Breast cancer can start in any part of one or both breasts. For females in the US, breast cancer is the most common cancer (after skin cancer) and the second-leading cause of cancer death (after lung cancer).

**Risk Factors**

**Risk factors for breast cancer that you cannot change include:**

**Being born female** – This is the main risk factor for breast cancer. Males can also get breast cancer, but is it much more common in females.

**Getting older** – As a person gets older, their risk of breast cancer goes up. Most breast cancers are found in females age 55 or older.

**Personal or family history** – Someone who has had breast cancer in the past or has a close blood relative who has had breast cancer (mother, father, sister, brother, daughter) has a higher risk of getting it. Having more than one close blood relative increases the risk even more. It’s important to know that most people with breast cancer don’t have a close blood relative with the disease.

**Inheriting gene changes** – Certain gene changes (most commonly in BRCA 1 and BRCA 2 genes) can create a higher risk for breast cancer.

**Starting menstruation early or having late menopause** – There may be an increase in risk due to longer exposure to the hormones estrogen and progesterone.

**Having dense breast tissue** – People whose breasts appear dense on mammograms have a higher risk of breast cancer. Dense breast tissue can also make it harder to see cancers on mammograms.

**Having radiation to the chest** – Females who were treated with radiation therapy to the chest, especially as a teen or young adult, have a much higher risk for breast cancer.

**Some benign breast conditions** – Having certain non-cancerous breast conditions can increase the risk of getting breast cancer.

**Lifestyle-related risk factors for breast cancer:**

- Drinking alcohol
- Being overweight or obese, especially after menopause
- Not being physically active
- Getting hormone therapy after menopause with estrogen and progesterone therapy
- Never having children or having a first child after age 30
- Using certain types of birth control

**Prevention**

There is no sure way to prevent breast cancer, and some risk factors can’t be changed, such as being born female, age, personal or family history of the disease, and inherited gene changes. But there are things a person can do that can help lower the risk for breast cancer. Avoiding or limiting alcohol, getting regular physical activity, and getting to and staying at a healthy weight might help lower risk.
Sometimes, women at higher risk are referred to a genetic counselor to decide if they should have genetic testing, or they might choose to take medications or have procedures that help reduce their risk.

**Screening and Early Detection**
The earlier breast cancer is found, the better the chances for successful treatment. The American Cancer Society recommends the following for finding breast cancer early in women at average risk:

- **Women ages 40 to 44** should have the choice to start yearly breast cancer screening with a mammogram (x-ray of the breast).
- **Women ages 45 to 54** should get a mammogram every year.
- **Women 55 and older** can switch to a mammogram every 2 years, or can continue yearly screening. Screening should continue as long as a woman is in good health and is expected to live at least 10 more years.
- **All women** should understand what to expect when getting a mammogram for breast cancer screening – what the test can and cannot do. They should also be familiar with how their breasts normally look and feel and report any changes to a health care provider.
- **Screening MRI along with screening mammograms** are recommended for certain women at high risk of breast cancer. Talk to a health care provider for more information.

**Signs and Symptoms**
The most common sign of breast cancer is a new lump or mass. While most lumps or masses are not cancer, it is important to have a health care provider check them. Other signs of breast cancer can include a swelling of all or part of a breast (even if no lump is felt); skin dimpling (sometimes looking like an orange peel); nipple pain or retraction (turning inward); nipple discharge (other than breast milk); nipple or breast skin that is red, dry, flaking, or thickened; or swollen lymph nodes under the arm or near the collar bone. It is important to have any breast change checked by a health care provider.

**Treatment**
Treatment for breast cancer depends on the type and stage of the cancer, results of special testing that might be done on the tumor, as well as the person’s age, other health problems, and personal choices. People who are diagnosed with breast cancer should discuss all treatment options and make informed treatment decisions together with their doctors.

**Living With Breast Cancer**
From the time a person is diagnosed with breast cancer, their quality of life is affected in some way. Physical, social, psychological, spiritual, and financial issues can come up at any time during and after treatment.

Some types of breast cancer can be serious. Palliative care is focused on helping to improve the quality of life and dealing with issues that people living with a serious illness might have. People with breast cancer may benefit from having palliative care at any time from the point of diagnosis, throughout treatment, and beyond.

Good communication between a person with cancer and the health care team is important and involves:

- Asking and answering questions
- Working together to set care goals
- Making shared decisions
- Managing side effects and other issues
- Making sure to schedule follow-up tests and care

Visit cancer.org/cancer/breast-cancer to learn more.