CONDITION

Fibroadenoma of the breast

A fibroadenoma is a solid, noncancerous breast lump made from gland and supporting tissue.

WHAT IT IS
Common noncancerous solid breast lump

BODY SYSTEM
Breasts

MAIN SYMPTOMS
Firm lump, smooth edges, easy movement, occasional tenderness

WHAT CAUSES IT
Unknown; likely hormone-sensitive breast tissue growth

HOW IT IS DIAGNOSED
Breast examination, imaging, and sometimes needle biopsy

MAIN TREATMENT
Monitoring or removal

CAN IT BE CURED?
Sometimes - may shrink naturally or be completely removed

IS IT AN EMERGENCY?
No - but every new breast lump needs assessment

LONG-TERM OUTLOOK
Usually harmless; many shrink or remain stable

Overview

A fibroadenoma is a noncancerous, solid lump in the breast. It develops from gland tissue and the supporting tissue around it. It may be called a benign breast tumor, but "tumor" simply means an abnormal growth. It does not automatically mean cancer.

Fibroadenomas often feel firm, smooth, and easy to move under the skin. They are especially common in teenagers and younger adults, although they can occur at any age and in anyone with breast tissue.

Most fibroadenomas do not cause serious health problems. Some remain the same size for years, while others shrink or disappear. A lump may grow during pregnancy or other periods of hormonal change.

A new breast lump should still be assessed. A clinician cannot reliably identify every lump by touch alone. Breast cysts, normal tissue changes, and other growths can feel similar. Imaging, and sometimes a tissue sample, can show whether a lump has the features of a fibroadenoma.

Symptoms

A fibroadenoma usually causes a single lump in one breast. Some people have more than one lump or develop fibroadenomas in both breasts.

The lump often:

Its size can range from very small to large enough to change the breast's shape. You may notice tenderness around your period, although pain is not usually the main symptom.

Some fibroadenomas grow slowly. Others change size when hormone levels shift, including during pregnancy. After menopause, they often shrink, particularly if you are not taking hormone therapy.

These features can suggest a fibroadenoma, but they do not confirm one. Breast cancer can sometimes present as a painless lump, and many noncancerous conditions can also cause breast changes. Arrange an assessment for any new lump, even if it feels smooth or movable.

- Feels round or oval, firm, and rubbery
- Has smooth, clearly defined edges
- Moves slightly when pressed
- Causes little or no pain

Causes and risk factors

The exact cause is unknown. Fibroadenomas appear to be sensitive to hormones, especially estrogen, which helps control the growth and function of breast tissue.

They are more likely to appear during the reproductive years, when hormone activity is higher. They may enlarge during pregnancy and commonly become smaller after menopause.

Having one fibroadenoma can make it more likely that you will develop another. This does not mean that the first lump has spread. Each fibroadenoma is a separate area of tissue growth.

A fibroadenoma is not caused by wearing a particular type of bra, touching the breast, or having a minor breast injury. There is no good evidence that a specific food causes it.

Diagnosis

The assessment usually begins with questions about when you noticed the lump, whether it has changed, and whether you have other breast symptoms. Your personal and family history of breast conditions may also affect which tests are appropriate.

A clinician will examine both breasts and the nearby lymph nodes. They will check the lump's size, shape, texture, and movement.

Imaging helps show whether the lump is solid or filled with fluid. Ultrasound uses sound waves to create an image and is often the first test used in younger people. Diagnostic mammography uses low-dose X-rays and may be used based on your age, symptoms, and breast cancer risk. Some people need both tests.

If the examination and imaging show typical benign features, a biopsy may not be necessary. A biopsy is more likely when the result is uncertain, the lump is growing, or the clinical examination and imaging do not agree.

During a core needle biopsy, a hollow needle removes small samples of tissue. A laboratory specialist examines them under a microscope. Local anesthetic is used to numb the area.

One reason for biopsy or removal is to distinguish a fibroadenoma from a phyllodes tumor. A phyllodes tumor is another solid breast growth that can look similar on imaging. Most phyllodes tumors are noncancerous, but they are usually managed differently.

Treatment and management

Many fibroadenomas do not need treatment after the diagnosis is clear. Monitoring may involve breast awareness, clinical review, or repeat imaging. The follow-up plan is based on your age, the lump's features, any changes, and the level of certainty about the diagnosis.

There is no medicine that reliably makes a fibroadenoma disappear. Pain relievers may help occasional tenderness, but they do not treat the lump itself.

Removal may be considered when a fibroadenoma:

Surgical removal is called an excision. The lump is removed through a cut in the breast and examined in a laboratory. Surgery can leave a scar or a small change in breast shape. Removing a fibroadenoma does not prevent a different one from developing later.

Some centres offer less invasive procedures for selected, confirmed fibroadenomas. Vacuum-assisted excision removes tissue through a small cut using a special needle. Cryoablation destroys the lump by freezing it. Availability and suitability depend on the lump's

size, position, and confirmed diagnosis.

Your preferences matter. If observation and removal are both reasonable, the discussion should include how certain the diagnosis is, whether the lump is changing, and the possible benefits and effects of a procedure.

- Is large, uncomfortable, or changing the breast's shape
- Continues to grow or grows quickly
- Has uncertain biopsy or imaging findings
- Causes substantial ongoing concern
- Is difficult to distinguish from a phyllodes tumor

Complications

Most fibroadenomas cause no physical complications. A large lump can create discomfort, breast asymmetry, or pressure on nearby tissue. Even a harmless lump can also cause significant worry.

A simple fibroadenoma does not appear to meaningfully increase breast cancer risk for most people. A complex fibroadenoma contains additional tissue changes seen under a microscope and may be associated with a small increase in future risk. Other findings in the surrounding breast tissue and your family history may be more important than the fibroadenoma itself.

Cancer arising within a fibroadenoma is very rare. A diagnosis of fibroadenoma does not mean that future breast changes should be ignored. A new or changing lump still needs assessment.

Procedures can cause bruising, bleeding, infection, scarring, or changes in breast contour. These risks are generally discussed before biopsy or removal.

Prevention

There is no known way to prevent a fibroadenoma. Its development appears to be linked to how breast tissue responds to hormones, not to something you did.

Breast self-awareness and screening do not prevent fibroadenomas, but they can help detect changes. Follow the breast screening schedule recommended for your age and personal risk. A fibroadenoma does not automatically mean that you need more frequent screening.

Living with it and what to expect

Over months or years, a fibroadenoma may remain unchanged, grow slowly, or become smaller. Some disappear without treatment. Hormonal changes can make the lump more noticeable or tender at certain times.

Pregnancy can cause a fibroadenoma to enlarge. It may shrink again after pregnancy or breastfeeding, but this cannot be guaranteed. A fibroadenoma usually does not affect fertility or the ability to breastfeed. Breast surgery may sometimes affect nearby milk ducts, depending on the lump's position and the type of procedure.

After menopause, fibroadenomas commonly shrink as hormone levels fall. A lump that is new or growing after menopause still needs careful assessment rather than being assumed to be a fibroadenoma.

You may continue normal exercise, work, and sexual activity. There is usually no medical need to limit activity. If the lump is tender, a supportive bra or avoiding direct pressure may improve comfort.

Having one removed does not guarantee that you will never have another. A new lump may be a separate fibroadenoma, but it should be checked rather than assumed to be the same condition.

When to get medical help

Arrange a routine appointment soon if you find a new breast or armpit lump. Also seek review if a known fibroadenoma becomes painful, changes shape, or seems to be getting larger. These changes often have noncancerous causes, but they should be assessed.

Ask for more urgent medical assessment if you notice:

A fibroadenoma itself is almost never an emergency. Seek emergency care if breast redness or swelling is spreading quickly and you are seriously unwell, confused, faint, or having difficulty breathing. These symptoms could indicate a severe infection or another urgent condition rather than a fibroadenoma.

- Rapid enlargement of a breast lump
- New skin dimpling, thickening, or nipple pulling inward
- Bloody or clear discharge from one nipple
- A new firm lump in the armpit
- Breast redness, heat, and swelling, especially with fever

Common questions

Is a fibroadenoma cancer?

No. A fibroadenoma is a benign, meaning noncancerous, breast growth. Tests may still be needed because other breast lumps can feel similar.

Can a fibroadenoma turn into breast cancer?

This is very uncommon. A simple fibroadenoma is not considered a precancerous growth. Complex fibroadenomas and certain changes in nearby tissue may be linked with a small increase in future breast cancer risk, which should be considered alongside your wider personal and family history.

Does a fibroadenoma have to be removed?

Not always. If the examination and imaging are clearly consistent with a fibroadenoma, monitoring may be enough. Removal may be appropriate if it grows, causes symptoms, changes the breast's shape, has uncertain test results, or continues to cause significant concern.

Can a fibroadenoma go away on its own?

Yes, some shrink or disappear over time. Others remain stable for many years. There is no reliable way to predict exactly what an individual lump will do.

Can pregnancy make a fibroadenoma bigger?

Yes. Hormonal changes and normal breast growth during pregnancy can make it enlarge. Any change during pregnancy should still be discussed with your maternity or breast care team. Ultrasound can usually assess a breast lump without exposing you to radiation.

Can a fibroadenoma come back after removal?

The removed lump does not grow back if it was completely excised, but another fibroadenoma can develop in the same breast or elsewhere. Any new lump needs its own assessment.

Sources

- American College of Radiology. ACR Appropriateness Criteria: Palpable Breast Masses . Revised 2022.
- American Cancer Society. Fibroadenomas of the Breast .
- Breast Cancer Now. Fibroadenoma .

- Mayo Clinic. Fibroadenoma: Symptoms and causes; diagnosis and treatment .
- Kopkash K, Yao K. The surgeon's guide to fibroadenomas . Annals of Breast Surgery. 2021;5:15.
- Greenberg R, Skornick Y, Kaplan O. Management of breast fibroadenomas . Journal of General Internal Medicine. 1998;13(9):640-645.