Breast lesions

	Lesion	Incidence	Presentations	Mammography	Histology	Cancer	Notes
Non proliferative Breast Changes (fibrocystic changes).		- most common - premenopausal women	lumpy breastnipple dischargepain	- densities - calcifications	Cysts formation with apocrine metaplasiaFibrosisAdenosis	No increased risk for cancer	
PROLIFRATIVE With out	Epithelial Hyperplasia	Usual in reproductive group	Rarely palpable	Small densities	- heterogeneous cells both luminal & myoepithelial cells - Irregular slit-like fenestrations are prominent at the periphery		-
	Sclerosing Adenosis	45-50	Grossly mimic cancer	Calcification	Presence of double layers are helpful in distinguishing it from cancer	Increased Risk for cancer is 1.5 - 2 times	associated with fibrocystic change
	Complex Sclerosing Lesion (Radial Scar)	-		irregular densities	central nidus of entrapped glands in a hyalinized stroma	times	-
	Large duct papillomas (central papillomas)	More common than small duct papillomas	bloody nipple discharge	- Solitary - in lactiferous duct at the nipple (palpable)	(finger like projection) that arises from the ductal		-
	Small duct papillomas	-	-	- Multiple - deeper within the ductal system	epithelium	increase the risk of subsequent carcinoma	-
	Proliferative fibrocystic disease	-	-	-	-	-	-
	oliferative breast sease <u>with</u> atypia	-	-	-	- Atypical hyperplasia - lacking features for CIS	4-5 ↑ risk for cancer	ADH & ALD

Carcinoma In Situ						
Lesion		Presentations	Mammography	Histology	Notes	
	Comedo		radiologic calcifications	large central necrosis & calcified debris	100% chance of becoming invasive 30% chance of becoming invasive	
Ductal	Cribriform	- Multifocal → recurrence after treatment	-	 cells arranged around "punched-out" spaces = "cookie cutter" calcifying secretory material 		
Carcinoma In Situ (80%)	papillary, Micropapillary	- mostly not palpable	-	-		
, ,	solid		-	cells fill spaces	-	
	Paget's Disease	red, scaly eczematous, lesion on the nipple & areola	-	Paget cells found scattered in the epidermisStain positively for mucin	50% of women have underlying invasive carcinoma	
Lobular carcinoma in situ (20%)		- Always an incidental - Doesn't form palpable mass	Microcalcifications are <u>infrequent</u>	 Monomorphic population of small, rounded cells architecture can still be recognized signet ring cells 	- 30% chance of becoming invasive within 20Y → follow up - multicentric & bilateral	

Inflammatory lesion	Relation	Cause	
Acute mastitis	1st month of breastfeeding	Staph infection	
Periductal mastitis not associated with lactation		cigarette smoking	
Fat necrosis	-	mechanical trauma, surgical	
Lymphocytic mastopathy	diabetics	-	
Granulomatous mastitis	-	sarcoid, TB, but mostly idiopathic	

Lesion	Incidence	Gross	Stromal reaction	Histology	Genes	Notes
NOS Ductal	70-80%	- Firm, hard, with an irregular border (stellate infiltration) - calcifications.	fibroblastic (desmoplastic) → palpable mass with hard consistency (scirrhous carcinoma)	-	- Expresses Estrogen or Progesterone - overexpression of HER2/NEU	- grating sound when cut - nipple retraction
Lobular	10%	firm to hard with irregular margins	varies from marked fibroblastic response to little reaction → discrete mass to a subtle	indian file pattern	E-Cadherin protein	- multicentric & bilateral - unique type of metastases
Medullary Carcinoma	2%	well circumscribed mass	Doesn't produce any fibroblastic reaction → soft and fleshy	- solid sheets of malignant cells - lymphocytes & plasma cells	BRCA1 mutations (triple negative)	Mistaken clinically and radiologically for fibroadenoma
Colloid Carcinoma (Mucinous carcinoma)	2% (older women)	- circumscribed - slow growing - glistening cut surface	lacks fibrous stroma	islands & single tumors cells floating in pools of extracellular mucin	Most express hormone receptors	pure mucinous or mixed

Lesion	Incidence	Clinical	Grossly	Histology	Treatment
Fibroadenom (FA)	before 30most common benign	mobile lump (breast mouse)	pearl-white & whorledsolitary	mixture of ducts & fibrous CT	lumpectomy
Phylloides tumor	any age	-	Palpable masses	fibro-epithelial tumors arranged in leaf like pattern	excised with wide margins

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