



Together we will beat cancer

Spot breast cancer early




Take charge

Whether you've heard about it from a friend or family member, seen it in the news, or are just curious: if you want to know more about spotting the signs of breast cancer, this leaflet is for you.

You'll find out what to look out for, tips for telling your doctor if something's not quite right, and some key facts about screening.

When it comes to your health, remember you're in charge.



Cancer is much more common in people over 50, but it can affect anyone of any age. If you do spot something unusual, tell your doctor. In most cases it won't be cancer – but if it is, finding it early can make a real difference.

Listen to your body

It may surprise you to know that when diagnosed at its **earliest stage**, almost everyone with breast cancer survives. Being **breast aware** can be helpful, and it's not just about lumps. It's important to get any unusual changes to your breasts or nipples checked out by your GP, including:

- A change in the size, shape or feel of your breast
- A new lump or thickening in a breast or armpit
- Fluid leaking from a nipple if you aren't pregnant or breastfeeding
- A change in the appearance or position of a nipple
- Any skin changes on a breast or nipple, such as puckering, dimpling, redness or a rash
- Pain in a breast

These are more likely to be signs of other common conditions – but it's still best to get these, or any other unusual changes, checked out.

What is breast awareness?

Being breast aware means knowing what your breasts are normally like, which may make it easier to spot any changes.

There's no right or wrong way of doing this. But it's good to have a look and feel every now and then, so you know what's normal for you. This includes getting used to what your breasts are like at different times of the month. For example, your breasts might feel more tender or lumpy around the time of your period.

Remember, everybody's breasts are different and what's normal for one person might not be normal for someone else.

You know your body best, so if something's unusual for you or won't go away – tell your doctor.

There's no need to check yourself at a set time or in a set way – but if you know what's normal for you, you may be more likely to spot any changes.




Look out for your screening invite

Breast screening is for people who don't have any symptoms. It aims to find breast cancers early, when treatment is more likely to be successful.

If you're aged 50–70 and registered as female with the GP, you'll be sent an invitation in the post. If you aren't invited for screening, but think it might still be relevant for you, speak to your GP or Gender Identity Clinic.

It's your choice whether to attend your breast screening appointment. **And it's important you read the information that comes with your invite**, as breast screening has pros and cons.

Even if you've been screened and no matter your age, tell your doctor if you notice anything unusual.

A circular inset image showing a healthcare professional in a white uniform operating a mammography machine on a patient. The professional is looking at the patient, and the machine's arm is visible. The patient's back is to the camera.

During breast screening, x-rays are taken of your breasts. These x-rays are known as mammograms.

Cut your risk

These proven steps can lower your breast cancer risk. Find more tips at www.cruk.org/health



Keep a healthy weight. Weight has a big impact on cancer risk. It can feel hard, but start by making small changes to your diet and activity that are easier to stick to.



Cut back on booze. The less you drink, the lower the risk. Try having more alcohol-free days each week – it all adds up!



Move more. Being very physically active can help to reduce your risk. Even fitting more steps into your daily routine can help you keep a healthy weight.

What else might affect your risk?



Most breast cancers aren't due to inherited faulty genes. But if close family members have had breast cancer, you may be more likely to get it.



Hormone replacement therapy (HRT) and oral contraceptives (the Pill) both increase breast cancer risk. But they are effective medications – so speak to your doctor to help you decide. The Pill affects the risk of several cancers, but overall it prevents more cases than it causes.

Talk to your doctor

Talking to your doctor isn't always easy. Here are our tips to get the most out of your appointment:



Be honest. Tell the doctor about anything that's not normal for you, even if it doesn't seem that important or you think it might be a bit embarrassing. They've seen and heard it all before.



Be thorough. Mention all your symptoms and don't put it down to 'just getting older', or assume it's part of another health condition. If it's something that's bothering you, then your doctor will want to hear about it.



Stick with it. Don't worry you might be wasting your doctor's time. Even if you've been to see them already, they want to know if your symptoms haven't gone away, or if something still doesn't feel quite right.



Be prepared. Have a think about the changes, and roughly how long you've had them for. Writing down the things you want to say can help. And you can always bring a trusted friend or family member with you for support.

Early diagnosis saves lives

Remember, when breast cancer is spotted early, treatment is more likely to be successful. Thanks to research, treatments are kinder and more effective than ever.



We're online...

Learn more about spotting cancer early, including information about screening across the UK, at cruk.org/spotcancerearly

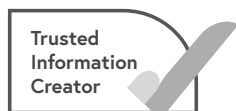


...and on the phone

Our Nurse Helpline is there if you're looking for any information or support. Just call **0808 800 4040**.

To provide any feedback on this leaflet or if you would like to know more about the sources used to create it, call **020 3469 8333** or email publications@cancer.org.uk

And if you have any questions about Cancer Research UK or would like to support us call **0300 123 1022**.



Patient Information Forum

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