Do men get breast cancer?

Since men have breast tissue, they can get breast cancer, but it’s rare. About one percent of all breast cancer cases in the U.S. occur in men. It may sound like a small number, but that’s still more than 2,000 new cases expected each year. Also, more than 400 men in the U.S. are expected to die from breast cancer this year.

Warning signs of breast cancer in men:
Any change in the breast, chest area or nipple can be a warning sign of breast cancer in men, such as:
• Lump, hard knot or thickening in the breast, chest or underarm area (usually painless, but may be tender)
• Dimpling, puckering or redness of the skin of the breast
• Change in the size or shape of the breast
• Itchy, scaly sore or rash on the nipple
• Pulling in of the nipple (inverted nipple) or other parts of the breast
• Nipple discharge (rare)

Some men do not know they can get breast cancer. They may not notice a change or not see it as important. Also, they may be embarrassed about a change in their breast or chest area and put off seeing a doctor. This may result in a delay in diagnosis. Survival is highest when breast cancer is found early. If you notice any of the warning signs or other changes in your breast, chest or nipple, see a doctor right away.

Survival rates are similar for men and women when breast cancer is found at the same stage.

A man’s risk

Factors that increase the risk of breast cancer in men include:
• Age (older)
• BRCA2 gene mutation
• Family history of breast cancer
• Gynecomastia (enlargement of the breast tissue)
• Klinefelter’s syndrome (a genetic condition related to high levels of estrogen in the body)
• Overweight and obesity
How do I know if I have breast cancer?

To diagnose breast cancer, a complete medical history, clinical breast exam, mammogram and biopsy are needed.

Treatment

Treatment involves some combination of surgery, radiation, chemotherapy, hormone or targeted therapy.

The main treatment is mastectomy, which removes the entire breast. Lumpectomy (also called breast conserving surgery) is rarely used because of the small size of the male breast. Some men may have radiation after surgery.

Since most breast cancers in men are hormone receptor-positive, hormone therapy (with tamoxifen) is often used depending on the stage. Chemotherapy may be given before tamoxifen. For men with hormone receptor-negative breast cancer, chemotherapy is usually used.

Men with HER2/neu-positive breast cancers may be treated with trastuzumab (Herceptin) plus chemotherapy.

Resources

While breast cancer is rare among men, information and other resources are available. These organizations can help you get the information and support you need.

Susan G. Komen®
1-877 GO KOMEN (1-877-465-6636)

American Cancer Society
1-800-ACS-2345
www.cancer.org

Asking questions

When first diagnosed with breast cancer, many men are in shock. After all, breast cancer only affects women, right? No, it doesn’t. Breast cancer can happen to anyone. Don’t let the surprise of the diagnosis distract you from the seriousness of this disease. It is important that you ask questions. Gather as much information as you can to help you make informed decisions about your treatment.

Here are some questions you can ask your doctor:
1. What type of breast cancer do I have? Is it non-invasive (has not spread beyond the ducts or lobules where it began) or invasive (cancer has spread to nearby areas)?
2. What is the stage of my cancer?
3. What treatments do you advise for me? Why?
4. How can I prepare for treatment? What side effects should I expect? Which ones should I report to you?
5. What is my prognosis (chance for recovery)?

For other questions to ask your doctor, see our full series of 17 Questions to ask the Doctor at www.komen.org/questions.

Our Men Can Get Breast Cancer Too online forum offers a place for men to share their experiences with other male breast cancer survivors.

Related fact sheets in this series:
• Breast Cancer Detection
• Breast Cancer Surgery
• Treatment Choices — An Overview