

REPORT 2 OF THE COUNCIL ON SCIENCE AND PUBLIC HEALTH (A-09)  
Male Breast Cancer  
(Resolution 105, A-08)  
(Reference Committee E)

EXECUTIVE SUMMARY

**Objectives.** Male breast cancer (MBC) is extremely rare, with an incidence in the general U.S. population of less than 1%. Mammography in men is therefore utilized as a diagnostic tool to evaluate breast symptoms rather than as a tool for widespread screening for MBC. However, there is some disagreement about the role of mammography in diagnosing both malignant and benign male breast disease. This report reviews MBC and its risk factors, current national guidelines for screening and diagnosis, and the roles of mammography and genetic testing in surveillance and management.

**Data Sources.** Literature searches were conducted in the PubMed database for English-language articles published between 2000 and 2009 using the search terms “male mammography,” “male breast AND cancer,” and “male AND *BRCA*.” Additional articles were identified by review of the literature citations in articles identified using PubMed. The Web sites of Gene Reviews, the U.S. Preventive Services Task Force, the National Comprehensive Cancer Network, the American Cancer Society, the National Cancer Institute, and BreastCancer.org were also consulted for information.

**Results.** MBC accounts for less than 1% of all male cancers. It tends to be diagnosed at later stages than breast cancer in females, likely because of low awareness on the part of the patient and low suspicion by the physician. Despite its rarity, men with certain risk factors are more likely to develop MBC. Risk factors include genetic predisposition, alterations to the estrogen-testosterone ratio, radiation exposure, and occupational hazards. Guidelines for men with genetic predisposition, such as a known *BRCA* mutation or a strong family history of breast cancer, recommend surveillance methods that include clinical breast examination, breast self-examination, mammography, and genetic testing. While clinical breast examinations are effective at evaluating breast symptoms, mammography also may be beneficial in separating malignant from benign breast disease. *BRCA* mutations are linked to a number of other cancers in men, each with respective screening and surveillance recommendations.

**Conclusions.** MBC is rare, but heightened awareness of the increased risk in certain men by both physicians and patients, and adherence to guidelines recommended for the surveillance of men at increased risk, may result in earlier detection. Our American Medical Association supports efforts to educate men and their families about the risk of MBC, supports guidelines for the surveillance of men at increased risk for MBC, and supports insurance coverage for MBC surveillance and diagnostic methods.