

CANCER FACTS

Breast Cancer

Breast cancer is the abnormal growth of cells lining the breast ducts or lobules (the glands that make milk).

Queensland^{1,2}

- Breast cancer is the most common cancer diagnosed in women³.
- 3572 Queenslanders were diagnosed with breast cancer in 2017 (the most recent statistics available), of which 3533 were females and 39 were males.
- Of the 586 people who died as a result of the disease in 2017, 583 were women and 3 were men.
- On average, women diagnosed with breast cancer were 92 per cent as likely to live for another five years compared to the general population.
- The approximate lifetime risk of a Queensland woman to be diagnosed with breast cancer before the age of 85 is one in seven.
- The approximate lifetime risk for a Queensland woman to die of breast cancer before the age of 85 is one in 40.

Trends in Queensland²

- Between 1998 and 2017, breast cancer diagnosis rates significantly increased by 0.4 per cent per year. This followed an increase of 2.2 per cent per year from 1982-1997.
- Breast cancer death rates have decreased by 1.8 per cent per year between 1993 and 2017. Prior to this, the rates were stable between 1982 and 1992.

Australia⁴

- Breast cancer is the most common cancer diagnosed in women in Australia³ and is the second most common cause of cancer deaths in Australian women, behind only lung cancer.
- In 2016, 17,354 women were diagnosed with breast cancer across Australia.
- There were 2999 Australian women who died from breast cancer in 2018.
- Breast cancer accounted for 28 per cent of all new cancers diagnosed in Australian women in 2016 and 15 per cent of all cancer deaths among females in 2018.

Symptoms^{5,6}

Some people may have no symptoms when the cancer is found during a mammogram.

If you do have symptoms, these may include:

- a lump, lumpiness or thickening, especially if it is only one breast
- a change in the size or shape of the breast
- a change to the nipple, such as a change in shape, crusting, sores or ulcers, redness, a clear bloody discharge, or a nipple that turns in (inverted) when it used to stick out
- a change in the skin of the breast, such as dimpling or indentation, a rash, a scaly appearance, unusual redness or other colour changes
- swelling or discomfort in the armpit
- ongoing, unusual pain that is not related to your normal monthly menstrual cycle, remains after your period and occurs in only one breast.

Risk factors⁶

- While men can be diagnosed with breast cancer, it is approximately 200 times more common in women.
- The risk for developing breast cancer increases with age. In Queensland, around three-quarters of women diagnosed are over the age of 50².
- Nine out of 10 women who develop breast cancer have no other risk factors.
- The risk increases for women who have a family history of breast cancer, but hereditary breast cancer accounts for less than 5 per cent of all breast cancers diagnosed.
- Women who have already had breast cancer have an increased risk of developing a second breast cancer.

Breast cancer risk factors for women

- Personal factors – older age and dense breast tissue.
- Lifestyle factors – being overweight or gaining weight after menopause, drinking alcohol every day and not being physically active.

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Risk factors continued

- Medical factors – using menopause hormone therapy (MHT) that contains both oestrogen and progestogen, taking the pill for a long time (small increase), taking diethylstilboestrol (DES) during pregnancy, having radiation therapy to the chest for Hodgkin lymphoma, having atypical ductal hyperplasia or proliferative disease without atypia and previous diagnosis of LCIS or DCIS.
- Reproductive factors - starting first period younger than 12, being older than 30 at the birth of first child, not giving birth, not having breastfed, going through menopause after 55.
- Family history factors - a family history of breast cancer and/or a particular type of ovarian cancer in first degree relatives (e.g. mother, sister) on the same side of the family, especially if diagnosed at a young age.

Breast cancer risk factors for men

- Personal factors – older age.
- Medical factors - a rare genetic syndrome called Klinefelter syndrome. Males with this syndrome have three sex chromosomes (XXY) instead of the usual two (XY).
- Family history factors - a family history, with several first-degree relatives (male or female) who have had BRCA2 breast cancer, a relative diagnosed with breast cancer under the age of 40, or several relatives diagnosed with ovarian, colon or prostate cancer.

Reducing cancer risk

Early detection

Cancer Council Queensland has three recommendations for women for the early detection of breast cancer⁶:

1. Women aged 50-74 should have a mammogram every two years through BreastScreen Australia. Women aged 40-49 and 75 years and older should talk to their GP about whether they should participate in breast cancer screening. Screening mammograms are not effective for women under 40.
2. Women should become 'breast aware' by familiarising themselves with the normal look and feel of their breasts.
3. Women should see a doctor immediately if they notice any unusual breast changes. Most changes are not due to breast cancer, however, it is important to have them checked straight away.

Changes to everyday behaviours

Cancer Council Queensland recommends that to reduce your overall cancer risk, you quit smoking, maintain a healthy body weight, eat a healthy diet, be physically active, stay SunSmart, limit alcohol, participate in cancer screening programs (if eligible) and report unusual changes to your body to your doctor immediately.

1. Queensland Cancer Register, 2020. Unpublished data (1982-2017).
2. Queensland Cancer Statistics On-Line, 2020. Viertel Cancer Research Centre, Cancer Council Queensland (qcsol.cancerqld.org.au). Based on data released by the Queensland Cancer Register (1982-2017; released July 2020).
3. Excluding keratinocyte or non-melanoma skin cancers such as Basal cell carcinoma (BCC) and Squamous cell carcinoma (SCC)
4. Cancer data in Australia (web report), Australian Institute of Health and Welfare (AIHW), Last updated 02 Jun 2020 <https://www.aihw.gov.au/reports/cancer/cancer-data-in-australia/contents/summary>.
5. Youlden DR, Cramb SM, Baade PD. 2009. Current status of female breast cancer in Queensland: 1982 to 2006. Brisbane: Viertel Centre for Research in Cancer Control, Cancer Council Queensland.
6. Breast cancer, Cancer Council, (<https://www.cancer.org.au/about-cancer/types-of-cancer/breast-cancer/>)

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Information and support

Cancer Council 13 11 20

Being diagnosed with cancer or supporting a loved one can leave you with many questions. We want to help you find the answers. Call Cancer Council's 13 11 20 Information and Support line to talk with one of the team.

Our team can provide you with cancer information, emotional and practical support. We can also refer you to Cancer Council Queensland's support programs and services.

This confidential service is available Monday to Friday 9am-5pm (excluding public holidays).

Cancer Connect

Cancer Connect is a confidential telephone-based peer support service that connects you, your carer or loved ones with a peer support volunteer who has had a similar cancer experience. You can be matched with a Cancer Connect volunteer based on cancer diagnosis, treatment, family or work issues.

Cancer Counselling Service

Living with a cancer diagnosis, or supporting someone along the way, is rarely easy. Talking things through with a counsellor or psychologist can help you manage your cancer related concerns.

Our Cancer Counselling Service is available for anyone distressed by cancer at any stage. We deliver counselling via telephone and video, with face to face appointments available in some regional offices. Our team includes nurse counsellors and psychologists trained and experienced in helping people affected by cancer.

Further information and support



13 11 20



Email



Webchat

Disclaimer: The information in this publication should not be used as a substitute for advice from a properly qualified medical professional who can advise you about your own individual medical needs. It is not intended to constitute medical advice and is provided for general information purposes only. Information on cancer, including the diagnosis, treatment and prevention of cancer, is constantly being updated and revised by medical professionals and the research community.

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