Is Nipple Discharge a Sign of Menopause?

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Understanding Perimenopause Nipple Discharge

For the perimenopausal woman, nipple discharge can be frightening. It may have been years since breastfeeding a child (if at all!) — so why could this be happening?

As it turns out, there are a variety of reasons for nipple discharge; and most reasons for nipple discharge are not serious. Please continue reading for an explanation of some of the more common reasons for nipple discharge during perimopause.

Ectasia

As women age, the mammary ducts dilate. This dilation of the milk glands is normal and is called *ectasia.*

Sometimes the process of ectasia can cause blockage of the milk ducts. Blockage of the milk ducts then leads to pooling of fluid into surrounding tissue, which may subsequently cause infection. An infection draws the nipple inward, also causing pain and thick nipple discharge.

Treatment includes administration of antibiotics, and in some instances, surgery to remove breast ducts.

Intraductal Papilloma

An intraductal papilloma is a small structure, similar to a wart, that appears near breast ducts. Their location near breast ducts causes discharge from the nipple; the discharge is sticky, and may be bloody if the breast is bumped as the papilloma bleeds easily.

Treatment for an intraductal papilloma is surgical removal of the duct. This is done if the papilloma is bothersome; however, if the papilloma also is associated with a breast lump, the duct must be removed.

Breast Self-Examination

Some methods of breast self-examination instruct the woman to squeeze the breast. This is often not recommended anymore by breast specialists, because studies show that half over half of woman (and in some studies, up to 85 percent) are able to elicit nipple discharge.

When nipple discharge is elicited due to stimulation, it is generally a benign response.

Medications

There are several medications that may elicit nipple discharge from women. Examples include hormone

replacement therapy (HRT), birth control pills, and anxiety medications.

This may be caused by the release of cortisol and oxytocin. Generally, this is a benign response.

Prolactinoma

A prolactinoma is a tumor of the pituitary gland, caused by elevated levels of the hormone prolactin. When prolactin levels elevate and a prolactinoma is formed, milky discharge flows from the nipples; this is called *galactorrhea.*

A prolactinoma is typically managed by medication and/or observation by serial MRIs. A woman with a prolactinoma is typically seen by both a neurosurgeon and an endocrinologist. They rarely require surgical intervention.

Galactorrhea can also be caused by the consumption of certain herbs, such as anise and fennel, hypothyroidism, and certain drugs, such as marijuana.

Nipple Infections

As with other areas of the body, the nipples can become infected. Nipple infections will often cause nipple discharge.

Typically, nipple infections are treated initially antibiotics. However, they can be difficult to heal and women often require surgery in order to drain the infection from the nipple.

These infections can recur, even with surgical infection. Nipple infections are most likely to occur in women who are smokers or who are exposed to second-hand smoke, so quitting smoking if suffering from a nipple infection can decrease the chance of recurrence.

Breast Cancer

While most causes of nipple discharge in the perimenopausal women are benign, occasionally the nipple discharge is caused by something no one wants to hear — cancer.

Two common types of breast cancer that may cause nipple discharge are intraductal carcinoma and Paget's disease.

Intraductal carcinoma is a type of breast cancer that occurs specifically in the ducts of the breasts. Paget's disease also begins in the ducts but travels to the nipples. This type of breast cancer typically occurs along with another type of breast cancer.

The good news is nipple discharge is rarely a sign of breast cancer. In fact, less than two percent of people with nipple discharge will have cancer.

However, there are special circumstances when women should take their nipple discharge seriously and see a doctor as soon as possible:

- When the discharge is from only one nipple
- When the discharge occurs without stimulation
- When the discharge is sticky and clear OR bloody
- When the discharge occurs in a woman older than 60 who is not prescribed hormones
- When the discharge occurs with a lump in the breast

Diagnostic Studies for Nipple Discharge

The type of study performed will depend on the presenting symptoms. However, there are a variety of different ways (aside from a mammogram and biopsy) a breast specialist may thoroughly perform a work up of the nipple discharge:

- **Smear of the discharge:** a smear will test or atypical cells. If read as benign, a less invasive work up is indicated.
- **Ultrasound:** identifies issues in the ducts.
- **Ductogram:** will identify a blockage in the duct. A ductogram is performed by inserting a small catheter into a duct, along with contrast dye. A mammogram is then performed, which will allow outlining of the ductal system.
- **Ductal lavage:** a new procedure, ductal lavage uses a catheter inserted into a duct along with lidocaine. Fluid is injected in order to rinse out the duct. When the fluid is aspirated, it is sent for testing.