

Breast Health Messages for Clients: Job-aid for Service Providers

(ANMs/staff nurses/doctors of primary health care and in-charge of community health care, facilities)

Messages for Breast Health Awareness

Do you
know?

Breast cancer is one of the major causes of cancer among women in India

Remember four key information:

1. Know your risks:

A risk factor is anything that increases the risk of developing breast cancer.

- **Gender:** Female at higher risk than male
- **Age:** Increases as women get older
- **Family history:** If history of breast or ovary or colon cancer in first-degree relative
- **Personal history:**
 - History of combined hormone therapy for ≥ 5 years after menopause
 - Past history of breast cancer in any breast or biopsy report indicating increased risk of cancer
 - History of radiation exposure in chest area
- **Menstrual and Reproductive history:**
 - Menses starting before 12 years of age
 - Menopause not attained till 55 years of age
 - First child after age of 30 or having no children at all
 - Who did not breast feed at all or fed for less time
- **Life style related causes:**
 - Obesity after menopause
 - Less physical activity
 - Intake of alcohol
- **Genetics:** Inherited conditions (BRCA1 and BRCA2)
 - Accounts for 5-10% of all breast

2. Get yourself checked at health facility:

- Age 30 years or above: Every woman should go for clinical breast examination (CBE) once in every five years
- Women with risk factors, warning signs or concerns: Contact the health centre immediately

3. Know what is normal for you (warning signs): See a doctor/nurse if you see any of these breast changes:

- Lump or thickening inside the breast or underarm area
- Swelling, warmth, redness or darkening of the breast
- Change in size, shape of the breast
- Dimpling or puckering of skin
- Itchy, scaly sore or rash on the nipple
- Pulling in of nipple or other parts of breast
- Nipple discharge that starts suddenly
- New pain in one spot that does not go away

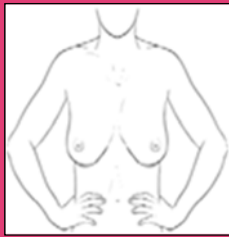
Every woman of more than 30 years should go for clinical breast examination (CBE) once in every five years

4. Make healthy lifestyle choices:

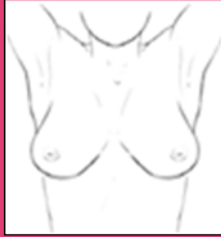
- Breastfeeding for more than 6 months after delivery
- Regular exercise and avoid being overweight
- Avoid alcohol

Steps of Clinical Breast Examination (CBE)

1. Inspection: Three ways of examination in sitting position



a) With hands pressed against hips



b) With arms raised above head



c) Leaning forward

Warning signs



Lump in the breast



Thickening in the breast



Swelling, redness or darkening of breast



Change in size and shape of breasts



Dimpling or puckering of skin



Retracted nipple



Scaly rash on nipple



Peau d' orange



Serous or blood stained discharge from nipple



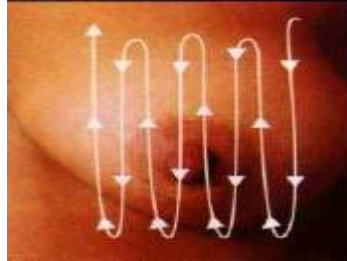
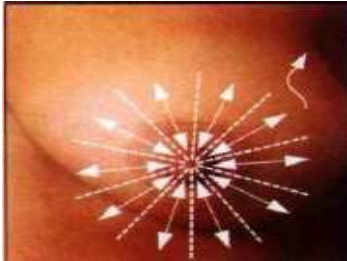
A new pain in one spot that does not go away

2. Palpation

Feel for the following changes in two different positions (lying down and sitting)

a) Palpation in lying down position

Breast palpation can be done by any of the following methods



1. 'Dial of a clock' method

2. Vertical method

3. Spiral method

Steps of palpation of breast by 'Dial of a clock' method:

- The palpation is begun at 12 o'clock at the middle of the collarbone from periphery to the nipple by doing small circles of about 3 cm in diameter.
- Make circular movements with pad of 3 middle fingers 3 times with increasing pressure without lifting the fingers.
- Make the next circle half overlapping with the previous circle.
- Feeling inner half of breast is done in supine position (12 o'clock to 6 o'clock in right breast and 6 o'clock to 12 o'clock in left breast).
- For feeling outer half of breast (6 o'clock to 12 o'clock in right and 12 o'clock to 6 o'clock in left breast) ask the woman to roll over opposite side
- Then examine the central part located behind nipple and areola.
- Next, feel the major milk ducts, which can be done by gently rolling the nipple between the index finger and the thumb at 12-6 o'clock position and at 3-9 o'clock position and look for any thickening, swelling or nipple discharge.
- Examine the opposite breast

b) Palpation in sitting position:

- Check for axillary lymph nodes: Let the woman rest her hand on the examiner's forearm
- For palpating supra-clavicular and infra-clavicular lymph nodes, the examiner should stand behind the woman and examine with both hands to palpate nodes above and below the clavicles respectively.



(Woman resting her hand on the examiner's forearm)

Assessment and referral protocol for women after CBE at primary health care facilities

- Assessing likelihood for breast cancer
- Assess signs and symptoms (History, intensity, duration, progression)
- Identify relevant breast cancer risk factors (age, family history, previous history of breast cancer, chest irradiation)
- Clinical examination of both breasts, axillae, neck and clavicle (above and below)

CBE negative

For women aged 30 years and above:
Repeat CBE once in every 5 years

For women with risk factor or abnormal/suspicious finding identified later:
Immediate

CBE Positive: If any of the following findings:

- Lump or thickening inside the breast or underarm area
- Swelling, warmth, redness or darkening of the breast
- Change in size, shape of the breast
- Dimpling or puckering of skin
- Itchy, scaly sore or rash on the nipple
- Pulling in of nipple or other parts of breast
- Nipple discharge that starts suddenly
- New pain in one spot that does not go away

Referred to CHC/DH/Diagnostic center