

Breast cancer - common queries answered

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As part of a member's own breast awareness, they'll know what is normal for them, but understanding more about their breasts may help alleviate any worries they may have.

Below are a few of the most common breast health queries answered.

“MY NIPPLES ARE DIFFERENT SIZES”

It's not uncommon to have different sized nipples and breasts. Sometimes, this can't be attributed to any obvious reasons or health concerns. The body changes continuously because of age, hormones and other factors.

The member should look for any discharge from their nipples, any red area that does not heal easily, any change in the nipple position, such as their nipple being pulled in or pointing differently, or a rash around their nipple. The member should visit their GP if they spot these signs.

“SEVERAL FAMILY MEMBERS HAVE HAD BREAST CANCER AND I'M WORRIED”

In the UK there are medical guidelines to help decide which patients are most at risk and who should be referred for extra testing and screening.

If a member is at all concerned, they should speak to their GP who will be able to discuss this with them in more detail. During their appointment, their GP will need details of their family members who have been affected including their age and gender so the member should ensure that they take this information with them.



“I HAVE SILICONE IMPLANTS AND I WORRY THAT I WON’T BE ABLE TO FEEL ANY LUMPS OR THAT MAMMOGRAMS WON’T SEE BEHIND THEM”

Breast implants can make detection of breast cancer a bit harder, but they do not increase the risk of getting cancer.

Detection difficulties depend on whether the implant has been put behind or in front of the chest wall muscle. The NHS breast cancer screening programmes states that a member should tell the technician doing the mammogram if they have implants; as a different technique needs to be used to see all of the breast tissue.

Even if a member has a mammogram, they should continue to be breast aware and examine their breasts regularly, reporting any changes or breast lumps to their GP immediately.

“MY BREASTS HURT ALL THE TIME, EVEN WHEN MY PERIOD ISN’T DUE”

‘Non cyclical’ breast pain, the kind which doesn’t vary with a menstrual cycle, may come from the breast tissue itself, or be getting pain ‘referred’ from the muscles, bones or joints of the chest wall.

Often the cause is not clear, but since there are several different treatments depending on what is found, it is recommended the member sees their GP.

“MY BREASTS ACHE AND ARE TENDER BEFORE MY PERIOD”

Fluctuating hormone levels normally account for most premenstrual breast swelling and tenderness. A woman’s hormones rise and fall during a normal menstrual cycle. Oestrogen causes the breast glands to enlarge and progesterone causes the milk glands to swell - both these things may cause breast tenderness and swelling, typically between days 14 and 28 of a member’s menstrual cycle.

While most premenstrual breast pain and swelling is generally harmless, sudden or worrisome breast changes should be discussed with a GP as it could be signs of infection or other medical conditions.

PHC’S CANCER SERVICES

Dedicated Cancer Nurses

A member will be put in touch with PHC’s Dedicated Nurse Service to get a swift diagnosis and prompt treatment access.

Check4Cancer

A provider of PHC, they’ll make sure the member is seen quickly if they suspect cancer.