






Breast lumps

Breast lumps are common and usually benign, but understandably may cause significant anxiety for the patient. Comprehensive assessment, involving clinical examination, imaging and biopsy, are required for definitive diagnosis. For two reasons - breast lumps are a high risk presentation, and registrars are likely to have limited clinical experience during their hospital training – supervisors must ensure registrars are competent in the assessment and management of breast lumps. Additionally, registrars need to know the benefits, risks and practicalities of breast cancer screening.

<p>TEACHING AND LEARNING AREAS</p> 	<ul style="list-style-type: none"> • Common and serious causes of breast lumps • Key diagnostic features on history and examination, including red flags • Risk factors for breast cancer • Breast examination • Investigation of a new breast symptom, including the triple test • Management of early stage breast cancer • Local referral pathways • Approach to assessing breast lumps in specific groups e.g. breast-feeding women, implants, men • Indication for genetic testing for breast cancer • Breast cancer screening recommendations (RACGP Red Book) 				
<p>PRE- SESSION ACTIVITIES</p> 	<ul style="list-style-type: none"> • Read the chapter in Murtagh’s General Practice textbook on lumps in the breast 				
<p>TEACHING TIPS AND TRAPS</p> 	<ul style="list-style-type: none"> • Offer the use of a chaperone prior to breast examination • The triple test is positive if any component is indeterminate, suspicious or malignant • MRI is not recommended in the routine investigation of a new breast symptoms 				
<p>RESOURCES</p> 	<table border="1"> <tbody> <tr> <td data-bbox="336 1691 437 1809">Read</td> <td data-bbox="437 1691 1497 1809"> <ul style="list-style-type: none"> • Cancer Australia - The investigation of a new breast symptom : a guide for GPs • ABC – To screen or not to screen? </td> </tr> <tr> <td data-bbox="336 1809 437 1912">Listen</td> <td data-bbox="437 1809 1497 1912"> <ul style="list-style-type: none"> • SBS Podcast – Breast Cancer – The Angelina Effect • The Clinical Takeaway Podcast: Suspicious Breast Lumps – Practical Advice </td> </tr> </tbody> </table>	Read	<ul style="list-style-type: none"> • Cancer Australia - The investigation of a new breast symptom : a guide for GPs • ABC – To screen or not to screen? 	Listen	<ul style="list-style-type: none"> • SBS Podcast – Breast Cancer – The Angelina Effect • The Clinical Takeaway Podcast: Suspicious Breast Lumps – Practical Advice
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<p>FOLLOW UP/ EXTENSION ACTIVITIES</p> 	<ul style="list-style-type: none"> • Registrar to undertake the clinical reasoning challenge and discuss with supervisor • Visit local BreastScreen service • Cancer Australia Online GP learning - Breast Health module 				

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Clinical Reasoning Challenge

Mary Wills, a 52-year-old high school teacher, presents with a breast lump.

QUESTION 1. What are the key features of her breast symptoms that you would ask about? List up to FIVE

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____

QUESTION 2. What other key aspects of the history would you explore? List in note form only, up to FIVE

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____

QUESTION 3. What are the components of the 'triple test' approach to diagnosis? List THREE

- 1 _____
- 2 _____
- 3 _____

You cannot feel a lump on clinical examination. You refer Mary for imaging and the result is as follows: *'Normal breast tissue with no discrete lesion noted, however mammography may miss early lesions and evaluation within clinical context is required.'*

Question 4: What is the next step in management? Select those that are appropriate from the following list:

- Refer urgently to a breast surgeon for further review
- Reassurance
- Arrange fine needle aspiration (FNA)
- Arrange MRI of the breast
- Nil further action required
- Advice regarding breast awareness
- Advice regarding future screening
- Request serum tumour markers – CA19.9, CA125, CEA
- Arrange genetic testing for BRCA1/2
- Arrange follow-up if lump recurs or patient concerned

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ANSWERS

QUESTION 1

What are the key features of her breast symptoms that you would ask about?

- Site – constant or changing
- Duration
- Tenderness or pain
- Relationship to period
- Nipple changes or discharge
- Breast asymmetry or skin changes

QUESTION 2

What other key aspects of the history would you explore?

- Medication history e.g. exogenous hormones etc
- Hormonal status (premenopausal vs menopausal)
- Parity
- Previous breast problems
- Family history breast/ovarian cancer

QUESTION 3

What are the components of the 'triple test' approach to diagnosis?

- Medical history and clinical breast examination
- Imaging and/or ultrasound
- Non excision biopsy – Fine needle aspiration (FNA) cytology and/or core biopsy

QUESTION 4

What is the next step in management?

- Reassurance
- Advice regarding breast awareness
- Advice regarding future screening
- Arrange follow-up if lump recurs or patient concerned