Gynecomastia is a non-cancerous development of normal glandular tissue in the male breast. If great enough, it can appear as a clinically palpable abnormality or a visual enlargement of the breast, and can physically induce breast/nipple pain or tenderness. The percentage of adult males with gynecomastia increases with advancing age, with the highest prevalence found in the 50-80 year age range.

Gynecomastia can occur for a variety of reasons, however there is no known cause in the majority of cases (25%). Generally, it is an imbalance of estrogens, although 10% to 20% are medication-related. Medications include: antibiotics, anti-ulcer medications, cancer chemotherapeutic agents, cardiovascular drugs, psychoactive agents, hormones, and drugs of abuse (alcohol, amphetamines, heroin, and marijuana). Other indications for gynecomastia can be cirrhosis or malnutrition (8%), primary hypogonadism (8%), testicular tumors (3%), secondary hypogonadism (2%), hyperthyroidism (1.5%), or renal disease (1%).

Gynecomastia tends to be rubbery to firm in texture. There is no well-established data to indicate that it predisposes to the development of carcinoma. After clinical diagnosis of gynecomastia has been made, it is important to follow up with your referring physician or specialist.