

# New Recommendations about Breast Self Examination

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Muttappallymyalil et al published a paper regarding the “Attitudes and practice of nurses in imparting knowledge on Breast Self Examination” (BSE) in previous issue of the journal [1]. In their conclusion they recommend that educational programs are needed in this group of health professionals promote the practice of teaching women to perform BSE.

A recent Cochrane review has failed to find any benefits for regular BSE in reducing the mortality rate of women due to breast cancer. Further, regular BSE appears to increase the number of unnecessary breast biopsies due to palpation of benign lesions [2].

When a woman detects a lump in one of her breasts it is most likely to be benign, however this often causes anxiety and can lead further, sometimes invasive, investigations such as fine needle aspiration (FNA), sonograms, mammograms and also breast biopsy. Such investigations are potentially harmful and costly for patients and/or the healthcare service. New guidelines don't recommend regular BSE for all women. Women should be aware of potential drawbacks of BSE. Women may encounter a lump or changes in shape and skin colour of their breasts during daily activities such as getting washed or dressed. Sometimes breast changes may be detected by their partner. The role of regular BSE in addition to these activities is uncertain. Regardless of the role of BSE it is recommended that women who encounter any unusual mass in their breast, whether accidentally or during BSE visit a physician for necessary follow-up.

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## Author's Response

Regular examination of breast is an important way to detect breast cancer early for effective treatment. There is an ongoing uncertainty raised about the validity of BSE and the American Cancer Society has chosen to advise women that Breast Self Examination (BSE) is an optional screening tool. Not every case of breast cancer can be detected by BSE, but it will help women to feel and know their breast.

BSE is a useful and essential screening tool according to Breast cancer. Org. particularly when used in combination with physical examination by a doctor and mammography. What is important is that a woman gets to know the look and feel of her breasts and various neighbourhood structures. Then she will be able to identify if something appears different from the rest of the tissues or if there is any

change in the breasts that last over a full month's cycle so that she can bring it to the attention of her doctor immediately. Performing BSE can be like making a small map of their breasts, making note of the lumps or irregularities. Especially in the beginning, this will help her remember, from month to month, what is “normal” for her breasts.

None of the screening tests is 100% sensitive and 100% specific and hence for BSE also there is possibility of detecting benign tumours but the anxiety therein can be easily relieved as she becomes comfortable with her own breasts and communicating with her own doctor becomes easier. Being cost free and lifelong, once educated into it, it can remain a cost effective tool in public health. Moreover it empowers the woman to take charge

over her own health. The number of lives that can be saved especially in the vulnerable, often underserved group has to be considered in this case as much as in any other screening programme.

### Editorial Point of View

Regarding the scientific facts it is approved that screening will improve the overall survival in breast cancer patients in western countries. The tool that is recommended as yearly mammography is not feasible in the developing countries. So in many national and international studies new tools are recommended for early detecting breast cancer that will improve the overall survival. In our studies breast self examination after public awareness and education will detect the breast mass in small sizes and will change many cases from node positive status to node negative with better survival outcome. So breast self examination in structured setup with

community awareness and trained health staff will affect the screening program for breast cancer effectively.

### References

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