Invasive lobular breast cancer

Useful information

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You can view this information in a larger print on our website.

What invasive lobular breast cancer is

Around 1 in 10 breast cancers diagnosed (10%) are invasive lobular carcinoma. This means that the cancer started in the cells that line the lobules of the breast and has spread into the surrounding breast tissue. Invasive lobular cancer can develop in women of any age. But it is most common in women between 45 and 55 years old.

Remember that if your doctor has told you that you have lobular carcinoma in situ (LCIS), you do not have invasive lobular breast cancer. These are two different things. You can find information about LCIS in this section.

The outlook for invasive lobular breast cancer is much the same as for ductal breast cancer. If breast cancer is diagnosed in both breasts at the same time it is more likely to be lobular breast cancer than ductal breast cancer. And if you have invasive lobular breast cancer diagnosed in one breast, there is a slightly higher risk of getting it in the other breast in the future.

Symptoms and diagnosis

Invasive lobular breast cancer does not always form a firm lump. And it may not always show up on mammograms. So it can be difficult to diagnose. Because of this, invasive lobular cancers may be larger than other types of breast cancer when they are diagnosed. You may have a thickened area of breast tissue instead of a definite lump.

Treatment for invasive lobular breast cancer

The treatment for invasive lobular breast cancer is the same as for the more common type of breast cancer (ductal breast cancer). Usually, you have surgery to remove the area of cancer and a surrounding area of healthy tissue (wide local excision).

Invasive lobular breast cancer is sometimes found in more than one area within the breast. In that case, it may not be possible to remove just the area of the cancer. Your doctor may then recommend removal of the whole breast (a mastectomy). If you choose to, you can have a new breast made (breast reconstruction) at the same time as mastectomy or some time afterwards.

After the surgery you may be offered radiotherapy, chemotherapy, or biological therapy or a combination of treatments. You may also have hormone therapy if your breast cancer cells are oestrogen receptor positive.
For more information, visit our website http://www.cruk.org/about-cancer

You will find a wide range of detailed, up to date information for people affected by cancer, including a clinical trials database that you can search for trials in the UK. Our information is based on the best current scientific evidence and reviewed regularly by leading clinicians and experts in health and social care.

For answers to your questions about cancer call our Cancer Information Nurses on 0808 800 4040 9am till 5pm Monday to Friday.

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