Reproductive Choices Affect Risk of Breast Cancer

Breast cancer incidence has increased over 50% since 1972. Young women’s reproductive choices may be contributing significantly to this rise.

Which reproductive choices affect young women’s risk for future breast cancer?

1. **Childbearing**: Choosing to avoid ever having children, or to even delay childbearing beyond 30 years of age can increase a woman’s risk for breast cancer.¹

2. **Abortion**: Choosing to have one or more induced abortions, especially prior to having a live born child, increases the risk of breast cancer. The risk is greater with more induced abortions, and with abortions done beyond 10 weeks of pregnancy.² Choosing adoption in an unwanted pregnancy situation reduces that risk associated with abortions.

3. **Contraceptives**: Choosing prolonged use of oral contraceptives may increase risk for breast cancer.

4. **Breastfeeding**: Choosing to breastfeed generally decreases risk for breast cancer.

Why do many women who did not make higher risk choices get breast cancer?

There are some factors over which a woman has no control that can increase her risk for breast cancer. These include starting menstrual periods at an early age, menopause occurring later, having a baby born prior to 32 weeks gestational age, having a miscarriage between 13 and 32 weeks of gestation (first trimester miscarriages do not increase breast cancer risk), and having genetic mutations that can greatly increase the risk of breast cancer (i.e. BRCA mutations).³

For more information with references, including why reproductive choices affect breast cancer risk, please see the Statement, “Reproductive Choices of Young Women Affect Future Breast Cancer Risk” posted on the ACPeds website, BestForChildren.org.

Endnotes

1. There is little to no controversy about the association of delayed childbirth and breast cancer risk. That delay is a modern cultural issue.

2. Many studies from around the world demonstrate an increased risk of breast cancer associated with induced abortions.

3. With a strong family history of breast cancer, it may be helpful for affected family members to be tested for such gene mutations as the risk for both breast and uterine cancers can be substantial when these genetic variations exist.