

Breast lumps: What to know if you're under 35

Often seen in younger women, fibroadenomas are usually harmless but should still be checked, says breast surgeon Germaine Xu Guiqin



Fibroadenomas often feel smooth and mobile under the skin, unlike cancerous lumps that tend to be harder and fixed.

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Finding a lump in the breast can be worrying, especially for younger women. But not all breast lumps are cancerous. One of the most common types is fibroadenoma – a benign (non-cancerous) growth most often seen in women aged 15 to 35.

It is sometimes called “breast mouse” because it can feel like it moves under the skin, and is usually harmless and painless. However, some fibroadenomas may gradually grow larger, or change in texture or appearance on scans over time. In rare cases, it may be a sign of a more serious condition, which is why it is important to consult a doctor if you find a new lump, says Dr Germaine Xu Guiqin, breast oncoplastic and general surgeon at Mount Alvernia Hospital. Here, she explains why fibroadenomas develop and how they are treated.

Q What causes fibroadenomas, and how are they different from other breast lumps?

Fibroadenomas develop when breast tissue grows abnormally under the influence of hormones, particularly estrogen. This is why they are more common in younger women, and sometimes appear or grow during pregnancy. Genetics can also play a part, and certain rare conditions can make some women more likely to develop these lumps.

Most fibroadenomas are simple, but some can be more complex – especially in women over 35 – and may contain calcifications or cysts, sometimes enlarging over time. Larger growths, known as giant fibroadenomas, can exceed 5cm in diameter.

Unlike cancerous lumps that tend to feel harder and may feel fixed, fibroadenomas are usually smooth, firm, round and can move slightly under the skin.

To assess any new breast lump, your doctor may recommend an ultrasound, mammogram or biopsy to confirm what it is, and rule out other possibilities such as cysts, infections, fat necrosis or cancer.

Q How are fibroadenomas treated, and when is surgery recommended?

Fibroadenomas cannot be treated with oral medication – they are usually managed through observation or, if needed, biopsy or removal. If a lump appears clearly benign on ultrasound, and there is no family history of breast cancer, your doctor may suggest follow-up scans every six months.

Surgical removal may be recommended if the lump grows quickly, exceeds 3cm in diameter, causes discomfort or shows concerning features on scans. Smaller lumps under 2.5cm in size can sometimes be removed using vacuum-assisted biopsy through a tiny incision, while larger ones may require open surgical procedure.

In some cases, a repeat biopsy may be needed to confirm the diagnosis and rule out malignancy.

Q Can lifestyle changes help reduce the likelihood of developing fibroadenomas?

There are no specific lifestyle measures proven to prevent fibroadenomas. However, eating a balanced diet, exercising regularly and managing stress are all protective factors that may reduce the risk of breast cancer in general and support overall breast health.

It also helps to stay proactive. Performing regular breast self-examinations, attending screenings as advised, and sharing your family history with your doctor can ensure any changes are detected early and addressed appropriately.



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