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69 - DIAGNOSIS OF BREAST CANCER ASSOCIATED WITH PREGNANCY: A REVIEW OF LITERATURE

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Introduction: The diagnosis of breast cancer in pregnant and postpartum women presents challenges. The clinical management of the breasts during pregnancy and lactation requires knowledge of the physiological changes of the pregnant breast, as well as the correct identification and approach to possible changes. The reluctance of physicians and patients to perform radiographic tests and invasive procedures during this period should be discussed. **Objective:** The aim of this study was to demonstrate that all breast lesions found in these periods should be carefully evaluated, highlighting the importance of diagnostic evaluation methods, comparing the advantages, disadvantages, and possible false-negative factors of the methods frequently used in clinical practice. *Methods:* This is a literature review, which uses references found in scientific books on gynecology, obstetrics, and mastology, in addition to the use of the databases Medline, BVS, PubMed, UpToDate, and LILACS, applying to originals and literature reviews written in English, Portuguese, and Spanish. **Results:** The analysis of diagnostic methods in the context of breast cancer is associated with pregnancy, such as selfexamination, anamnesis and clinical examination, ultrasonography, mammography, evaluation by core biopsy, evaluation by cytology, and evaluation by magnetic resonance imaging, presented as a result of limitations not found in nonpregnant women. The bibliographic study points to the need for individualized monitoring, analysis, and application, taking into consideration a woman's risk of developing breast cancer during her pregnancy and physiological and morphological changes in the breast. *Conclusion:* Early diagnosis is not common during pregnancy; consequently, more advanced stages are associated with breast cancer simultaneously to gestation. Therefore, even in pregnancy, any suspicion of breast lesion must undergo evaluation. Pregnant and postpartum women should have clinical breast examinations as a routine, making patients and health staff aware of their importance in the pregnancy-puerperal cycle. Advice about the self-examination, request for ultrasound, mammography, and biopsy is necessary.