

Patient information from BMJ

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Breast pain

Breast pain can be distressing, but it's not usually a sign that there's something seriously wrong. Often there's no obvious cause. However, there are treatments that can help.

We've brought together the best research about breast pain and weighed up the evidence about how to treat it. You can use our information to talk to your doctor and decide which treatments are right for you.

What happens?

Breast pain is also called **mastalgia**. It's very common.

Most breast pain falls into two general categories.

- **Cyclical breast pain** follows a usual pattern, coming on in the week or two before your period. This is the most common type of breast pain among women who haven't gone through the menopause.
- **Non-cyclical breast pain** isn't linked to your periods. Your breast (or breasts) feels painful some of the time, or even constantly. Usually, there doesn't seem to be a cause. But sometimes non-cyclical breast pain is caused by things like an infection or a cyst (a fluid-filled sac in the breast). If this is the case, your doctor will treat these underlying problems, which should improve your breast pain.

Many women worry that breast pain means they have breast cancer. But pain on its own is not a common symptom of breast cancer. However, if you are worried about breast pain, or you have other symptoms such as a lump or a red or inflamed area on your breast, see your doctor.

What are the symptoms?

Cyclical breast pain can be dull, heavy, or aching. It starts in the two weeks before your period. The pain may get worse until your period starts and then get better. You may get pain in both breasts.

Non-cyclical breast pain can be sharp and burning. It may come and go, or be there all the time. You may get pain in just one breast.

Breast pain

Both types of breast pain can be distressing, particularly during sex.

See your doctor urgently if you have:

- Discharge from your nipples
- Signs of infection, like redness, pus, or fever
- A new lump in one of your breasts.

What treatments work?

If your breast pain has no obvious cause, and it isn't bothering you too much, you may not need treatment. But if it is disrupting your life, there are treatments that might help.

Things you can do for yourself

You may find it helps to have a bra properly fitted, or to try one with more support. A sports bra for exercise may help.

Some women find that reducing the amount of caffeine or salt in their diet improves their breast pain. But there isn't enough research to say for certain whether this helps.

Supplements

There isn't much good research looking at taking supplements to improve breast pain. But some women say that taking evening primrose oil helps.

Pain medicines

Doctors often recommend taking over-the-counter pain medicines for breast pain. These include paracetamol and ibuprofen. Many women find this improves their pain.

Hormone treatments

If your breast pain is very bad, disrupts your life, and has lasted more than six months, your doctor may suggest taking hormone treatments. Medicines your doctor might recommend include tamoxifen, bromocriptine, and danazol.

These medicines can reduce breast pain. But they can also sometimes cause side effects. Your doctor will discuss possible problems with you. Danazol isn't used very often because many women find its side effects difficult to tolerate. These may include weight gain, a deep voice, heavy periods, and muscle cramps.

What will happen to me?

Breast pain often goes away on its own without any treatment. But it may come back again. However, many women with breast pain linked to their period find they no longer have breast pain after the menopause.

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