

Fibroadenomas

Information for women who have a diagnosed fibroadenoma

fibroadenomas

Your specialist has found that you have a fibroadenoma in your breast (pronounced fi-bro-ad-e-no-ma). Fibroadenomas are not cancerous.

Fibroadenomas range in size. They can be smaller than a marble or as large as a golfball. Most fibroadenomas appear suddenly and then stay the same size. Some shrink or continue to grow. Fibroadenomas are affected by hormones just like any other breast tissue. They often change size over the menstrual cycle or in pregnancy.

Fibroadenomas are usually rubbery and firm, but they can be difficult to feel properly. If you push on the lump, you will probably find that it moves away from beneath your fingers.

This is why some people call a fibroadenoma a 'breast mouse'. Fibroadenomas do not move far within the breast.

Usually, fibroadenomas are not painful. However, they can be uncomfortable or very sensitive to touch. Often women find that their fibroadenoma gets tender in the days before their period. Pushing or prodding at the lump can also make it tender.

Researchers do not know what causes fibroadenomas. We do know that they are quite

common, especially in women aged between 15 and 25. Up to one in six (15%) of women have a fibroadenoma at some time in their life.

FIBROADENOMAS AND CANCER

For many women, the biggest concern about a fibroadenoma is that it is, or will become, cancer.

Fibroadenomas are not cancer.

They are no more likely to become cancerous than any other part of the breast.

Diagnosing a fibroadenoma

To diagnose your breast lump as a fibroadenoma, the specialist will have taken into account:

- **The results of a physical examination and ultrasound or mammogram**
- **The history, shape and size of the lump**
- **Your age**
- **Whether there is a history of breast or ovarian cancer in your family**

The specialist might also have taken some cells from the lump for testing. This is called a biopsy.

Deciding what to do about a fibroadenoma

Most fibroadenomas are left alone and not treated. Many women and their specialists decide that there is no need to remove the lump. It is safe to leave fibroadenomas where they are.

Whilst fibroadenomas are not cancerous, some women find it difficult to feel completely confident that their lump is not cancerous. Some of these women ask to have their fibroadenoma removed to stop them worrying.

Sometimes a woman asks to have a fibroadenoma removed because it is very uncomfortable or painful. However, the scar resulting from surgery might also be uncomfortable or painful, so this decision needs to be considered very carefully.

If the fibroadenoma is continuing to grow, sometimes a specialist will suggest removing it before it gets larger, simply to lessen the amount of scarring.

Surgical removal of a fibroadenoma

The extent of the operation to remove a fibroadenoma depends on its size. Mostly the operation is performed with a general anaesthetic. Usually you can go home the same day.

There will be a scar where the fibroadenoma has been removed.

What happens now?

Your fibroadenoma 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).

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.

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feelings

For most women, having an unusual breast change 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 their breast change is due to a common condition that is not harmful or dangerous. Sometimes, however, they keep worrying about getting cancer. Some women also find that their breast change affects how they feel about themselves, their sexuality or relationships.

If a fibroadenoma is having a negative impact on your life, 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 again with a specialist or Breast Care Nurse at the Breast Clinic if you feel this would help to put your mind at rest.

If your fibroadenoma is painful, ask your specialist or GP for our information sheet on Breast Soreness.

YOU AND YOUR GENERAL PRACTITIONER (GP)

If you have recently seen a specialist at a Breast Clinic, it is a good idea to visit your GP afterwards. That way, you can make sure you fully understand any information, tests or diagnosis that the specialist gave you.

It's also a good chance to talk about what you are thinking and feeling about your breast change or diagnosis.

Your GP can also help you if you would like a second opinion about your breast change.

If you don't have a regular GP, ask friends, family or your local community health centre for some suggestions.

It's good to have a regular GP who you know and trust.