



Inflammatory Breast Cancer

What is inflammatory breast cancer?

Inflammatory breast cancer (IBC) is a rare, but aggressive form of breast cancer. It is called inflammatory breast cancer because its main symptoms are swelling and redness of the breast. Unlike other forms of breast cancer, IBC often lacks a distinct lump. Instead, cells can grow in sheets that spread through the breast. Unless there is a defined lump, IBC may not be found by a mammogram or ultrasound. If no lump is present, it can be hard to diagnose. Because IBC can spread to other parts of the body, it requires prompt diagnosis and treatment.

Who is at risk?

IBC accounts for about one to five percent of all breast cancer cases in the United States.

- The average age at diagnosis is slightly younger than that of other breast cancers.
- It is slightly more common in African American women than in white women.
- Like other forms of breast cancer, it has also been seen in men.

It is important to mention that IBC has been seen in women who are pregnant and women who are breastfeeding. Due to the increased size and change in texture of the breasts during this time, IBC may be hard to detect.

Symptoms of inflammatory breast cancer

There are many symptoms of IBC. See your doctor right away if you notice any of the below:

- one breast becomes much larger than the other one (often sudden)
- warmth and swelling in the breast (often sudden)
- redness or pinkness that may look like an infection
- itching or pain in the breast that won't go away
- dimpling of the skin that may look like the skin of an orange (called peau d'orange)
- ridges or thickened areas of skin
- nipple discharge
- nipple retraction or flattening
- change in the color of the areola (the dark skin around the nipple)
- swollen lymph nodes on the neck or under the arm
- a lump (although often there is no lump with IBC)



Photo courtesy the Inflammatory Breast Cancer Research Foundation, www.ibcresearch.org

Enlarged left breast with nipple retraction.



Photo courtesy the Inflammatory Breast Cancer Research Foundation, www.ibcresearch.org

The photo above shows redness and the beginning of nipple retraction. A peu d'orange was identified around the area of inflammation as well as a bit of swelling in the breast.

The symptoms of IBC are not always the same. It is often first mistaken as a breast infection. Any of these symptoms may be a sign of either IBC or a benign (not cancer) breast infection. If the symptoms last longer than a week after starting antibiotics, insist that your doctor do a biopsy to see if cancer cells are present. If you do not feel your doctor listens to your concerns, get a second opinion.

Treatment for inflammatory breast cancer

IBC is treated with a combination of surgery, radiation therapy and chemotherapy, and may include hormone therapy and targeted therapy. Treatment usually begins with neoadjuvant (before surgery) chemotherapy. Surgery is almost always a mastectomy followed by radiation therapy plus hormone therapy and/or targeted therapy (depending on the tumor and prior treatment).

If you have been diagnosed with IBC, there is hope. Advances in the treatment of breast cancer have improved the survival rates for women with IBC and new research is ongoing. Staying positive is vital to your quality of life. Ask your doctor about sources of help and support in your area.

Resources

Susan G. Komen for the Cure® 1-877 GO KOMEN (1-877-465-6636) www.komen.org

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

IBC Research Foundation 1-877-STOP-IBC www.ibcresearch.org

IBC Support www.ibcsupport.org

Inflammatory Breast Cancer Clinic 1-877-MDA-6789 www.mdanderson.org

National Cancer Institute 1-800-4-CANCER www.cancer.gov

Young Survival Coalition® 1-877-972-1011 www.youngsurvival.org

Related fact sheets in this series:

- Biopsy
- Treatment Choices An Overview
- Types of Breast Cancer Tumors
- What is Breast Cancer?

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