

# Nipple discharge & fibroadenoma

Women may be concerned when reading descriptions of these two conditions, but rest assured that most cases are not serious.



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## Nipple discharge

This term refers to fluid emerging from the nipple, which could appear spontaneously or when the flesh around the nipple is squeezed. The discharge could be clear, milky or take on a range of colours — from yellow and green to brown and red. The viscosity of the fluid is also variable, from watery to sticky.

But the appearance of the fluid has no bearing on its severity. Discharges considered 'normal' are when they emerge from both nipples, and only when the flesh around the nipples is squeezed; discharges are considered 'abnormal' when they emerge spontaneously from only one nipple and contain blood.

It is quite normal for pregnant or nursing women to have nipple discharges — milky discharges can occur two to three years after a woman stops breastfeeding. Discharges in women who are neither breastfeeding nor pregnant may not necessarily be cause for alarm, but they should still see a doctor. In men, though, nipple discharge is highly unusual and warrants an in-depth analysis.

There are many other causes for nipple discharge, including endocrine disorders, hormone changes, fibrocystic breasts and — rarely — breast cancer. You should suspect breast cancer only if your nipple discharge contains blood, is spontaneous and persistent, affects only a single duct, and that breast contains a lump.

## Fibroadenoma

A classic sign of breast cancer is a lump in the breast. In the case of fibroadenoma,

the lump is benign, and can move easily under the skin when touched. The lump often feels rubbery and smooth, and is commonly painless, although it could be tender or painful when your period is about to begin. Fibroadenomas are common in young ladies, although they can occur at any age. Like nipple discharge, men can get fibroadenomas, although cases are few and far between.

There are different ways to classify these growths. Those termed 'simple' are 1–3cm in size, and their cells look relatively uniform when viewed under a microscope. Simple fibroadenomas do not place one at greater risk of developing breast cancer. On the other hand, the cells of 'complex' fibroadenomas have variable features. This type of fibroadenoma can increase one's risk of developing breast cancer slightly. When a fibroadenoma grows to more than 5cm in size, it is sometimes known as a 'giant'; those found in teenage girls may also be called 'juvenile'.

The jury is still out on what causes fibroadenoma. In women, the theory is that it is a reaction to the female hormone oestrogen. Diagnosis can be determined from a breast examination together with an ultrasound scan or a mammogram — usually enough for ladies in their 20s or younger. If there is doubt, a core biopsy or fine needle aspiration can be conducted to confirm the condition.

Most cases of fibroadenoma do not require any treatment at all, although surgery and vacuum-assisted excision are options for removing the growth.