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Breast Pain (Mastalgia)

Most women develop breast pain (mastalgia) at some stage in life. In most cases the pain develops in the days just before a period.

In some cases the pain is not related to periods. The pain is often mild but in some women it is more severe and can affect quality of life. If needed, treatment options include painkillers and rub-on (topical) anti-inflammatory drugs.

What are the types of breast pain?

Up to 7 in 10 women develop breast pain (mastalgia) at some stage in their lives. Breast pain is usually classed as either:

- Cyclical breast pain - where the pain is related to periods. Typically, it occurs in the second half of the monthly cycle, becoming worse in the days just before a period; **or**
- Non-cyclical breast pain - where the pain is not related to periods. Non-cyclical breast pain may be due to:
 - Pain coming from the breast itself - for example, infection or breast-feeding; **or**
 - Pain which does not come from the breast itself. Usually in this case the pain comes from the muscles of the chest wall. Many other causes can result in a pain which is felt in the breast. These are discussed more below.

If you are not sure which type of breast pain you have, it may be worth keeping a pain diary for 2-3 months. Record the days when you have breast pain, and highlight the days when the pain is severe enough to affect your lifestyle. See what pattern emerges.

Cyclical breast pain

Cyclical breast pain is very common. It can first occur at any age after periods start but most commonly first develops between the ages of 30 and 50 years. It does not occur in women past the menopause when the periods have stopped.

Symptoms of cyclical breast pain

In many women the symptoms are mild. Indeed, it can be considered normal to have some breast discomfort for a few days before a period. However, in some women the pain can be severe and/or last longer. The 3-5 days prior to a period are usually the worst. In a few women, the pain lasts up to two weeks before a period. The pain usually eases soon after a period starts. The severity usually varies from month to month. Typically, the pain affects both breasts. It is usually worst in the upper and outer part of the breast and may travel to the inner part of the upper arm.

Your breasts may also feel more swollen and lumpy than usual. This lumpiness is generalised so does not lead to a single definite lump forming. This swelling and lumpiness then improve soon after your period starts.

Quality of life for some women can be significantly affected. Physical activity such as jogging can make the pain worse. Such things as hugging children and sexual activity can be painful. The pain may interfere with sleep.

What causes cyclical breast pain?

It is thought that women with cyclical breast pain have breast tissue which is more sensitive than usual to the normal hormonal changes that occur each month. It is not due to any hormone disease or to any problem in the breast itself. It is not related to any other breast conditions. Although it is not serious, it can be a nuisance.

Treatment options for cyclical breast pain

No treatment may be needed if the symptoms are mild. Many women are reassured by knowing that cyclical breast pain is not a symptom of cancer or serious breast disease. The problem may settle by itself within 3-6 months. Studies have shown that cyclical breast pain goes away within three months in about 3 in 10 cases. However, in up to 6 in 10 women where the pain has gone, it develops again sometime within two years. So, in other words, cyclical breast pain may come and go over the years.

If the pain is more severe, or for the times when it may flare up worse than usual, treatment options include the following:

- Support your breasts. Wear a well-supporting bra when you have pain. It may be worthwhile having a bra fitted for you, as many women actually wear the wrong size of bra. Some women find that wearing a supporting bra 24 hours a day for the week before a period is helpful. It is best to avoid underwired bras. Wear a sports bra when you exercise. A soft bra at night may help you sleep more comfortably.
- Painkillers and anti-inflammatory painkillers - for example, paracetamol or ibuprofen. Take regularly on the days when the breasts are painful.
- Rub-on (topical) non-steroidal anti-inflammatory drugs (NSAIDs) - for example, topical diclofenac or topical ibuprofen. You can buy various topical NSAIDs or obtain them on prescription. Topical NSAIDs have been shown to help relieve the pain of cyclical breast pain.

- Consider your medication. The contraceptive pill or hormone replacement therapy (HRT) may make cyclical breast pain worse. Other medicines may also worsen cyclical breast pain - for example, some antidepressants and some blood pressure medicines. There is not much evidence that changing medication helps. However, occasionally it may be worth stopping or changing your medication to see if this helps. Discuss this with your doctor.
- Medicines to block hormones. Medicines such as danazol, tamoxifen and goserelin injections can ease pain in most cases. These medicines work by reducing the level, or blocking the effect of, female hormones such as oestrogen. However, side-effects are common with these medicines. So, they are not usually tried unless you have severe pain which occurs during most months and does not ease with other treatments. They are only prescribed by specialists.
- Evening primrose oil. This used to be a very popular treatment. However, research studies suggest that this has little effect. Therefore, you can no longer obtain this from your doctor on prescription. Some women still seem to find benefit from it. There are many different preparations of evening primrose oil, containing varying amounts of the active ingredient gamma-linolenic acid. The dose is usually 120-160 mg of gamma-linolenic acid twice daily. Evening primrose oil is unlikely to give instant relief. It needs to be taken for up to four months before you can decide if it is helpful or not. If it has not helped by the time four months is reached then it is not going to be effective.

Non-cyclical breast pain

Breast pain can be present all the time, or come and go in a random way. This type of breast pain is not related to periods and is most common in women aged over 40. The pain may be in just one breast and may be localised to one area in a breast. Sometimes the pain is felt all over one or both breasts. There are various causes - for example:

- Pain coming from the breast tissue itself without any lumps, tumours, or other abnormality being found. The reason why this type of pain occurs is not known.
- Pain coming or radiating from the chest wall under the breast rather than the breast itself. Muscular or bony problems of the chest wall account for some cases. A common cause is a condition called costochondritis where the joints of the chest wall become inflamed.
- Pregnancy causes breasts to swell and be tender, particularly in the first few weeks. Breastfeeding may also cause breast pain.
- Infection (mastitis) is a cause in a small number of cases.
- Shingles may cause pain before a rash develops.
- Breast tumours, cancer and lumps are a very uncommon cause of breast pain. Fluid-filled lumps (cysts) are sometimes painful. However, it is very unusual for breast cancer to cause pain without there being a lump to feel.
- The cause is often not clear.

As there are various causes, it is best to see a doctor for assessment.

Treatment for non-cyclical breast pain

In many cases the pain goes after a few months without any treatment. NSAIDs such as ibuprofen may ease the pain. Rub-on (topical) NSAIDs may also work. Other treatments may be appropriate, depending on whether a cause is found.

Breast pain and breast cancer

Women with breast pain often worry that the pain is caused by breast cancer. However, the first symptom of breast cancer is usually a painless lump. Pain is not usually an early symptom.

However, even though breast pain is not likely to be caused by cancer, you should see your doctor if you have any concerns about breast pain or any other breast symptoms.

In particular, see a doctor promptly if you have breast pain and any of the following:

- A lump in your breast or under your arms.
- Discharge from a lump or nipple.
- A family history of breast cancer.
- Swelling and redness in your breast.
- Any symptoms of pregnancy, such as a missed period.

Further reading & references

- [Salzman B, Fleegle S, Tully AS](#); Common breast problems. *Am Fam Physician*. 2012 Aug 15;86(4):343-9.
- [Spencer JP](#); Management of mastitis in breastfeeding women. *Am Fam Physician*. 2008 Sep 15;78(6):727-31.
- [Cheung KL, Lam TP](#); Approach to a lump in the breast: a regional perspective. *Asian J Surg*. 2005 Jan;28(1):65-70.
- [Goyal A](#); Breast pain. *Clin Evid (Online)*. 2011 Jan 17;2011. pii: 0812.

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