Wayne Dornan
Komen Advocate in Science member
and breast cancer survivor

“At first, I was embarrassed by my diagnosis... as if somehow it would be better if I had a “male form” of cancer. But I quickly decided that I would take this disease head-on. It would not define me or change the way I lived.”

Support
Social support is important after a breast cancer diagnosis.

Susan G. Komen’s free, 6-week telephone support groups for men with breast cancer provide a safe place for men to discuss the challenges of breast cancer, get information and exchange support. To learn more, call the Komen Breast Care Helpline at 1-877 GO KOMEN (1-877-465-6636) Monday through Friday, 9AM to 10 PM ET or email helpline@komen.org.

“My husband, Lee Giller, lived with breast cancer for nearly 12 years. Throughout that time, we often met people who were surprised by Lee’s diagnosis because they never knew men could get breast cancer too.”

– Kathy Giller

Remember
Don’t ignore the warning signs!

See a doctor if you notice any change in your chest area, such as a lump or a change in your nipples.

Breast cancer can’t be prevented, but if you are diagnosed, it can make a difference if you:
• Find it early.
• Get treated right away.

Getting treatment early can help ensure you are there for the important moments in life.

This brochure is funded in part by the Lee Giller Male Breast Cancer Fund - komen.org/LeeGillerFund

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MEN CAN GET
BREAST CANCER TOO.
Find out more
Men can get breast cancer

Men don’t think of themselves as having breasts. For men, it’s their chest or their “pecs.” So it may come as a surprise to learn men are at risk of breast cancer.

The fact is men have breast tissue and can get breast cancer. In the U.S., more than 2,600 new cases of breast cancer are diagnosed in men and about 500 men will die from breast cancer each year.

You may be at risk

We don’t know what causes breast cancer to develop or who will get it, but what we do know is there are some things that may put a man at higher risk, such as:

- Older age
- BRCA 1/2 gene mutations
- Family history of breast cancer
- Gynecomastia (enlargement of breast tissue)
- Klinefelter’s syndrome (a genetic condition related to high levels of estrogen in the body)
- Being overweight or obese

Talk to a doctor about your risk of breast cancer.

Even if you have more than one risk factor, you may never get breast cancer. And men who have no known risk factors can still get it.

Don’t ignore it!

Most men don’t know they can get breast cancer. They may:

- Not tell a doctor because they’re embarrassed or worried.
- Ignore the warning signs that suggest something is wrong.
- Wait too long to get help.

Here’s what to look for:

Any change in the breast or nipple can be a warning sign of breast cancer. Talk to a doctor if you have any of these warning signs:

- You feel a lump, a hard knot or swelling in your breast, chest or underarm area.
- The skin on your chest dimples or puckers.
- Your nipple pulls in toward your chest wall.
- You see any redness or scaling on your nipple.
- There is a discharge coming from your nipple.

If you don’t have a doctor, call your health department, a clinic or nearby hospital.

Get the tests you need

If you have any warning signs, you may need to:

- Have your chest area checked by a doctor.
- Tell a doctor your medical history.
- Get an X-ray of your chest area.
- Have other tests, like an ultrasound or a biopsy. (An ultrasound uses sound waves to create a picture of your chest area. A biopsy is the removal of tissue to be tested.)

If Diagnosed

Don’t let the shock of the diagnosis distract you from the seriousness of this disease. Ask questions. Gather as much information as you can to help you make decisions about your treatment.

All men diagnosed with breast cancer should talk with their doctor about genetic testing.

Treatment can help

If tests show you have breast cancer, you will need treatment. Your treatment will depend on:

- The type of breast cancer you have.
- The stage of your breast cancer.

Treatment involves some combination of surgery, radiation, chemotherapy, hormone or targeted therapy.