



**The Leeds
Teaching Hospitals**
NHS Trust

Clinical Genetics

Family history of Breast Cancer

Information for patients

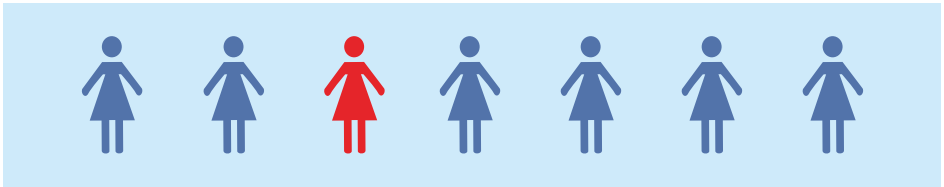


Yorkshire Regional
Genetics Service

How common is breast cancer?

Breast cancer is a common disease. About one in 7 women in the UK will develop breast cancer in their lifetime. This is called 'general population risk' of breast cancer. Getting older is the biggest risk factor for breast cancer and most women who develop breast cancer are over the age of 60. Men can also get breast cancer. Male breast cancer is less common with around 370 new cases in the UK each year.

Breast cancer affects one in 7 women



Many people have a family history of breast cancer and, in some cases, this may mean that the risk of this type of cancer is increased for the family. Only a small proportion of women with breast cancer have a clear genetic cause for their cancer. A higher proportion of men with male breast cancer have a genetic cause.

Risk assessment

Based on the family history information we divide increased risk of breast cancer into two categories. These categories are:

Moderate risk. This means that a woman has a moderately increased risk of breast cancer over her lifetime, when compared to a woman with no family history of the condition; It is still more likely that she will not develop breast cancer. It is less likely that the breast cancer in these families is caused

by the genetic factors we currently test for and so gene testing is not usually offered.

High risk. This means that the woman is at a higher level of risk, compared to women with no family history or with a moderate risk. For most women in this group it is still more likely that they will not develop breast cancer. Genetic testing may be appropriate for your family and we will advise you about this if applicable.

The letter from the genetic counsellor or doctor will explain more about which risk group you fall in to. Even if a man has a family history of breast cancer, his own risk of developing the condition will usually remain low. For this reason we do not suggest any additional 'breast' screening for men.

Do women with an increased risk of breast cancer need extra screening?

Women with an increased risk of breast cancer will be offered breast screening by mammogram:

- Every year from the age of 40 to 49
- At variable intervals from the age of 50 to 59 depending on your risk category
- Every 3 years from the age of 60 to 71
- Every 3 years from the age of 71, if you refer yourself to the breast screening service

In some areas of the country, women in the high risk group are offered breast screening from age 30. The evidence around this is still not clear and so it is not offered routinely by all breast teams, even if your relatives had breast cancer before age 40.

Some young women have breast tissue that is too 'dense' for a mammogram to produce a clear image.

Screening for women with a family history of breast cancer is based on nationally recommended guidelines. These are updated as evidence from research is gathered.

Can anything alter the risk of developing breast cancer?

The following factors increase the risk of breast cancer:

- Being overweight
- Drinking alcohol regularly. The more alcohol a person drinks the more their risk of breast cancer is increased.
- Hormonal contraceptives and Hormone Replacement Therapy (HRT) slightly increase the risk of breast cancer whilst a woman is taking it and for several years after it is stopped

The following factors help to reduce the risk of breast cancer:

- Regular exercise and maintaining a healthy body mass index (BMI)
- Pregnancy and breast feeding. Women who have pregnancies usually have a lower risk of breast cancer in the longer term. Breast feeding also slightly reduces the risk of breast cancer. The longer breast feeding is continued, the more it reduces risk.
- Eating plenty of fruit and vegetables and lowering cholesterol intake reduces the risk of cancers, including breast cancer

What can you do to keep a check on yourself?

Be 'breast aware'. This means knowing how your breasts normally look and feel and being aware of what changes to look and feel for. If you do notice any changes, please tell your GP without delay. This is important for all women. Men should also be 'chest aware' and discuss any concerns with their GP.

Risk-reducing medication

There have been guidelines published which suggest that women who are at moderate or high risk of breast cancer may be considered for treatment with a tablet called Tamoxifen, or a similar drug, to reduce the risks of developing breast cancer. There is a separate information leaflet about this topic.

For a small number of women with a very strong family history, it may be appropriate to discuss risk-reducing breast surgery. This is usually only applicable to families where there is a known genetic cause for the breast cancers.

Ovarian cancer in a close family member

If you have a family history of ovarian cancer as well as breast cancer, it is important to be aware of the signs and symptoms of ovarian cancer. They include persistent abdominal (tummy) pain, bloating, difficulty eating, feeling full very quickly and the need to pass urine more frequently. Although these symptoms can be caused by lots of other problems you should contact your GP, if at all worried.

Unfortunately, there is no screening proven to be effective for ovarian cancer. Some women consider having their ovaries surgically removed to reduce the risk of ovarian cancer. Usually, this is not carried out until a woman is in her late 30's or older and has completed her family, as the risk of ovarian cancer is relatively low prior to this.

Usually, this type of surgery is carried out in families known to have a genetic cause for the cancers, though there may be a small number of other people for whom this is an option.

What should you do if someone else in your family gets breast or ovarian cancer?

Please let your GP know in case this affects our assessment of your risk.

What about genetic testing?

It is important to remember that most breast cancer is not due to a high-risk inherited tendency. Currently, genetic testing is not usually offered to families with a moderate risk of breast cancer. This is because the chance of finding a genetic cause for the cancer in the family is low. This may change in the future as more is discovered about the role of genes in cancer. If genetic testing is relevant for your family we will let you know.

For more information:

Department of Clinical Genetics

Chapel Allerton Hospital

Chapeltown Road

Leeds

LS7 4SA

Telephone: **0113 392 4432**

Other sources of information:

Macmillan Cancer Support

Tel: **0808 808 0000**

www.macmillan.org.uk

CoppaFeel

<https://coppafeel.org>

Breast Cancer Now

Tel: **0808 800 6000**

<https://breastcancernow.org>

Factual information presented in this leaflet is based on accurate contemporaneous peer reviewed literature. Evidence of sources can be provided on request.

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