

Inflammatory Breast Cancer

Inflammatory breast cancer (IBC) is an uncommon, highly aggressive form of breast cancer in which cancerous cells obstruct the lymph vessels in the breast. The disease is named because of its primary symptoms of redness and swelling. IBC spreads throughout the breast, but it is not commonly detected by mammograms because the disease often does not produce a well-defined lump.

Among breast cancer patients in the United States, IBC comprises approximately 1 to 5 percent of those cases. Early detection and quick treatment are important, as IBC can spread rapidly to other locations in the body.

Symptoms

The following may be symptoms of IBC, but could be linked to other health conditions. If these symptoms are present, patients are encouraged to consult their physician for proper testing:

- Sudden increase in the size of one breast
- Feeling of heaviness, aching, soreness, stabbing pain, or tenderness in the breast
- Breast becomes swollen or warm to the touch
- Recurring itching, burning, or other pain in the breast
- Dimpled skin, like an orange peel
- Change in texture or color of the skin on the breast
- Nipple discharge, flattening, or inversion
- Swelling of lymph nodes on the underarm or collar bone
- A persistent bruise, redness, or reddish purple coloration, or what looks like a bug bite on the breast
- Lump, thickening, or hardening of the breast tissue

Risk Factors

- IBC tends to have a higher incidence in younger women.
- African American women have a higher risk of the disease.
- IBC tends to have a higher incidence among overweight and obese women.
- Women who are pregnant or breastfeeding may be diagnosed with IBC.
- Men can be diagnosed with IBC.

Treatment Options

IBC patients should consult with a medical oncologist to determine their specific treatment needs. A common treatment regimen usually begins with chemotherapy, taken by mouth as pills or administered into a vein through a needle. Using more than one type of treatment, including chemotherapy, surgery, radiation therapy, targeted therapy, and hormone therapy, has been shown to have better outcomes.

Because IBC can grow and spread rapidly and is more likely to recur after treatment than other types of breast cancer, it is thought of as an aggressive cancer. Though the long-term survival rate for IBC is lower than that of other breast cancer cases, innovations in cancer treatment and new research developments have improved the survival outlook for IBC patients. Since IBC symptoms may be mistaken for other non-cancerous conditions, such as a breast infection, patients with concerns about their diagnosis and treatment should request a biopsy to detect cancer cells.

Sources: American Cancer Society, American Society of Clinical Oncology, Inflammatory Breast Cancer Research Foundation, and National Cancer Institute



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