

Breast cancer during pregnancy is very rare. It occurs in about one out of every 3,000 pregnant women. Breast cancer is the most common cancer in pregnant and postpartum women and occurs most often between ages 32-38.

Breast cancer during pregnancy is most often diagnosed after a lump is found in the breast. It can

be hard to find a lump because the breasts become large and change texture during pregnancy.

Also, many women can get breast cysts during pregnancy. It can be hard to tell the difference between normal changes related to pregnancy and breast cancer.

### What you may be thinking about

A breast cancer diagnosis during pregnancy is upsetting. At a time when you're awaiting the birth of your child, you are now forced to confront cancer. It is normal to feel sadness, anger or fear. Some of the most common concerns and questions are below.

- **Your Health** - *Can the cancer be treated?* Yes. Most breast cancer treatments can begin during pregnancy. Prognosis for women with breast cancer is similar to that of non-pregnant women, when age and cancer stage are taken into account. Ending a pregnancy does not improve prognosis.
- **Your baby's health** - *Will the cancer hurt my baby?* The breast cancer itself will not hurt the baby. You cannot "pass on" cancer to your baby. However, some breast cancer treatments can be harmful, such as radiation or hormone therapy, so they are not given during pregnancy. Your treatment is planned with the safety of you and your baby in mind.
- **Parenting** - *What if I'm too sick to care for my baby?* Talk with your doctor about your prognosis so you can make plans should you need help after the baby arrives.
- **Passing on the risk of breast cancer to your child** - *Will my child have a higher risk of getting breast cancer?* Most breast cancers are not inherited. Only about 5-10 percent are due to an inherited gene mutation (*BRCA1/*

*BRCA2*). If you have one of these gene mutations, but the child's father does not, your baby has a 50 percent chance of getting the mutation (half of a person's genes come from the mother, half from the father). If you have concerns about passing on a gene mutation, talk to your doctor or a genetic counselor.

If you don't have an inherited gene mutation related to breast cancer, your child will have a somewhat higher risk of getting breast cancer compared to someone with no family history of breast cancer.

- **Breastfeeding** - *Will I be able to breastfeed after a breast cancer diagnosis?* If you wish to breastfeed, talk with your doctor. Breastfeeding should be avoided while being treated with radiation therapy, chemotherapy, tamoxifen or HER2 targeted therapy. Some treatments (such as surgery and radiation therapy) may make it difficult to nurse from the treated breast.

## Treatment options

Treatment is based on the stage of your cancer and how far along you are in the pregnancy. Talk with your doctor to choose the best options for you and your baby.

Treatment Options	Stages of Pregnancy	
Surgery	Trimesters 1	Trimester 2 and 3
	Mastectomy is most often recommended.  Lumpectomy (breast conserving surgery) is recommended. Radiation therapy is needed with lumpectomy and radiation can harm the baby.	Can have lumpectomy if radiation therapy is delayed until after the baby is born (this does not worsen prognosis).
Radiation therapy	Trimesters 1, 2 and 3	
	Radiation therapy will harm the baby, so it's not given until after the baby is born.	
Chemotherapy	Trimester 1	Trimesters 2 and 3
	Chemotherapy can harm the baby.	Some chemotherapy drugs can be safely used during the second and third trimesters.  Chemotherapy should not be given after week 35 of pregnancy or within 3 weeks of the due date (or planned delivery date).  Women who are in the third trimester when diagnosed often wait until after the baby is born to have chemotherapy.
Tamoxifen and HER2 targeted therapies	Trimesters 1, 2, and 3	
	Tamoxifen and HER2 targeted therapies can harm the baby, so they're not given until after the baby is born.	



## Resources

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1-877 GO KOMEN (1-877-465-6636)

[www.komen.org](http://www.komen.org)

Hope for Two: Pregnant with Cancer Network

1-800-743-4471 [www.hopefortwo.org](http://www.hopefortwo.org)

Young Survival Coalition

1-877-YCS-1011 [www.youngsurvival.org](http://www.youngsurvival.org)

### Related fact sheets in this series:

- Diet and Nutrition During Treatment
- Genetics and Breast Cancer
- How Hormones Affect Breast Cancer Risk
- Making Breast Cancer Treatment Decisions
- Support After A Breast Cancer Diagnosis

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