



RED BREAST, RASH OR SWELLING? RULE OUT IBC.

➤ *A Quick Reference for Healthcare Professionals*

What is Inflammatory Breast Cancer? IBC is a **rare but aggressive** form of breast cancer that often presents without a lump and progresses rapidly. You may be the first, *and sometimes only*, clinician a patient sees before a serious delay occurs. **Prompt recognition in primary care, urgent care, and perinatal settings**, where patients often present first is critical to improving outcomes.

Step 1: Clinical Suspicion

- **Rapid onset breast changes < 6 months:**
 - Diffuse redness, rash or swelling
 - Erythema or changes in the colour of the breast skin
 - Peau d'orange
 - Skin edema or thickening
 - Nipple flattening or inversion
 - Breast pain, warmth or itching
 - Swollen lymph nodes near axilla or collarbone
- **Often no distinct palpable lump**
- Symptoms involve > 1/3 of the breast
- Absence of associated infection markers (elevated WBC, fever, etc.) that could explain symptoms
- IBC may mimic infection but does not resolve with antibiotics



Step 2: Diagnostic Work-Up

- Order **bilateral mammogram + ultrasound** (if within scope)
- If inconclusive or suspicion remains, advocate for **MRI + biopsy referral**
- Document baseline photos of changes
- **Escalate quickly** to breast surgeon/oncology – don't "wait and see" (not every postpartum "mastitis" is infection)



Key Clinical Insights

- **IBC disproportionately affects Black women and is often misdiagnosed or diagnosed late.**
- IBC is always an advanced-stage diagnosis (Stage III or IV)
- Rapid progression or skin involvement > 1/3 of the breast = urgent referral
- IBC skin changes often appear before imaging is conclusive and vary among patients - trust your clinical judgment
- **If symptoms fail to improve within 7-10 days of antibiotics → escalate immediately**
- Delays in diagnosis significantly reduce survival.



IBC



Mastitis

- Can occur at any age
- **No fever or infection markers**
- **Diffuse breast changes (>1/3)**
- **Rapid** onset and progression
- Does **not** improve with antibiotics
- Often **no palpable lump**

- Common in pregnancy & lactation
- Often accompanied by fever and elevated WBC
- **Localized** breast changes
- Typically **improves with antibiotics**

For more IBC tools & resources visit:
ibcnetworkcanada.org/health-professionals

