

What is inflammatory breast cancer?

Inflammatory breast cancer (IBC) is a rare and aggressive type of breast cancer. The main signs are swelling and redness of the breast. Unlike other forms of breast cancer, IBC often lacks a lump. Without a lump, it can be hard to detect. It may not show up on a mammogram. It can develop fast, almost overnight. The breast may swell like an infection. The skin may thicken or change color. IBC can spread to other parts of the body. Early diagnosis and treatment are important.

Who is at risk?

IBC accounts for about one to five percent of all breast cancer cases in the U.S.

- The average age at diagnosis is slightly younger than that of other breast cancers.
- It is slightly more common in African American than white women.

IBC has been found during pregnancy and when breastfeeding. The increase in size and change in texture of the breasts can make it hard to find.

What are the signs?

There are many signs of IBC. See your doctor right away if you notice:

- Swelling or enlargement of the breast
- Redness of the breast (may also be a pinkish or purplish tone)
- Dimpling or puckering of the skin of the breast
- Pulling in of the nipple
- Breast pain

Although sometimes a lump can be felt, it is less common with IBC than with other breast cancers.



Photo courtesy the Inflammatory Breast Cancer Research Foundation, www.ibcresearch.org

Enlarged left breast with nipple retraction.



Photo courtesy the Inflammatory Breast Cancer Research Foundation, www.ibcresearch.org

The photo above shows redness and swelling in the breast.

It is often mistaken first as a breast infection. Any of the signs could be IBC or a benign (not cancer) breast infection. Tell your doctor if the symptoms last longer than a week after starting antibiotics. A biopsy may be needed to see if cancer cells are present. Don't be afraid to get a second opinion.

Treatment for inflammatory breast cancer

IBC is treated with a combination of surgery, radiation and chemotherapy. It may also include hormone and targeted therapy. Treatment usually begins with neoadjuvant (before surgery) chemotherapy. Surgery is almost always a mastectomy followed by radiation. Hormone and/or targeted therapy may be used (depending on the tumor and prior treatment).

If you have been diagnosed with IBC, there is hope. Treatment has improved survival rates. New research and clinical trials are studying new ways to treat IBC. Talk to your doctor about options for joining clinical trials.

Resources

Susan G. Komen®
1-877 GO KOMEN (1-877-465-6636)
www.komen.org

American Cancer Society
1-800-ACS-2345
www.cancer.org

IBC Research Foundation
1-877-STOP-IBC
www.ibcresearch.org

IBC Support
www.ibcsupport.org

Inflammatory Breast Cancer Clinic
1-877-MDA-6789
www.mdanderson.org

National Cancer Institute
1-800-4-CANCER
www.cancer.gov

Young Survival Coalition®
1-877-972-1011
www.youngsurvival.org

Related fact sheets in this series:

- Biopsy
- Treatment Choices — An Overview
- Types of Breast Cancer Tumors
- What is Breast Cancer?

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