

Mixed Type of Invasive Ductal Carcinoma of Breast - A Rare Case Report

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Abstract: *Invasive ductal cancer, also known as infiltrating ductal carcinoma, is the most common form of breast cancer; it accounts for 50% to 70% of invasive breast cancers. Here we report a rare case of a 37-year-old lady who presented with a lump in right breast noticed since six months, not associated with pain and nipple discharge. On examination, a lump of size 4x3 cms was noted in the upper inner quadrant of the right breast with irregular margins, nodular surface, firm to hard in consistency, freely mobile, not adherent to underlying structures. Fna was suggestive of atypia, mammogram s/o - birads category-iv. The patient was taken up for the right modified radical mastectomy after frozen section confirmation under g/a. Postoperatively the patient was managed with chemotherapy after histopathological examination of radical mastectomy specimen and was under regular follow up.*

Keywords: carcinoma breast, micropapillary carcinoma, mucinous carcinoma of breast, invasive ductal carcinoma of breast

1. Introduction

Invasive breast cancers are recognized by their lack of overall architecture, infiltration of cells haphazardly into a variable amount of stroma, or formation of sheets of continuous and monotonous cells without respect for form and function of a glandular organ. Papillary carcinoma is a special type of breast cancer that accounts for 2% of invasive breast cancers. Papillae define these cancers with fibrovascular stalks and multilayered epithelium. Mucinous carcinoma (colloid carcinoma), another special type of breast cancer, accounts for 2% of all invasive breast cancers. Breast carcinoma with mixed types present with low incidence. The coexistence of them in a single mass is extremely rare.

2. Case Details

A 37-year-old lady presented with a lump in right breast noticed since six months, not associated with pain and nipple discharge, no h/o trauma, no h/o weight loss/loss of appetite. Patient had a history of fibroadenoma excision over right breast three years back. Biopsy reports not available.

3. On Examination

A lump of size 4x3 cms was noted in upper inner quadrant of right breast with irregular margins, nodular surface, firm to hard in consistency, freely mobile, not adherent to underlying structures. Skin over the lump consists of circum-areolar scar about length 3cms with scar fibrosis, skin over the lump is not pinchable, nipple-areolar complex normal, no palpable axillary lymph nodes bilaterally.

FNAC was suggestive of atypia, mammogram s/o - birads category-iv. The patient was taken up for the right modified radical mastectomy after frozen section confirmation under g/a.

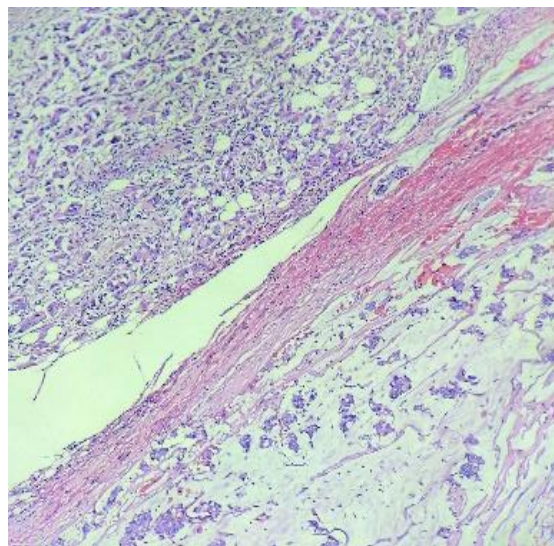
Intraoperative Images



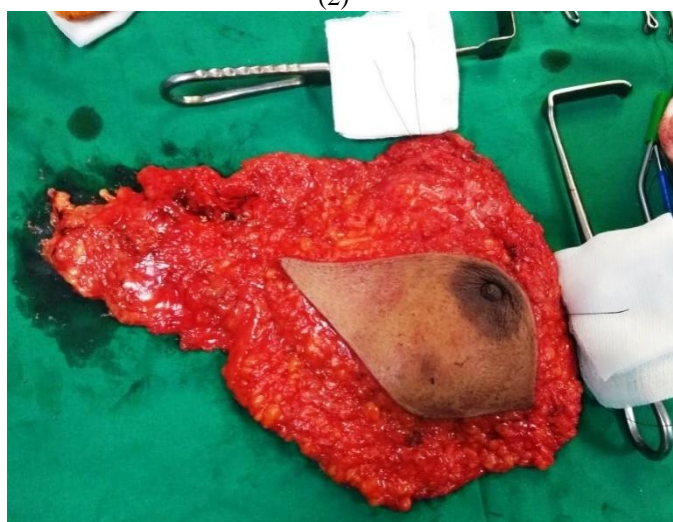
(1)



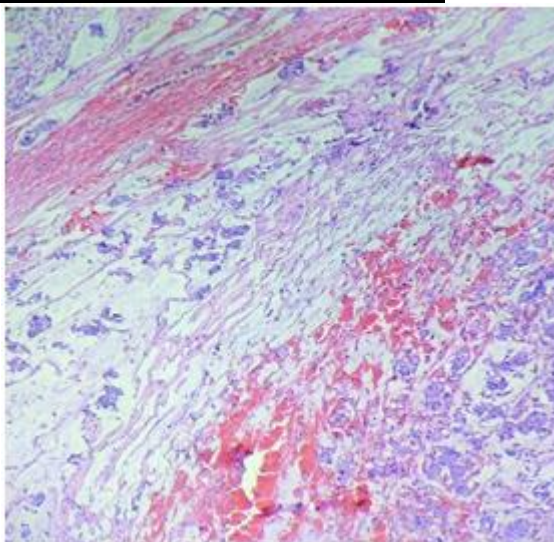
(2)



2) Slide shows hemorrhagic regions a predominant feature of malignancy (neovascularisation)



(3)



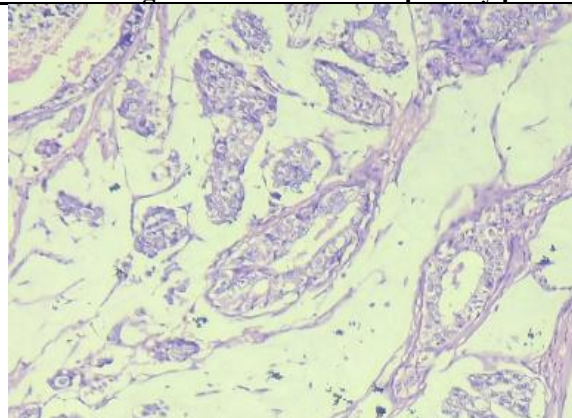
3) Slide showing nucleoli with reverse polarity pattern

4. Results

A histopathological examination of the specimen revealed the presence of two variants of invasive breast carcinoma- invasive micropapillary and mucinous carcinoma with positive for estrogen receptor, progesterone receptor and negative for her-2 neu receptors.

5. Histopathological Images

1)HPE slide shows micropapillary and mucinous patterns



6. Conclusion and Discussion

Papillary carcinomas manifest a specific type of papillary transformation. Usually palpable and centrally located, they appear as round or oval well-circumscribed nodules on mammography and produce hypoechoic signals on ultrasonography .microscopically, the tumor comprises

tightly arranged solid nests of invasive carcinoma cells separated by fibrous tissues of irregular thickness, mild to moderate nuclear atypia, prominent nuclei, vesicular nucleoli with reverse polarity pattern and fair amount of cytoplasm, floating in abundant pools of extracellular mucoid material.

These nests are round, with a distinct border, and filled with low-grade ductal cells arranged in solid sheets segregated by the fibrovascular structure.

These observations in the present case confirmed these features.

Breast carcinoma with mixed types of uncommon histotypes, such as papillary carcinoma and mucinous carcinoma, is of low incidence[2%].the coexistence of them in a single mass is extremely rare [less than 1%].

References

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