

Fibrocystic Changes

Other Terms Used to Describe Fibrocystic Changes:

- Chronic cystic mastitis
- Cystic mastitis
- Fibrocystic disease
- Mammary dysplasia

Definition of Terms:

- **Chronic** — Lasting a long period of time
- **Cystic** — Pertaining to a closed sac with a definite wall that contains fluid
- **Dysplasia** — Abnormal development of tissue
- **Hormones** — Chemicals made by the body that affect the function of cells; the most common female hormones are estrogen, progesterone and prolactin
- **Fibrocystic** — Cystic formations containing either fluid or solid material that cause a change in the breast that can be felt or seen on X-ray
- **Mammary** — Referring to the breast
- **Mastitis** — Inflammation (pain, warmth, redness) of the breast
- **Microscopic** — Too small to be seen by the eye; only visible with a microscope

Fibrocystic changes is a term used by healthcare providers to describe a number of non-cancerous conditions occurring in the breast. Changes are found in the breasts as lumps or masses that occur and change with the menstrual cycle and may be accompanied by pain and tenderness. Previously, the term “fibrocystic disease” was used to describe the process and was falsely implicated as a risk factor for cancer. At least 50 percent of all women have irregular feeling, lumpy breasts. Furthermore, studies have shown that as many as 90 percent of women have microscopic fibrocystic changes.

These changes are a normal response to the hormonal stimulation of the breast tissue and do **not** represent a “disease” process. Thus, the term “fibrocystic disease” is not an accurate description of the changes. The process is now more appropriately called fibrocystic changes and does not indicate an increased risk for cancer. The term is commonly applied to any change that is not cancerous. Because there is no exact clinical definition, ask your healthcare provider precisely what types of changes have been found in your breast tissue if you receive the diagnosis of fibrocystic changes.

Breast Lumpiness

The breasts are very complex glandular organs that consist of 15 to 20 lobes that radiate from the nipples. These lobes further divide into 20 to 40 lobules that contain 10 to 100 alveoli where the milk or fluid is produced in the breast. This whole glandular structure is changing constantly because of the stimulation of estrogen and progesterone hormones on the breast tissue. When the

stimulation begins after the menstrual period; the breasts respond by beginning to fill with fluid. Each breast will produce and store 15 to 30 ccs (3 to 6 teaspoons) of fluid in the ducts during the month. This causes a feeling of lumpiness, especially right before a menstrual period. The hormonal influence also causes extra layers of cells to be produced in the ducts. The combination of the two causes an increase in the size of the breasts and possibly tenderness or pain.

Some drugs routinely prescribed by a healthcare provider can cause some women to experience lumpiness, fullness and tenderness in the breast tissues. These changes feel very similar to those produced by hormonal changes in the body. The changes are not harmful, but the causes may confuse you or your healthcare provider. Examples are listed below.

Blood Pressure Medications:

- Aldactone® (a diuretic)
- Aldomet®

Heart Medications:

- Digoxin®
- Lanoxin®(digitalis)
- Inderal®
- Lopressor®
- Tenormin®
- Viskin®

Antianxiety Medications:

- Ativan®
- Valium®
- Xanax®

SSRI Medications:

- Paxil®
- Prozac®
- Zoloft®
- Celexa®
- Luvox®
- Lexapro®

Antinausea Medications:

- Compazine®

Gastrointestinal Medications:

- Tagamet®

Checking Your Breasts

When you check your breasts before your menstrual period, they will feel different than at the end of your period. Therefore, it is very important to examine your breasts on a regular basis at the same time of the month; the best time is at the end of the cycle. The increase in cells and fluid in the breast will often cause them to feel lumpy. If you find a lump in a breast, feel the opposite breast in the same area for a similar change. If one is found, you probably have discovered a normal hormonal change. It is safe to wait and go through a menstrual period and re-check the same area. If the area is smaller or softer at your second self-exam, then it has been stimulated by hormonal changes that are normal. If the lump has not become softer or smaller, a healthcare provider will need to evaluate the area. Every woman has a normal pattern of lumpiness and bumpiness in her breast tissue. Only through regular self-exams can a woman get to know this pattern of lumpiness in her own breasts. A healthcare provider examining the breasts once a year will not be able to learn the individual patterns of breast lumpiness.

Breast Pain

The term “mastalgia” (“mast” is Latin for breast, and “algia” for pain) is used by many healthcare providers. Most women experience increased tenderness in their breasts before their period. Again, this is from fluid accumulation in the breasts. Some women experience greater pain prior to the beginning of their period. This pain usually decreases at the end of the period. This type of pain is associated with fluid and the stimulation of the breast tissues by the hormones estrogen and progesterone. If pain is not associated with the menstrual cycle or hormonal menopausal medication, consult your healthcare provider.

Some women report less pain when caffeine is decreased or eliminated from their diets. Substances containing caffeine include coffee, tea, colas and chocolate. Other women are not affected by eliminating caffeine from their diets. Reducing sodium intake has also been effective in reducing pain for some women. Some healthcare providers have found that their patients benefit from using vitamin E and other vitamin supplements to reduce pain. Herbal supplements such as Ginseng, Dong Quai, kola nut and Ma Huang (ephedra) may actually increase breast tenderness, pain and/or discharge and promote fibrocystic changes. Check your supplements to see if they contain any of these herbs if you are having problems. Contact your healthcare provider for recommendations.

Breast Discharge

Some women experience an opaque to milky color discharge from their breasts right before the start of their monthly cycle or at the beginning of their menstrual period. This type of discharge is not unusual. It may also be noticed after sexual stimulation or when women begin taking estrogen supplements. The medications previously listed have also caused some women to experience breast discharge. An occasional small amount of discharge from both breasts is not abnormal. However, if this discharge continues throughout the month, comes from only one breast or has any evidence of blood, contact your healthcare provider.

Additional Information:
