



Northumbria Healthcare
NHS Foundation Trust

Granulomatous Mastitis

Issued by the Breast Team

You have been given this leaflet as tests show that you have Granulomatous Mastitis. This leaflet gives you some information about the condition, how it is diagnosed and treated.

What is Granulomatous Mastitis?

Granulomatous Mastitis is a rare, non-cancerous (benign), breast disorder, the causes of which are not yet fully understood.

The condition is more common in younger women, following a pregnancy, suggesting this may be related to female hormones but it can also be associated with some kinds of infection and some types of medication. Sometimes we are unable to find a cause.

Granulomatous mastitis can be difficult to diagnose, as it mimics mastitis, breast abscess, and breast cancer. This means that occasionally several tests are required to confirm the diagnosis.

It can last a number of months and can recur in the same or opposite breast. There may be periods where the condition becomes worse or seems to remain unchanged.

You have been referred to the breast clinic because your GP wants you to have further assessment and investigation. When you attended the breast clinic you will have had an examination, mammogram, and ultrasound scan.

How is it diagnosed?

Granulomatous Mastitis can present with a lump in the breast. There may be associated inflammation, pain, swelling of the skin (oedema), and skin ulceration.

Once you have had your examination, mammogram, and ultrasound scan a biopsy will have been taken to confirm the diagnosis of Granulomatous Mastitis. If pus is present in the breast when you had your ultrasound scan, this will have been sent for analysis to ensure there is no underlying infection.

Treatment and follow up

According to research, approximately half of all women find the condition gets better without any treatment. However, 50% of patients experience recurrences and therefore long-term follow up may be necessary.

Granulomatous Mastitis causes inflammation around the lobules of the breast. Treatment initially will include observation of your breast by your breast team until your symptoms improve. This will be every two to six weeks. Antibiotics will be used to try and treat the inflammation. As Granulomatous Mastitis can take a long time to get better a number of different types of antibiotics may be used. Steroids and drugs that suppress your immune system may be used if the condition does not respond to antibiotics. However, given the potential for severe side effects with long term use of these drugs, we must balance the benefit of using them, with the need to avoid causing complications from the treatment. The medical treatment in general can help either in treating the condition completely or reduce the size of the lesion so they are suitable for lumpectomy.

Surgery is sometimes used if there is not a complete response to the previous treatments. This could be in the form of lumpectomy and sometimes even mastectomy. In cases of mastectomy reconstruction of the breast is usually discussed.

Alternative Formats

If you would like a copy of this information in large print, another language, audio tape or other format please call the Contact Centre on 03 44 811 8118.

Other sources of information

NHS 111

NHS Choices

www.nhs.uk/pages/homepage.aspx

NICE (National Institute for Health and Clinical Excellence)

www.nice.org.uk

Patient Advice and Liaison Service (PALS)

Freephone: 0800 032 0202

Text: 07815 500015

Email: northoftynepals@nhct.nhs.uk

Northumbria Healthcare NHS Foundation Trust

General Enquiries 03 44 811 8111

www.northumbria.nhs.uk

PIN 748/V2

Review date: April 2024

© This material is the copyright of the Northumbria Healthcare NHS Foundation Trust.