyclic breast pain usually involves only one breast and is not related to your menstrual cycle. It can be constant or intermittent, just not associated with any particular pattern. The cause of noncyclical breast pain is often harder to determine. Just like with cyclical breast pain, most causes of noncyclical breast pain are benign. The most common cause is a poor-fitting bra. Other causes include pregnancy, trauma, muscle strain and prior surgery.

Although breast cancer is usually not painful, when it does cause pain, the pain tends to be noncyclical and usually just in one focal spot. Because of this, noncyclical breast pain may require a little more evaluation to determine the cause.

When Should I Talk to my Doctor?

- You have a lump in the area of pain that does not go away after your period.
- You have redness, swelling or drainage from the area (signs of infection).
- You have nipple discharge.
- Your breast pain is not clearly associated with your menstrual cycle or lasts more than two weeks.
- Your breast pain is just in one spot and does not involve the whole breast.
- Your breast pain keeps getting worse.

Even if you do not fit into any of these categories, if you are worried, it is always a safe bet to talk to your doctor about your symptoms.

What Will my Doctor Do?

Your doctor will probably ask you questions about your breast pain. These may include: How long has it been there? Is the pain associated with any other changes in your lifestyle or body? Have you noticed a lump or any other changes to your breast? How bad is the pain? What does the pain feel like? Do you have any family history of breast cancer?

Your doctor will likely examine your breasts for lumps, skin changes, focal tenderness or nipple discharge. Depending on the exam and your answers to the questions, your doctor may order imaging tests.

What Types of Imaging Will my Doctor Order?

Mammogram

Your doctor may order a mammogram, which is an x-ray of your breast. A technologist will take at least

two x-rays of your breast while your breast is compressed. If you have not had a screening mammogram in over a year, they may take x-rays of your non-painful breast, too. A breast radiologist will look at your x-rays while you wait and determine if you need any additional x-rays or a breast ultrasound.

Breast Ultrasound

If you are younger than 40, lactating or pregnant, your doctor may order an ultrasound of your breast instead of a mammogram. During the breast ultrasound, a technologist or breast radiologist will put ultrasound gel on your breast and scan the area of pain with a hand-held ultrasound probe. The breast radiologist may decide to perform a mammogram as well to evaluate your area of pain.

Either a technologist or a breast radiologist will discuss the results of your imaging with you before you leave and a report will be sent to your doctor.

What Kind of Things Might the Radiologist See?

In 75-88% of women who have imaging for breast pain, the mammogram and/or ultrasound are completely normal. In around 10% of women, the radiologist will find a benign cause for the pain. The most common benign cause of pain is a breast cyst. Breast cysts are sacs of fluid in the breast and many women have them and never know it. They can become painful with changes in your body's hormones or when they increase in size. 1-2% of women may need further evaluation with a breast biopsy because the radiologist sees something on the images and cannot tell exactly what it is. A breast biopsy is an outpatient procedure where a small piece of tissue is removed from your breast to be evaluated under a microscope. Very few women with breast pain have breast cancer and some studies show that your chance of having breast cancer is the same whether you have breast pain or not.

**Source: The Society of Breast Imaging (SBI), September 27, 2019. Dr. Michelle Lee is an Assistant Professor of Radiology at Washington University School of Medicine in St. Louis. Dr. Wendi Owen is an Assistant Professor of Radiology at UK Healthcare.*

What Can I Do to Get Rid of the Pain?

- Wear a properly fitted bra without underwire.
- Wear a sports bra while exercising.
- Some changes in diet have been shown to reduce symptoms of breast pain, such as decreasing your intake of fatty foods and caffeine.
- Some over-the-counter, herbal and prescription medications have been shown to help. Ask your doctor if any are right for you.
- Some women find that ice packs or heating pads help their pain — you can try these to see if one works for you.
- Stress reducing and relaxation techniques may also help alleviate symptoms of breast pain.

The Bottom Line

Breast pain is common and usually not associated with anything bad. Cyclical breast pain comes and goes with your menstrual cycle and is related to hormonal changes in your body. Non-cyclical breast pain has a wide variety of causes and the cause is harder to determine but also usually related to benign processes in the breast. Talk to your doctor about your breast pain if you are worried, particularly, if you have a lump in the area of pain that does not go away after your period, redness, swelling, drainage from the area (signs of infection), nipple discharge, or if your breast pain is not clearly associated with your menstrual cycle, lasts more than two weeks, is just in one spot, keeps getting worse or is affecting your life and limiting what you can do.

Your doctor may order imaging tests to evaluate your breast pain. Although these are usually normal, they may help find a cause for the pain or identify something that needs to be biopsied. There are several treatments for breast pain, but there is not a single one that works for everyone. You should talk to your doctor about which may be right for you.