Benign Breast Conditions
Normal and abnormal (atypia) breast cells

Benign breast conditions are very common and can be found by mammogram, on ultrasound or by feeling a lump in the breast. Of women told that they need a breast biopsy, about 80% will be found to have benign breast conditions that are not life threatening.

Benign breast conditions are divided into three groups that describe how the breast cells are multiplying (proliferating) and if they are becoming abnormal (atypia).

1. **Non-proliferative breast conditions** do not increase risk of breast cancer. These include:

   - **Fibrocystic breasts**: These breasts feel lumpy and are sensitive to hormonal change during a woman’s menstrual cycle. A firm, tender area or clusters of small fluid-filled cysts may be felt about a week before menstruation begins. These areas usually resolve somewhat after the menstrual period ends.

   - **Simple Cyst**: A cyst is a firm, smooth, round or oval, moveable breast lump that is a fluid filled sac. A cyst may be painful. It can be drained by aspiration with a small needle.

   - **Fat Necrosis**: When breast tissue has been injured, the blood supply to the fat cells may be disrupted causing them to die. A hard lump forms at the area of injury.

2. **Proliferative breast conditions without atypia** may raise the risk for breast cancer very slightly, up to 1 ½ to 2 times the usual risk. These conditions include:

   - **Fibroadenoma**: A common benign, solid lump made of an overgrowth of breast and connective tissue. Fibroadenomas are common in young women and African-American women. Fibroadenomas do not increase the risk of cancer.

   - **Ductal Hyperplasia**: An overgrowth of normal cells within the milk duct or lobule of the breast.

   - **Sclerosing Adenosis**: A thickening and hardening of the lobules in the breast.

   - **Papilloma**: This is a small, warty growth in a milk duct, usually located behind the nipple. Often it causes a sticky, bloody discharge from the nipple.

   - **Papillomatosis**: Many papilloma are growing in the milk ducts.
3. **Proliferative breast conditions with atypia** are conditions where cells are growing quickly and they do not look like normal cells anymore. There is an increased risk of breast cancer of about 3 ½ to 5 times the normal risk. This may occur in a milk duct (*Atypical Ductal Hyperplasia*) or a lobule (*Atypical Lobular Hyperplasia*). Surgical excision is recommended.

### Algorithm for Benign Breast Conditions

**Palpable (mass can be felt)**
- Screening Mammogram
- Abnormal Result
  - Diagnostic Mammogram and Ultrasound
  - Abnormal Result
  - Image Guided Core Biopsy
- Benign Breast Condition

**Non-Palpable**
- Screening Mammogram
- Abnormal Result
- Image Guided Core Biopsy
- Benign Breast Condition

### Clinical Follow-up after a Benign Breast Biopsy:

**Follow-up of benign breast conditions without atypia:**
- 6 months after biopsy and then again in 8 to 12 months

**Follow-up of benign breast conditions with atypia:**
- Every 6 months for 2 years
- Consider screening with mammogram and breast MRI
- Consider risk reduction with medications