Pregnancy-Associated Breast Cancer

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Case Study

R.M., a 38-year-old woman, gravida 4, para 2, was 28 weeks pregnant. She was a busy mother of two active boys, aged 7 and 4, and was thrilled to learn she was expecting a baby girl. Her pregnancy had progressed normally, with common complaints of fatigue and heartburn. Her prior pregnancies also were without complications except for cesarean deliveries because of a breech presentation in her first pregnancy.

R.M. had a history of a benign breast cyst, so she was not overly concerned when she felt a quarter-sized painless lump in her right breast. She waited two weeks until her next scheduled office visit to mention the lump to her obstetrician. Her doctor performed a thorough breast examination and reassured her that the lump probably was a blocked milk duct. She suggested that she have an ultrasound to be sure. The ultrasound was inconclusive, so her doctor insisted on a fine needle biopsy to rule out any possibility of cancer.

Several days later, R.M. received devastating news: She had stage II invasive ductal carcinoma of the breast. After meeting with an oncologist, surgeon, and maternal fetal medicine doctors, she was scheduled for a modified radical mastectomy at 30 weeks. Her first round of chemotherapy was at 30 weeks gestation. Irritation of the breast ducts caused by rapid tissue growth may cause a bloody discharge, which usually is a benign condition (e.g., cells in the lining of the breast ducts being shed, secretion from a papilloma) (Imaginis, 2007). The areola also may increase in size and become darker in color. In addition, Montgomery tubercles, small nodules surrounding the areola, will produce a fluid to lubricate and cleanse the nipple in preparation for nursing (Imaginis).

Breast Mass Assessment in Pregnant Women

A thorough baseline examination of the breast should be performed in the early stages of pregnancy before the physiologic changes are pronounced. Breast cancer most often presents as a painless lump or thickening, sometimes accompanied by a bloody discharge from the nipple (Ee-darapalli & Jain, 2006). Palpating a mass is more difficult when the breast becomes...