

CHECK YOUR MELONS



Before you eat a melon, you give it a quick look to make sure it's ripe and delicious. Whether the skin is a bit bruised or off-colour, there are strange spots on it, or there's obvious damage on its surface, it's the best way to make sure the melon is still good before you take a bite.



But the melons that grow from soil aren't the only ones you should inspect - the melons on your chest need to be checked too!

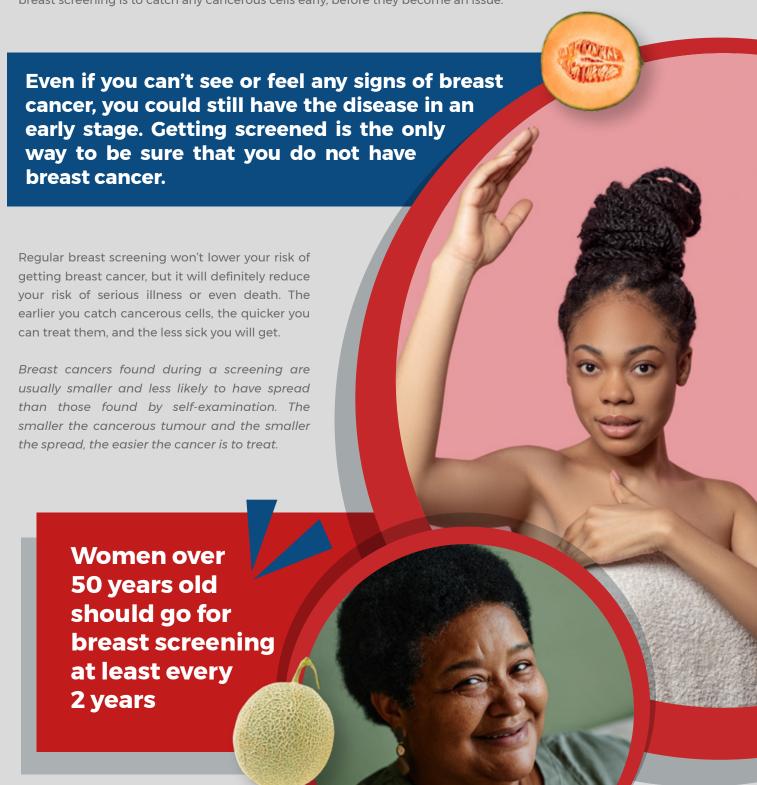
There are many ways to check your melons. All women should conduct regular self-examinations – around once a month – to look for lumps, changing shapes and other warning signs. And to be 100% sure that your melons are fresh and healthy, breast screening at an established healthcare facility will ensure that you can catch any problems early, before they become serious.

Regular breast screening is one of the best ways to catch breast cancer early, as this method can detect cancer that is too small to feel or see

Let's think about melons again. Have you ever checked a melon so thoroughly that you are completely sure that it's ripe and ready to eat - only to cut into it and find out that it has gone bad?

The same thing can happen to your breasts. Even if you can't feel or see any signs of breast cancer, there might be cancerous cells starting to grow, and the best way to catch them before they become serious health issues is breast screening.

Breast screening is when a certified healthcare professional checks a woman's breasts for cancer. The purpose of clinical breast screening is to catch any cancerous cells early, before they become an issue.





What are the signs of breast cancer?

Whether you have gone for a recent screening or not, you should check your own melons at least once a month.

These are the signs to look out for when conducting a self-exam.



Hard lump

 The most common sign of breast cancer - feels like a hard seed that cannot be moved, deep in the breast



Thick area

A part of the breast that feels less 'squishy' and more 'dense'



Dimple

 An indentation, or a part of the skin of the breast that is being 'pulled in'



Nipple crust

 A scab-like red or white crusted surface that may be sore, and that doesn't go away



Red or hot

 Breasts feel warm or hot, sometimes with a pink or reddish purple colour



New fluid

Clear or bloody fluids leaking from the nipple



Skin sores

 Sores or open wounds on the breast, sometimes with a bad smell or leakage



Bump

 A hard lump on the surface of the breast, especially new bumps



Growing vein

 New blood vessels (veins) appearing on the breast which grow in size



Sunken nipple

 Some nipples are sunken from birth, and this is normal – but if your nipple starts to sink or turn, it could be a sign of breast cancer



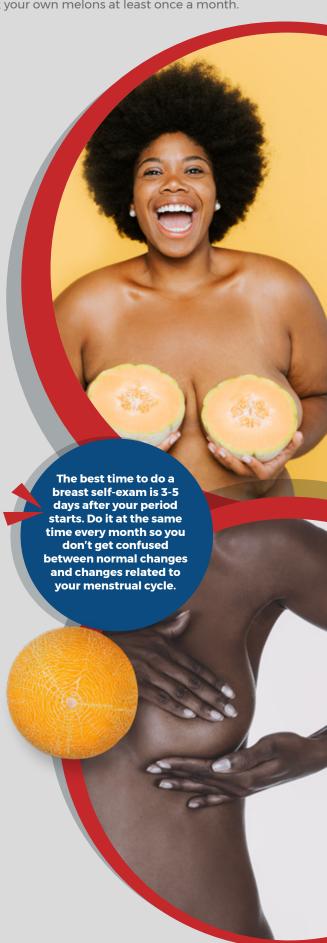
New shape or size

 One breast changing size, flattening, swelling or drooping without an explanation



Orange peel skin

 Breast skin starts to look and feel like the peel of an orange





Who should go for clinical screening?

The below guidelines are for women who have an 'average risk' of breast cancer. A woman has an average risk if:



She doesn't have a personal history of breast cancer



Her family doesn't have a strong history of breast cancer



Her family doesn't have a genetic mutation known to increase the risk of breast cancer



She has not had chest radiation therapy before the age of 30

For those with average risk, the recommended screening frequencies are:



40-44 years old:

Can start screening every year



45-54 years old:

Once a year



Either once a year or once every 2 years

