HEALTH BASICS

Breast development in boys

Breast development in boys is growth of gland tissue, most often during puberty.

WHAT IT IS
Growth of breast gland tissue in a boy

WHERE IT COMES UP
Most often during infancy or puberty

WHY IT MATTERS
Usually harmless, but sometimes needs medical assessment

WHAT IT IS NOT
Not automatically a disease or cancer

WHO TO ASK
GP, pediatrician, or pediatric endocrinologist

HOW IT IS CHECKED
Health history and physical examination

Overview

Boys have a small amount of breast tissue behind each nipple. This tissue can grow at certain stages of development. When gland tissue becomes enlarged, the medical term is gynecomastia .

Breast development can occur in newborn boys because of hormones transferred during pregnancy. It is also common during puberty, when hormone levels are changing. It may affect one or both sides. One side can begin growing before the other.

The area may look like a puffy nipple or feel like a small, firm, rubbery disc directly beneath it. It can be sensitive when touched. These changes are not, by themselves, a disease or a sign that a boy is becoming less masculine.

Breast gland growth is different from extra fatty tissue on the chest. Fat-related enlargement is sometimes called pseudogynecomastia or lipomastia . A clinician can usually tell the difference by examining the chest.

How it works

All bodies make both testosterone and estrogen. Testosterone supports changes such as a deeper voice, facial hair, and increased muscle during male puberty. Estrogen helps breast gland tissue grow.

During puberty, these hormones do not always rise at the same rate. Breast tissue may temporarily respond to the changing balance between estrogen and testosterone. This does not necessarily mean that the body is making an abnormal amount of either hormone.

The amount and timing of growth differ between boys. It may happen early, in the middle, or later in puberty. For many boys, the tissue becomes less noticeable as hormone levels settle and the chest develops.

Newborn breast development has a different cause. Hormones from the pregnant parent can cross the placenta before birth. After birth, the newborn's exposure to those hormones falls. The breast tissue then changes over time without being part of puberty.

Why it matters for your health

Typical pubertal breast development does not usually damage physical health. By itself, it does not reduce fertility, change sexual orientation, or mean that puberty is developing incorrectly.

It can still matter emotionally. A boy may feel embarrassed when changing clothes, swimming, or taking part in sports. Teasing and unwanted comments can affect confidence. These concerns deserve to be taken seriously even when no medical treatment is needed.

An assessment can help confirm whether the area is ordinary gland tissue, chest fat, or another type of lump. It can also identify the less common situations in which breast growth is related to a medicine, hormone condition, or another health problem.

What can go wrong

Breast development itself is not an illness. However, several conditions or situations can cause unusual breast growth or produce a lump that looks similar.

These include:

Arrange a routine medical appointment if the change began before other signs of puberty, is getting larger quickly, remains a concern, or is causing significant distress. An appointment is also appropriate for a hard or off-centre lump, nipple discharge, skin dimpling, an underarm lump, or a change mainly affecting one side.

Tell the clinician about headaches, vision changes, unexplained weight change, delayed

puberty, or a testicular lump. These details do not prove there is an underlying condition, but they can guide the assessment.

Seek urgent, same-day care if the breast becomes rapidly red, hot, very painful, or swollen, especially with fever or pus. This may indicate an infection.

Breast development alone is rarely an emergency. Sudden, severe testicular pain is an emergency because it may be testicular torsion, in which the testicle twists and loses its blood supply.

- Medicine-related gynecomastia , linked to certain prescription medicines
- Anabolic steroid or hormone use , including unregulated bodybuilding products
- Hypogonadism , meaning the testes make too little testosterone
- Thyroid, liver, or kidney disease , which can affect hormone balance
- Testicular, adrenal, or pituitary conditions , including uncommon hormone-producing tumors
- Lipomastia , which is extra chest fat rather than enlarged gland tissue
- A breast infection or abscess , which can cause warmth, redness, and swelling
- Breast cancer , which is very uncommon in children but can cause a different type of lump

What you can do

There is usually nothing you need to do to stop ordinary pubertal breast development. Repeatedly pressing or checking the area can make it more tender and may increase worry.

If you are preparing for an appointment, keep a brief record of:

Do not stop a prescribed medicine without advice. Ask whether the medicine could contribute and whether an alternative is appropriate.

A clinician will usually ask about development, health conditions, family history, medicines, and substance use. The examination may include the chest, abdomen, signs of puberty, and testicles.

When the finding fits ordinary pubertal development, tests may not be needed. If the pattern is unusual, tests can include blood tests for hormones, thyroid function, liver function, or kidney function. Ultrasound may be used to examine a breast or testicular lump. Breast imaging is not routinely needed for every boy.

Weight loss may reduce chest fat when extra fat is present, but it does not directly remove breast gland tissue. Exercise can strengthen chest muscles but cannot target gland tissue.

For persistent tissue that causes substantial distress, ask about referral to a pediatric endocrinologist or another appropriate specialist. Treatment decisions are based on the cause, duration, stage of development, and impact on daily life. Medicines or surgery are considered only in selected circumstances after an individual assessment.

- When the change was first noticed
- Whether it affects one or both sides
- Whether it is growing or changing
- Any nipple discharge, skin change, or testicular concern
- All medicines, supplements, hormones, and bodybuilding products used

Common questions

Is it normal for only one side to develop?

Yes. One side may begin earlier or become larger than the other. A clearly hard, fixed, off-centre, or rapidly enlarging lump should still be examined.

Does touching the area make it grow?

No. Touching does not cause gland tissue to grow. Frequent pressing can make the area sore or irritated.

Does breast development mean testosterone is low?

Not necessarily. Typical pubertal development can happen while testosterone levels are changing normally. Testing is considered when the examination or other features suggest a hormone problem.

Can food cause breast development?

Ordinary foods are not a usual cause. Be cautious with unregulated supplements, bodybuilding products, and products marketed as hormone boosters. Their ingredients may be uncertain.

Will a compression shirt help?

A well-fitting compression garment may make the chest less noticeable under clothing. It does not change the tissue itself. It should not be so tight that it causes pain, skin problems, or trouble breathing.

Should the area be massaged?

No. Massage has not been shown to reduce gland tissue and may increase tenderness.

Sources

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