

# Monthly BREAST SELF EXAM

## Lie Down

Lie down and place your right arm behind your head. The exam is done while lying down, not standing up. This is because when lying down the breast tissue spreads evenly over the chest wall and is as thin as possible, making it easier to feel all the breast tissue.



Use the finger pads of the 3 middle fingers on your left hand to feel for lumps in the right breast. Use overlapping dime-sized circular motions of the finger pads to feel the breast tissue. Repeat the exam on your left breast, using the finger pads of the right hand.

## In Front of a Mirror

While standing in front of a mirror with your hands pressing firmly down on your hips, look at your breasts for any changes of size, shape, contour, dimpling, redness or scaliness of the nipple or breast skin. (The pressing down on the hips position contracts the chest wall muscles and enhances any breast changes.)



## Standing up

Examine each underarm while sitting up or standing and with your arm only slightly raised so you can easily feel in this area. Raising your arm straight up tightens the tissue in this area and makes it harder to examine.



Use 3 different levels of pressure to feel all the breast tissue. Light pressure is needed to feel the tissue closest to the skin; medium pressure to feel a little deeper; and firm pressure to feel the tissue closest to the chest and ribs. It is normal to feel a firm ridge in the lower curve of each breast, but you should tell your doctor if you feel anything else out of the ordinary. If you're not sure how hard to press, talk with your doctor or nurse. Use each pressure level to feel the breast tissue before moving on to the next spot.

Move around the breast in an up and down pattern starting at an imaginary line drawn straight down your side from the underarm and moving across the breast to the middle of the chest bone (sternum or breastbone). Be sure to check the entire breast area going down until you feel only ribs and up to the neck or collar bone (clavicle).



# Breast Health Awareness

## Triple Negative\*

**Triple Negative breast cancer is shown to disproportionately affect young African American women.**

Triple Negative is used to describe breast cancers (usually invasive ductal carcinomas) whose cells do not have estrogen receptors and progesterone receptors, and do not have an excess of the HER2 protein on their surfaces. Breast cancers with these characteristics tend to occur more often in younger women and in African American women. They also tend to grow and spread more quickly than most other types of breast cancer. Because the tumor cells lack these receptors, neither hormone therapy nor drugs that target HER2 are effective against these cancers (although chemotherapy may be useful if needed). It can also be more highly aggressive in younger African American women (premenopausal).

*\*American Cancer Society*

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**A NATIONAL AFRICAN  
AMERICAN BREAST CANCER  
SURVIVORSHIP ORGANIZATION**

# Facts

## African American Breast Cancer\*\*

Breast cancer is the most common cancer among African American women.

The incidence rate of breast cancer is higher among younger African American (under the age 40) than among white women.

# Survival

- In 2011, an estimated 26,840 new cases of breast cancer and 6,040 deaths are expected to occur among African American women.
- African American women's five-year survival rate of breast cancer is 78%, compared to white women's of 90%.
- African American women have the lowest cause-specific survival rate of any racial or ethnic group, indicating that they have the greatest probability of dying of breast cancer.
- African American women are more likely to be diagnosed with larger tumors and more advanced stages of breast cancer despite a lower incidence rate.
- The risk of breast cancer for all women increases with age.

\*\*American Cancer Society,  
*Cancer Facts and Figures 2010-2011*

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# Risk Factors

- Age
- Hyperplasia
- Certain benign breast conditions
- Recent oral contraceptive use
- Using post-menopausal hormone therapy
- Personal history of breast cancer
- Family history of breast cancer-genetics
- High breast tissue density
- A long lifetime exposure to estrogen
- Not having children, or having a first child after 30
- Radiation exposure
- Being overweight
- Lack of exercise
- Drinking alcohol

# Signs & Symptoms

- Breast cancer lumps vary and may be hard or soft and have rounded or uneven edges
- Swelling of part of the breast
- Skin irritation or dimpling
- Nipple pain or the nipple turning inward
- Redness or scaliness of the nipple or breast skin
- Nipple discharge other than breast milk
- A lump in the underarm area

# Guidelines For Early Detection

## MAMMOGRAM

Women 40 years and older should have a screening mammogram every year. If your mother or sister has had breast cancer, you may need to get a mammogram earlier and more frequently.

## CLINICAL BREAST EXAM

Women between 20 and 39 years old should have a clinical breast exam by a healthcare professional at least every three years. Women ages 40 and older should have a clinical breast exam every year.

## MONTHLY BREAST SELF-EXAM (BSE)

Women 20 years and older should do a monthly breast self-exam.

## ULTRASOUND

An ultrasound is used to determine if a lump is a solid mass or a fluid-filled cyst. Clinicians use ultrasound to help determine if a lump is normal or abnormal.

## BREAST MAGNETIC RESONANCE IMAGING (MRI)

Magnetic Resonance Imaging (MRI), uses magnetic fields instead of x-rays to create a picture. An MRI produces clearer images of your breast to help detect abnormalities.

