

## Breast Cancer during and after Pregnancy

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Breast changes during and after pregnancy are natural phenomena. These changes can either be physiological or pathological.

The physiological changes are the normal changes in the breast that occur during pregnancy and most of the times occur similarly in both breasts. The most common changes are feeling of heaviness in the breast accompanied with soreness or tenderness and darkening around nipples. The other physiological changes may be feeling of lump in the breast. Usually these are benign i.e. non-cancerous (like fluid or milk filled cysts or enlargement of pre-existing fibro adenomas). The changes in breast that occur after delivery are due to shifting paradigm of hormonal balance which is to prepare the mother for breast feeding. The common benign conditions that may develop during lactation may be blocked milk ducts leading to painful breast swelling, cracked or sore nipples.

My concern for writing this piece is missed or delayed diagnosis of breast cancer during pregnancy and lactation. Recently I had a patient who is 30 year old female and breast feeding her baby for one and a half years. She had a feeling of irregular lump for last 10 months in her left breast for which she was repeatedly given antibiotics and analgesics by the general practitioner. She was referred to specialists only when she developed new swelling in the left axilla (i.e. axillary lymphadenopathy). She is now diagnosed with breast cancer having bone metastasis. All the time her symptom was dismissed as owing to one of the lactational changes of the breast. If she was referred earlier to the cancer centre she might have been diagnosed in a curative stage.

Missed cancer is the most dreaded pathological change that may happen in breast during pregnancy or lactation. Breast cancer in pregnancy is a rare condition. Only 1 in 3000 pregnant women gets to diagnose with the breast cancer [1]. But the presentation is usually late. Its diagnosis is delayed because the common symptoms of breast cancer are mistakenly thought of as due to physiological changes of pregnancy or lactation in breast.

The hormonal changes make it difficult for the pregnant lady to self-examine and for the physician/primary health care giver to examine the breasts due to heaviness, lumpiness and tenderness. Pregnant lady complaining of persistent asymmetrical hardening, unusual skin discoloration or enlarging breast lump should be taken up for further investigation. Ultrasound of breast remains the simple and cheap tool that may be used to screen for suspicious nature of a lump in the breast. Young women may have genetic mutations that predispose them at the risk of developing cancer. A recent analysis by Moffitt Cancer Center has stated the frequency of BRCA mutation to be 5% and 12.4% in young non-Hispanic white and black women, respectively [2]. As BRCA is being increasingly tested, so pregnant female with family history of BRCA mutated cancer may also undergo ultrasound breast as a screening tool.

Timely diagnosis is the key to CURE.

### References

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