

Gynaecomastia

RFQs

- Would you mind me asking you how much you drink?
- Have your testicles changed, or have you lost any body hair, or lost your interest in sex?
- Have you noticed any discharge from your nipples? Do you have a family history of breast cancer?
- Do you use any medications, including steroids, recreational drugs or complementary therapies that might be responsible?
- How are you emotionally? How is your mood? Is your body shape dominating your life?

Provide

I agree that you have a little extra breast tissue and that this is not just you being overweight. Losing weight will still help. Would you like any support with that?

None of your prescribed medication seems to be responsible.

(Antiandrogens, Calcium channel blockers, Spironolactone, Antiretrovirals for HIV, PPIs, H2 receptor antagonists especially cimetidine, Ketoconazole (oral), Opiates - including codeine and tramadol, Antipsychotics, Recreational drugs, e.g. cannabis, anabolic steroids, Alcohol, Occupational exposure to phthalates)

Do you use any other preparations including steroids? What about recreational drugs, or pain killers? Would you mind me checking your testicles (as well as your breasts)?

We should probably do some blood tests (LFTs, TSH, U+Es, 9am testosterone), would that be OK?

It might be possible to reduce your breast size by blocking your oestrogen receptors. Do you have a family history of clots (in the legs or the lungs)? Tamoxifen, a treatment that we commonly use in breast cancer can be helpful, but it does slightly increase your risk of getting clots in your legs or lungs (used over 5 years it causes 4-7 excess clots per 1000 women with breast cancer). The risk is very small over a 3 month treatment period. Would you be interested in that? Most patients get a worthwhile benefit. We would normally treat you for about 3 months.

Of course, we would need to see you if you are getting breathless, or if you have a tender swelling in your calf. If you become breathless out of the blue, call 999.

It's unlikely that you would get surgery to remove breast tissue on the NHS, but we could ask if you like.

Breast tissue enlargement is normal for some boys in puberty (and babies after birth), and it normally improves, without treatment (90% of the time), within a couple of years (a few months in babies). But it is worth avoiding weight gain.

Safety net:

I definitely need to see you if you have a new lump in your breast, or if you have a discharge from your nipple.

Let me see you again: if this is getting on top of you, or if you lose your sex drive.

We should talk again if you are struggling to control your drinking (or weight), or if you can't manage at least 3 alcohol free days per week.