

BREAST SELF EXAMINATION



BSE

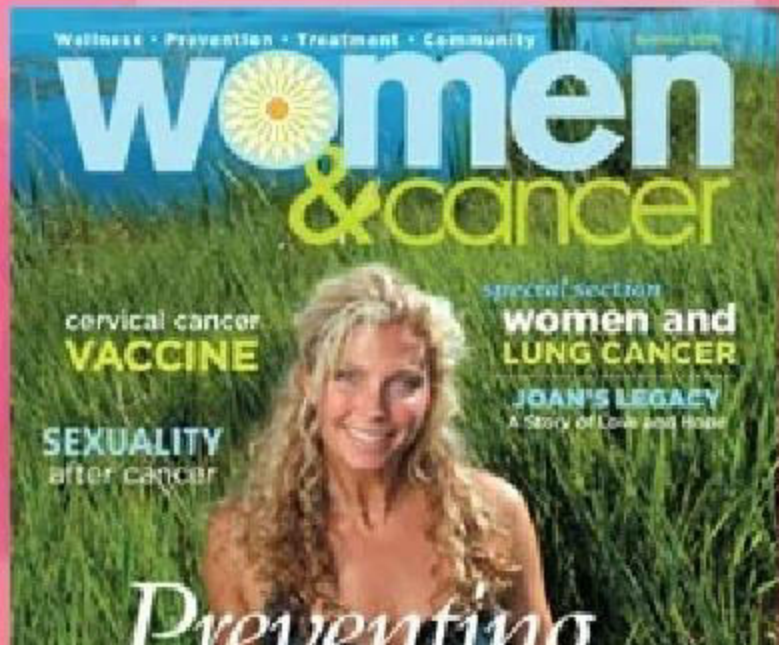
THE BREAST

- It has an important role in modern culture
- Often viewed as measures of sexuality , femininity and attractiveness because it is visible for its size and shape.
- However, it is a secondary sex



Clinical value

- a. Experience has verified that 90% of breast cancers are found by women themselves
- b. When women discover lumps in their breasts at so very early stage



Recommendation

1. All women age 20 years and older perform BSE on a monthly basis. Beginning in their 20's, women should be told about the benefits and limitations of breasts self examination. The importance is prompt reporting of any new breast symptoms to a health professional should be emphasized.
2. All women ages 29 to 39 should have clinical examinations every 3 years preferably be part of a periodic health examination.
3. All women ages 40 years and older have regular (every 1 to 2 years) mammograms.
4. Asymptomatic women ages 40 and older should continue to receive clinical breast examination preferably be part of a periodic health examination annually.
5. Screening decisions for older women should be individualized by

Advantages of BSE

Women can use BSE to assess their breasts. When they perform BSE properly and regularly, they can not any changes in their breasts and seek further evaluation.

Barrier to BSE

The major barrier to BSE is the lack
of **CONFIDENCE**

Physical assessment findings in a healthy adult

- A. By inspection
- B. By palpation

By inspection the breast should be:

- Symmetrical, full, rounded, smooth in all portions, without dimpling, retractions or masses
- Faint, even vascular pattern and striae are noted
- Nipples everted, areola even

In palpation the breast should be:

- Firm and without masses, lumps, local areas with warmth, or tenderness
- Nipples should have no discharges
- Axillae should be smooth and

Assessment interview

Sexual health history

- Are you currently sexually active? With men, women, or both?
- Describe the positive or negative aspects of your sexual functioning
- Do you have difficulty with sexual desire? Arousal? Orgasm? Satisfaction?
- Do you experience any pain with sexual interaction?
- If there are problems, how have they influenced how you feel about yourself? Have they affected your partner? How have they affected the relationship?
- Do you expect your sexual functioning to be altered because of your illness?
- What are your partner's concerns about your future sexual functioning?

Assessment interview

Breast History

- Ask the client about breast pain or tenderness and its occurrences in relation to menstrual cycle.
- Ask whether the woman has had in the past or currently has breast lumps or masses. If a lump is present, ask the woman to describe its location, onset and size and whether it is painful
- Determine whether the lump has changed shape, size, consistency, or degree of redness since it was first noticed
- Ask about nipple discharge, which is abnormal in women who are not pregnant or lactating. If there is a discharge, determine the color, consistency, amount and odor.
- Ask whether the woman performs BSE regularly

Identifying clients at risk

- Altered body structure or function due to trauma, pregnancy, recent childbirth, anatomic abnormalities of genitals or disease
- Physical, psychosocial, emotional, or sexual abuse; sexual assault
- Disfiguring conditions, such as burns, skin conditions, birthmarks, scars (e.g. mastectomy) and ostomies
- Specific medication therapy that causes sexual problems
- Temporary or long term impaired physical ability to perform grooming and maintain sexual attractiveness
- Value conflicts between personal beliefs and religious doctrines

SIGNS OF BREAST CANCER

Breast self-exam:
Visual inspection



- ❖ Elevation
- ❖ Asymmetry
- ❖ Bleeding
- ❖ “Orange Peel” skin

Women are screened for breast cancer in 3 ways:

1. **Mammography** - roentgenography of breasts without injection of contrast medium. It is most sensitive.

3 views :

- Craniocaudal
- Mediolateral

Women are screened for breast cancer in 3 ways:

2. **Clinical Breast Examination** - clinical breast exam is an examination by a doctor or nurse, who uses his or her hands to feel for lumps or other changes
3. **Breast self-exam.** A breast self-exam is when you check your own breasts for lumps, changes in size or

BIOPSY

is a medical test involving the removal of cells or tissues for examination.

- a) **Aspiration** - a syringe and g 18 needle is used to aspirate tissue from the site which is under local anesthesia. The specimen is spread on a glass slide, fixed, stained and sent to the laboratory
- b) **Incisional** - a piece of tissue is obtained in the operating room, sent to the laboratory fro frozen section which is the

Classification of Breast Tumors and Preferred Method of Treatment

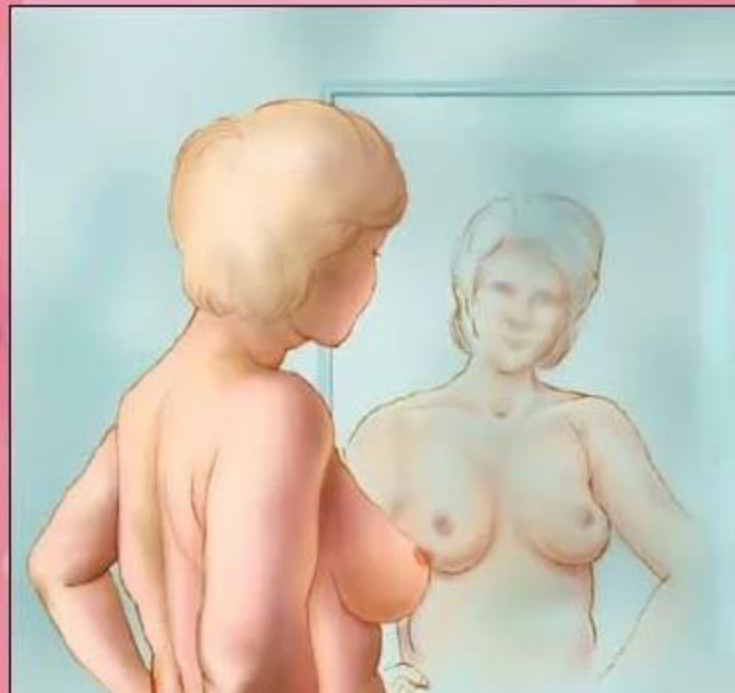
Clinical Anatomic Observation	Treatment
Stage I Breast Mass Localized; all nodes negative	Radical mastectomy preferred by surgeons. Some prefer simple mastectomy plus or without irradiation.
Stage II Breast Mass Localized; axillary nodes positive	Radical mastectomy preferred with or without postoperative irradiation
Stage III Breast Mass locally extensive; axillary supraclavicular and internal mammary nodes positive	Variable depending on extensiveness: 2. Simple mastectomy with radiation 3. Simple mastectomy with excision of large axillary nodes 4. Radiation therapy alone if tumor is fixed to the chest wall

STEPS IN BREAST SELF EXAMINATION

- Inspection before a mirror
- Palpation: Lying Position
- Palpation: Standing or sitting

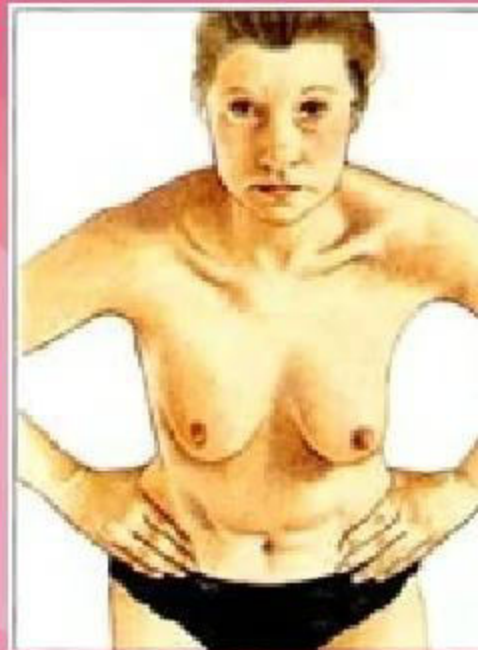
Inspection before a mirror

- Stand and face a mirror with your arms relaxed at your sides or arms resting on your hips; then turn to the right and left for a side view look. (look for any



...continuation

- Bend forward from the waist with arms raised overhead
- Stand straight with arms raised over the head and move the arms slowly up and down at the sides. (look for free movement of the breasts over the chest wall)
- Press your arm firmly



Palpation: Lying Position

- Place a pillow under your right shoulder and place the right hand behind your head. This position distributes breast tissues more evenly on the chest.
- Use the finger pads (tips) of the three middle fingers (held together) on your left hands to feel the lumps.
- Press the breast tissue against the chest wall firmly enough to know how your breast feels. A ridge of firm tissue in the lower curve of each breast is normal.
- Use circular motions systematically all the way around the breasts as many times as necessary until the entire breast is covered.



Breast self-exam:
Manual inspection
(reclining)

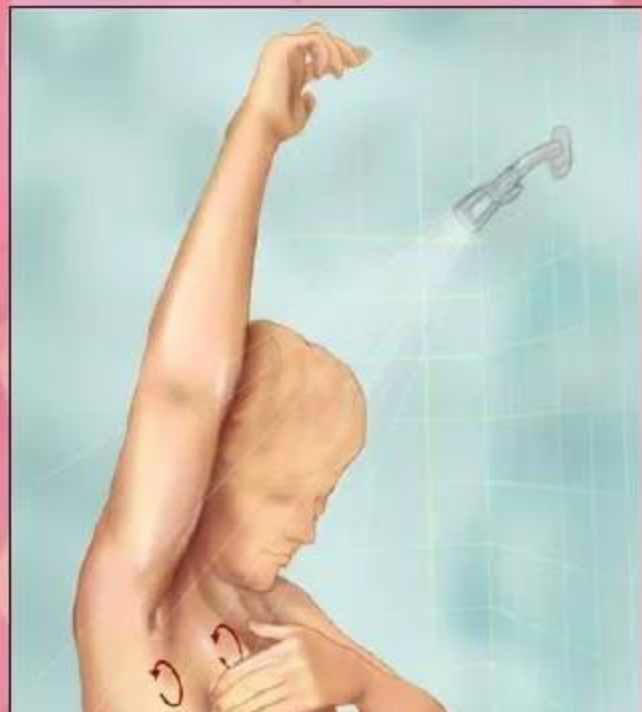


With fingertips close
together, palpate each



Palpation: Standing or Sitting

- Repeat the examination of both breasts while upright with one arm behind your head. This position makes it easier to check the upper part of the breast and toward the armpit.
- Optional: Do the upright BSE in the shower. Soapy hands glide more easily over when wet
- Report any changes to your health care



The next slide is a video about
breast awareness and how to
perform BSE

