

# INFORMATION FOR PATIENTS

## Breast Pain

Breast Pain is very common in women of all ages and there are several causes for this. This information sheet is to give further understanding of the types of breast pain and ways you can help to manage this yourself. It's helpful to know that breast pain on its own is extremely unlikely to be linked to breast cancer.

### Types of breast pain

There are two common types of breast pain:

- 1) cyclical and non-cyclical breast pain
- 2) chest wall pain.

Some women can have both types of pain at the same time.

### Cyclical breast pain

Pain affecting the breast is common in the days before a period, often accompanied by a feeling of fullness, heaviness, a burning, prickling, or stabbing sensation. The breasts may also be lumpier at this time. The pain (and lumpiness) tends to improve after the period starts. Cyclical breast pain can go away by itself but can also come back.

It is not known why some women have more troublesome cyclical pain than others. Dietary factors may contribute to this or recently starting on a new hormonal form of contraception or HRT.

### Non-Cyclical breast pain

This breast pain is not clearly linked to the menstrual cycle and the causes are unclear. It may be related to previous surgery or injury to the breast. Stress and anxiety can also be linked to breast pain.

Non-cyclical breast pain may come and go and often reduces and goes away by itself with time.

### Chest wall pain

Chest wall pain is the commonest cause of pain seen in the breast clinic. It may feel like it's coming from the breast but it's coming from the muscles and other structures of the chest wall behind the breast. The muscles of the chest run to the shoulder and the pain probably represents wear and tear in the muscles. In some women there is an obvious cause of the pain such as unaccustomed exercise, a heavy job, carrying a child, a neck or joint problem or using a stick.

The pain is often on one side in a specific area usually around the edge of the breast and can also be felt running towards the armpit. It may feel like a burning or stabbing pain and can be worse when you move. Often changing your activity to reduce the work done by the muscles may help.

Chest wall pain can take many months to improve.

Measures that may help cyclical and non-cyclical breast pain are:

- A supportive, well fitted bra, worn at night if necessary.
- A regular, balanced, low fat diet.
- Relaxation and mindfulness
- Minimising caffeine and alcohol intake.

Measures that may also help chest wall pain include regular exercise including Yoga or Pilates and pain relief gels (such as ibuprofen or diclofenac) applied directly to the affected area. These medications can also be taken in tablet form.

Before taking this pain relief medication, please take advice from your GP or local pharmacist to check that there are no other medical conditions that would prevent you from using them. Paracetamol can also be useful to help relieve breast pain.

Additional medications for treating **cyclical breast pain** include Evening Primrose Oil and Starflower oil although this is not prescribed by the GP. The oral contraceptive pill may make your breast pain better or worse. Very rarely hormone-based medications such as Tamoxifen will be prescribed by specialists for patients under their care.

If you find that managing your breast or chest wall pain is causing you ongoing concern then contact your GP practice for further support.

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