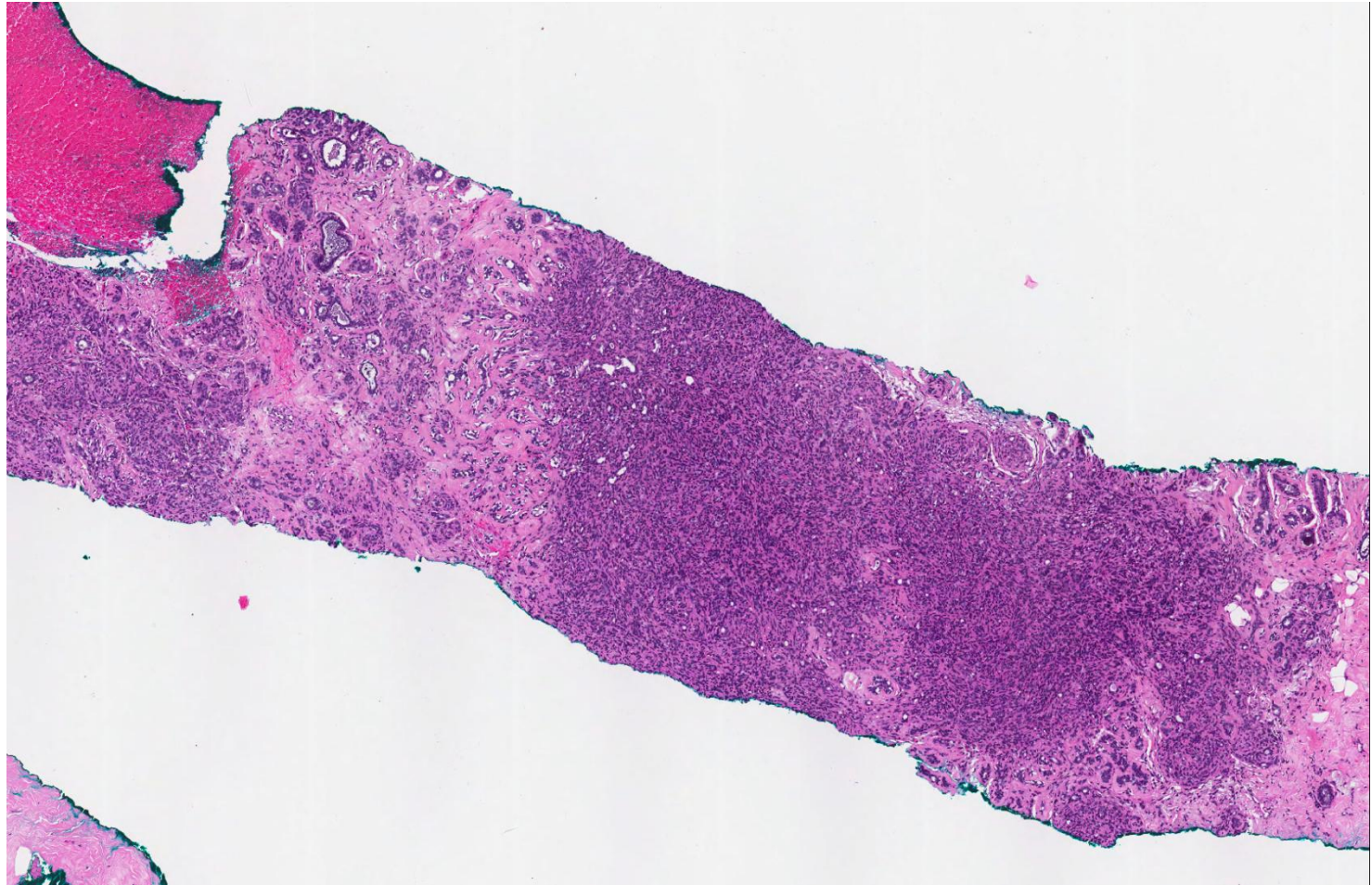
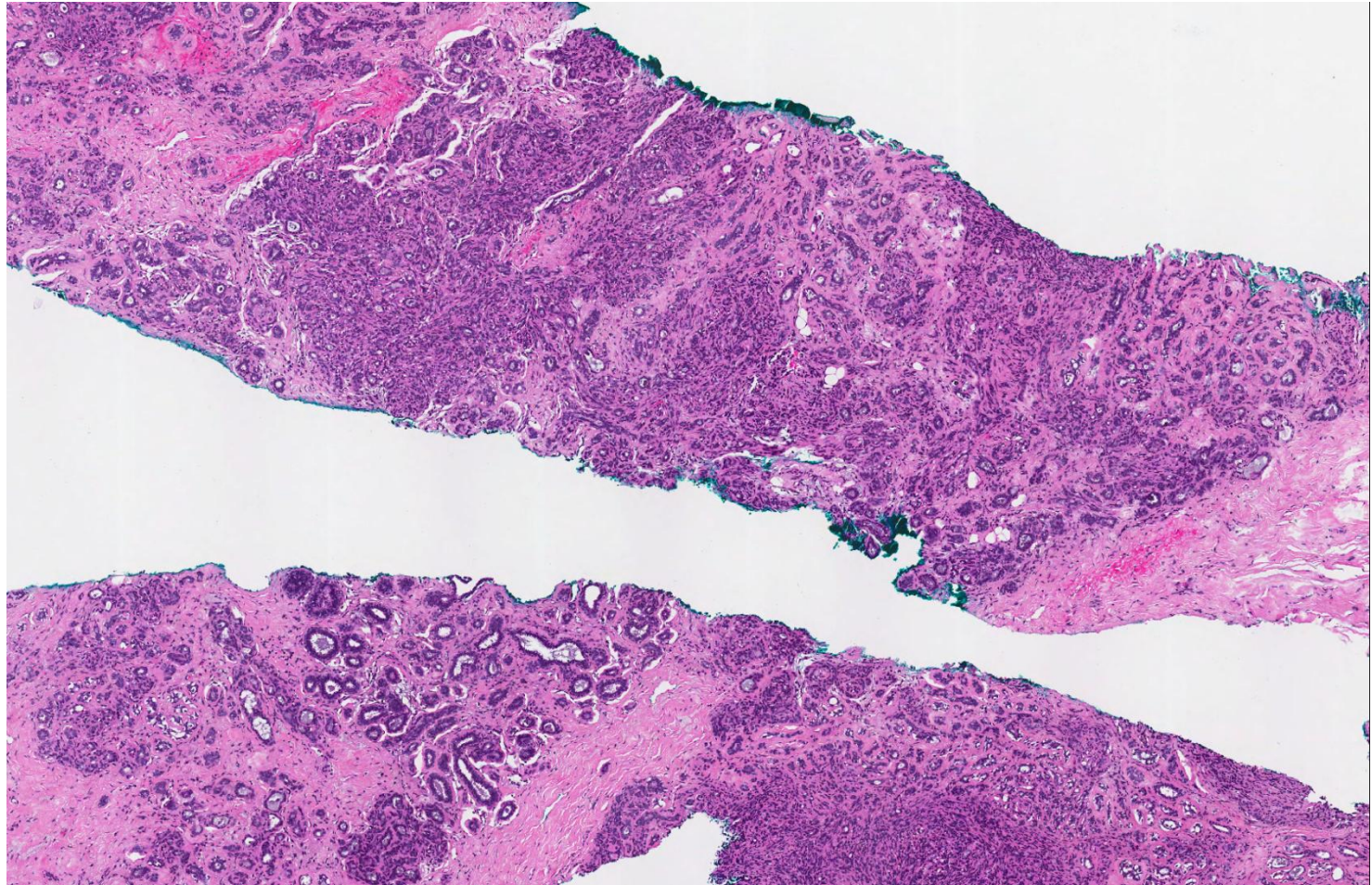
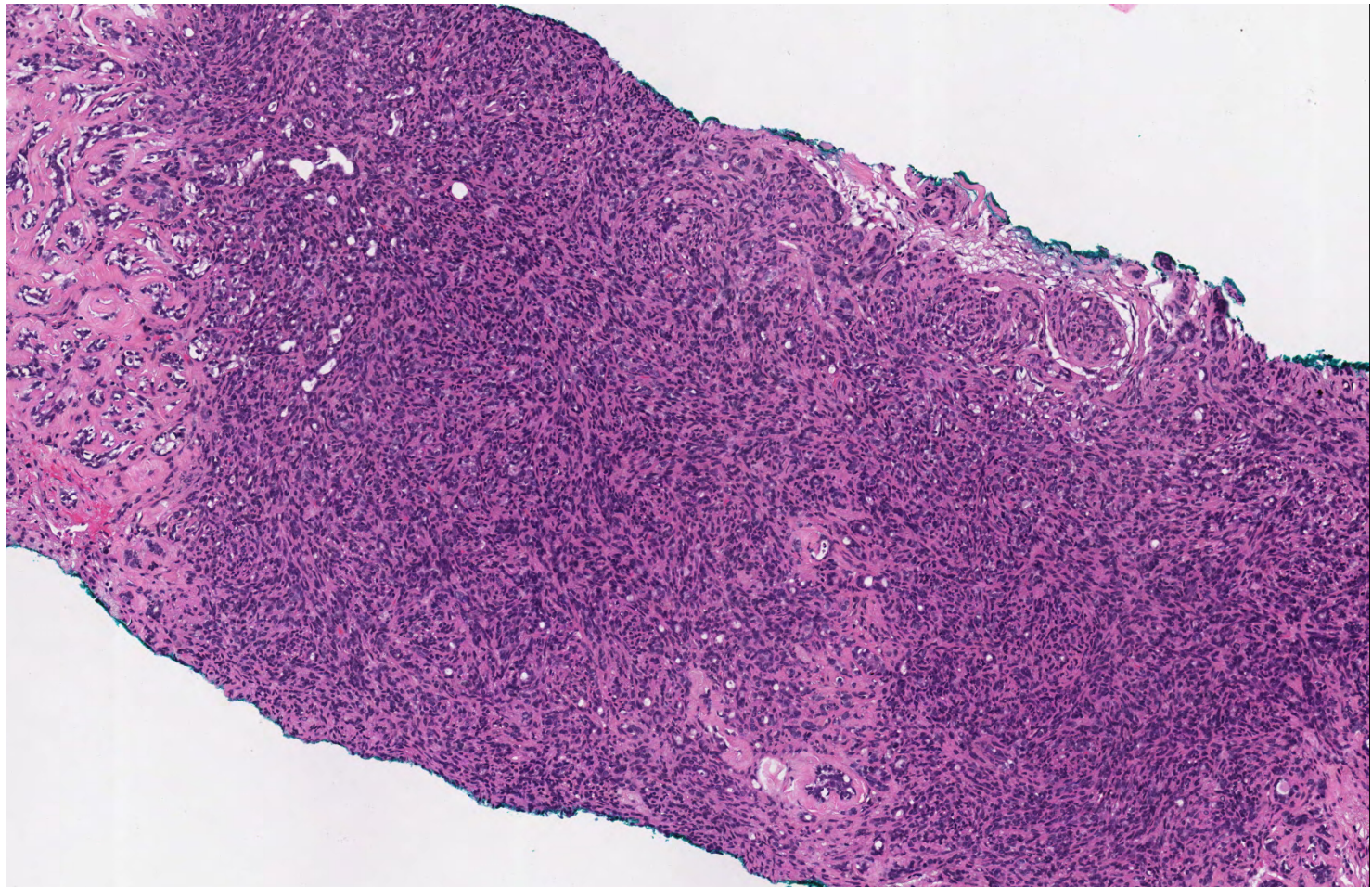
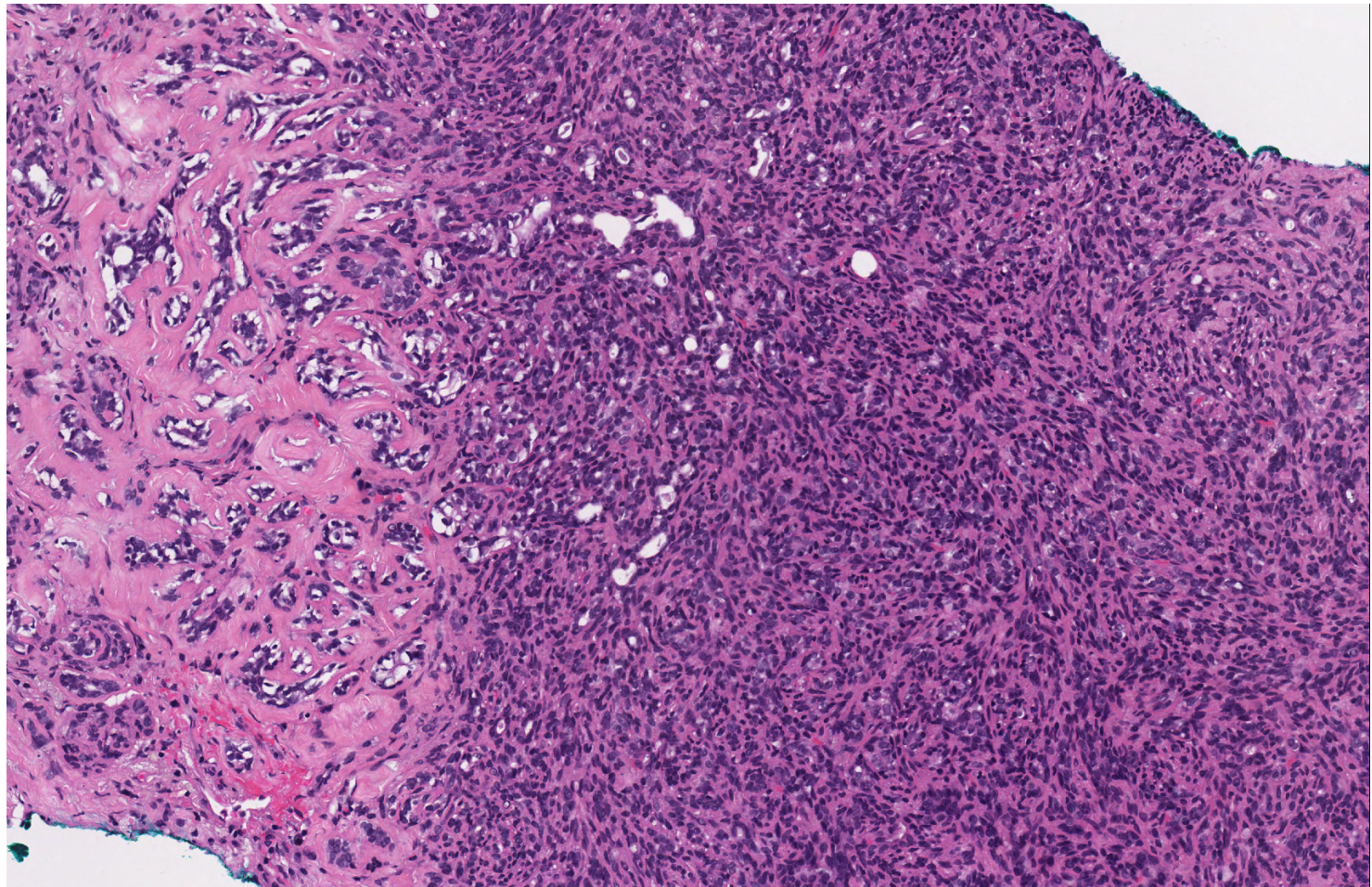


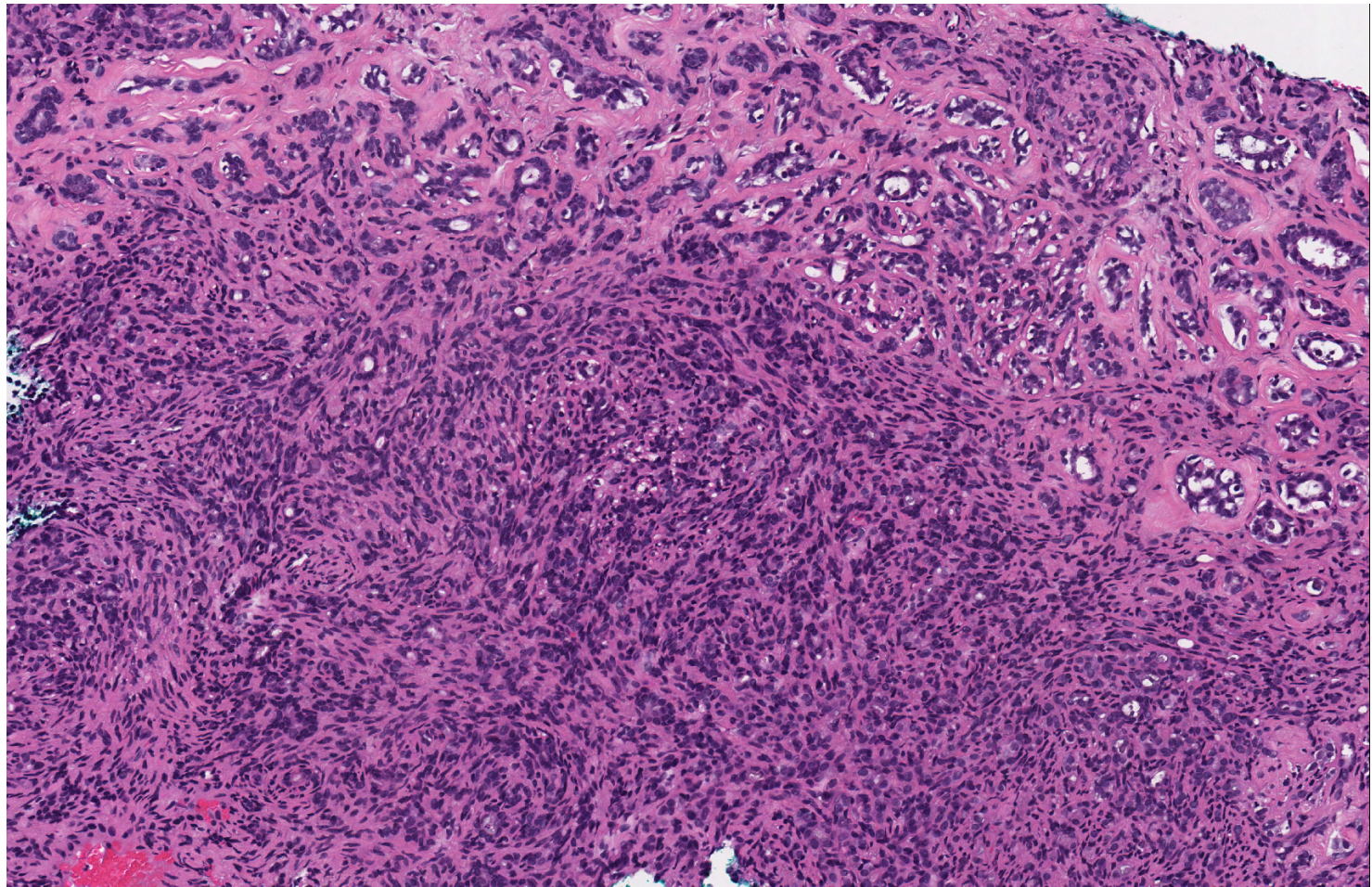
- Set B.11
- 40 year old Chinese female was discovered with an irregular hypoechoic lesion of the right breast on ultrasound.
- Ultrasound-guided core biopsies were performed.

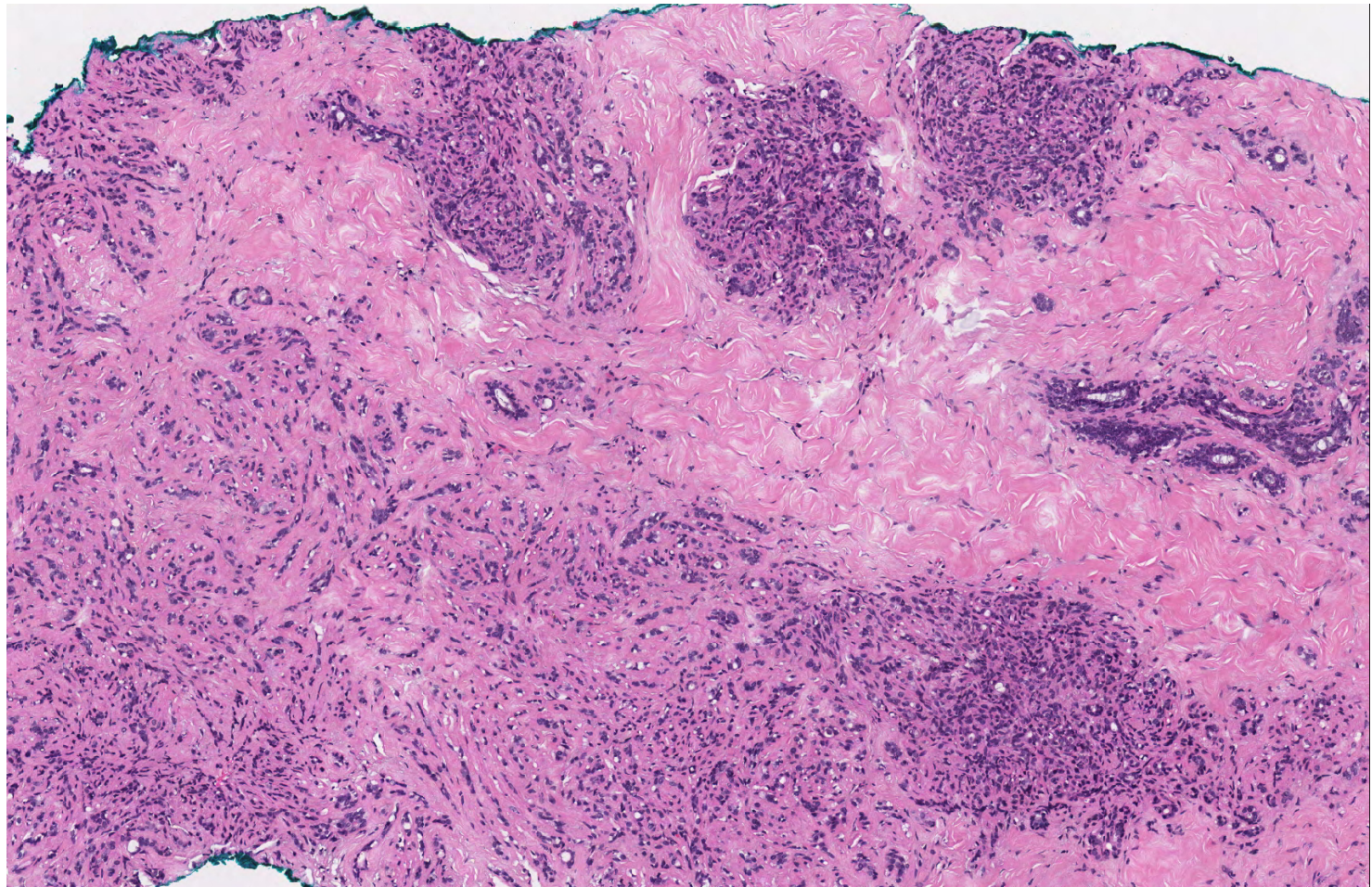


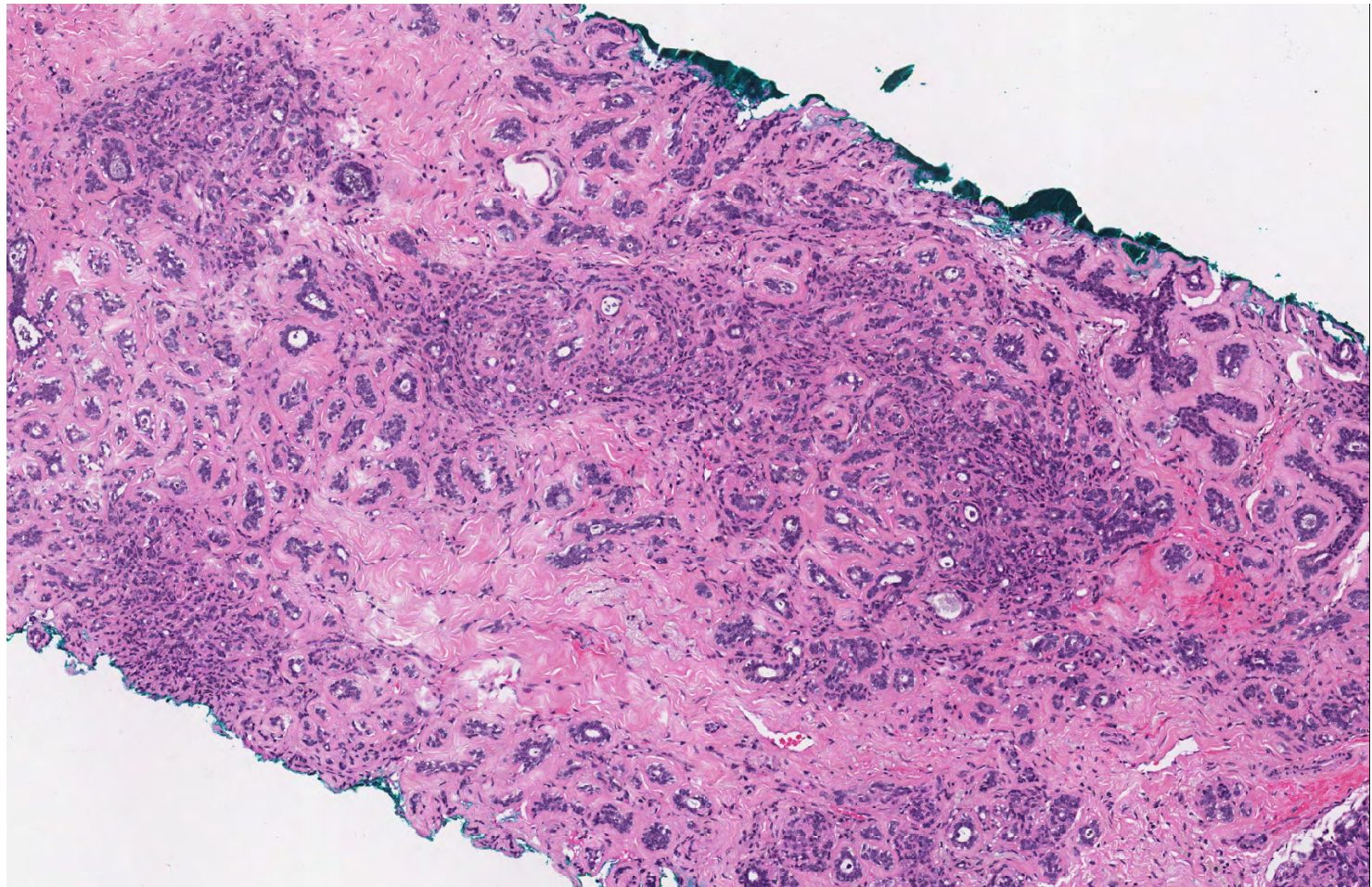


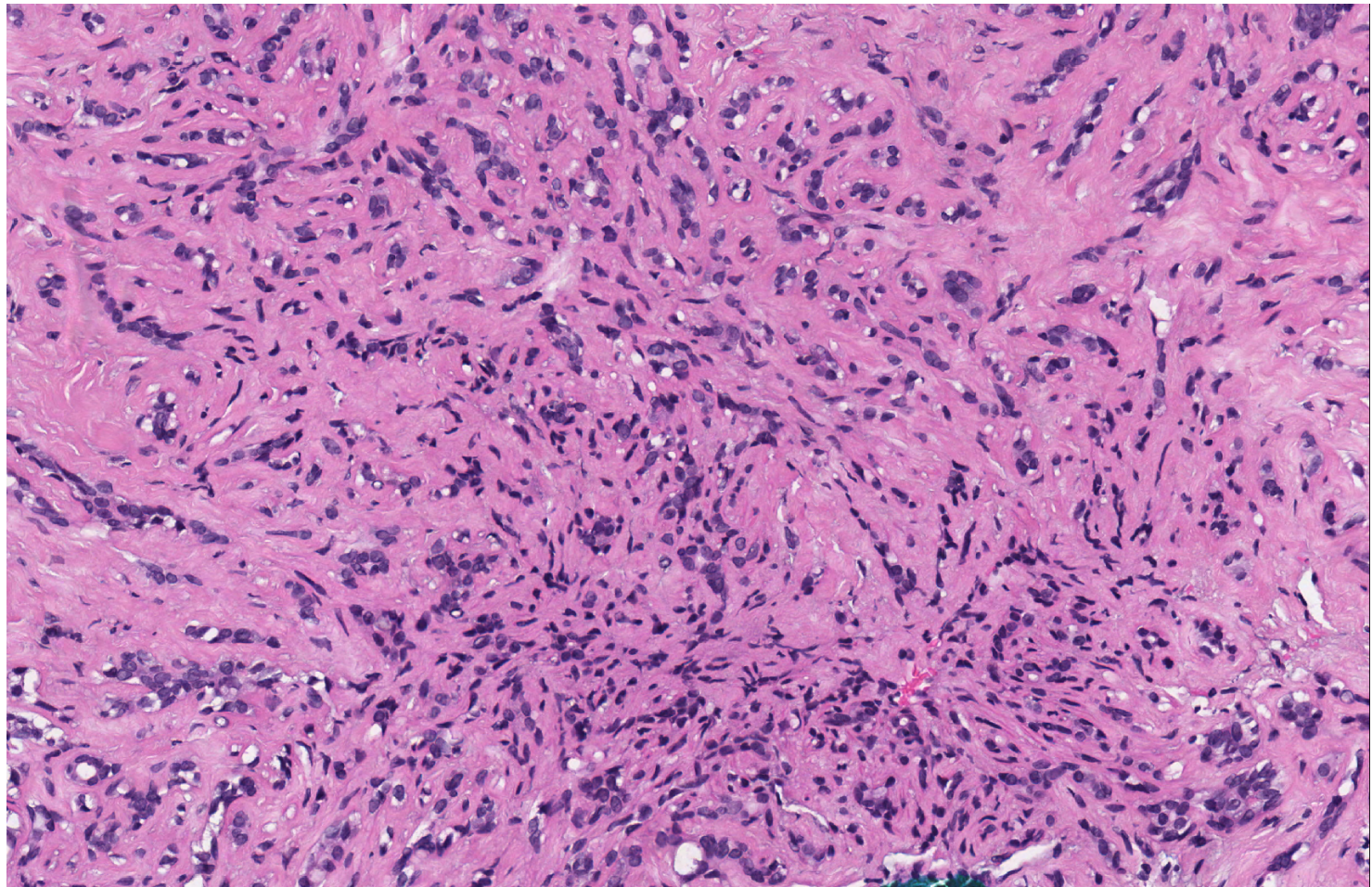


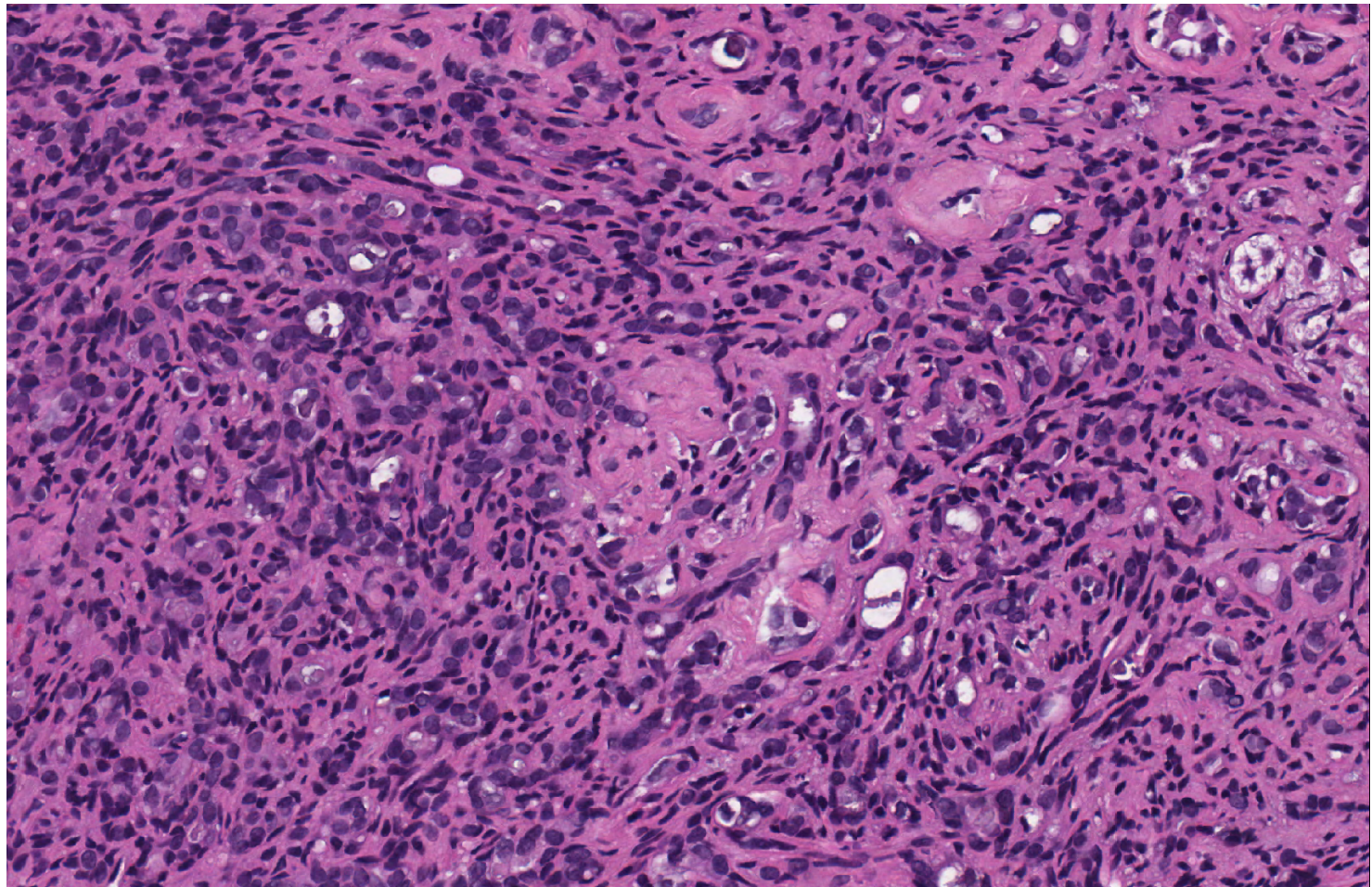


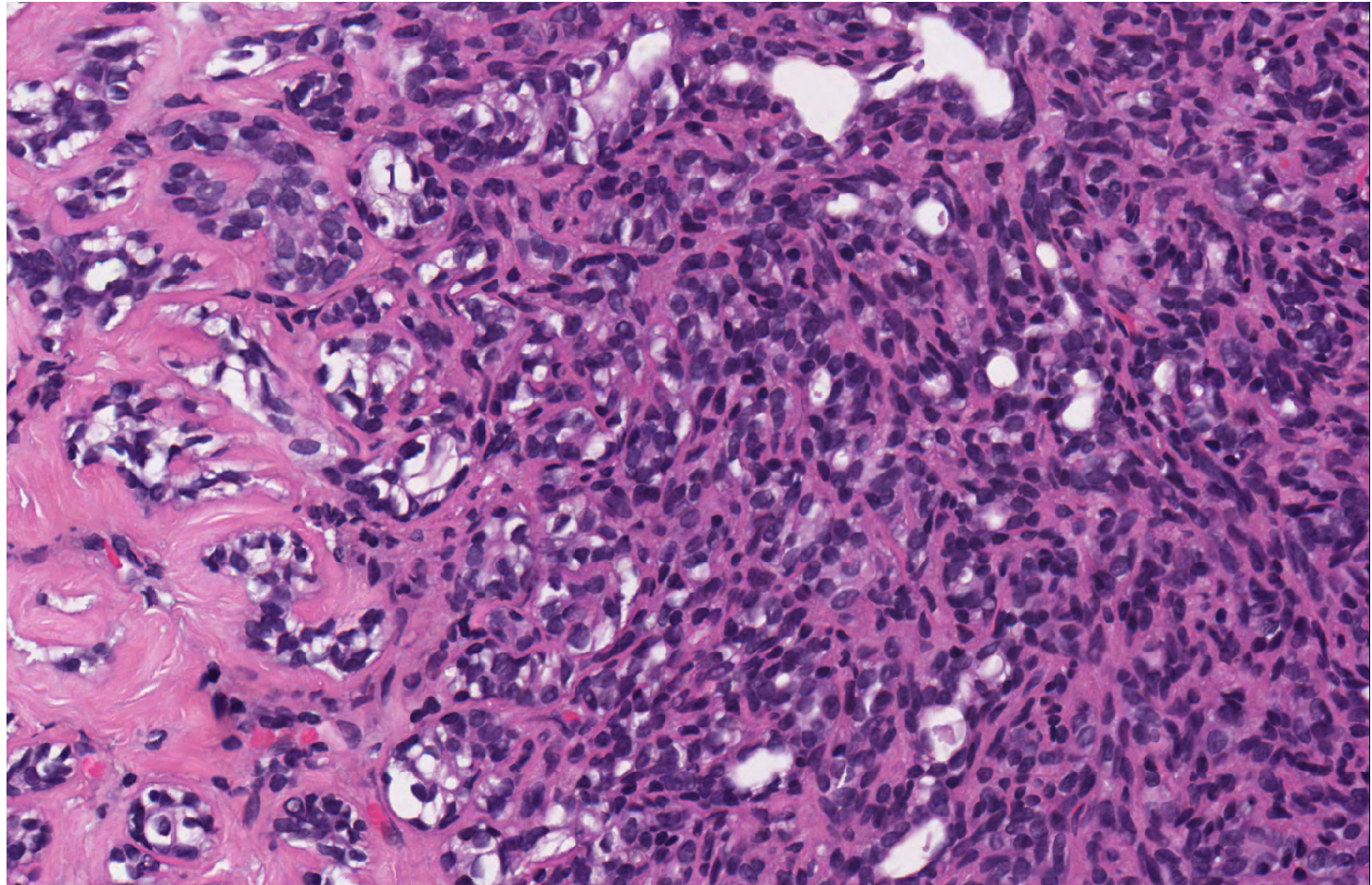


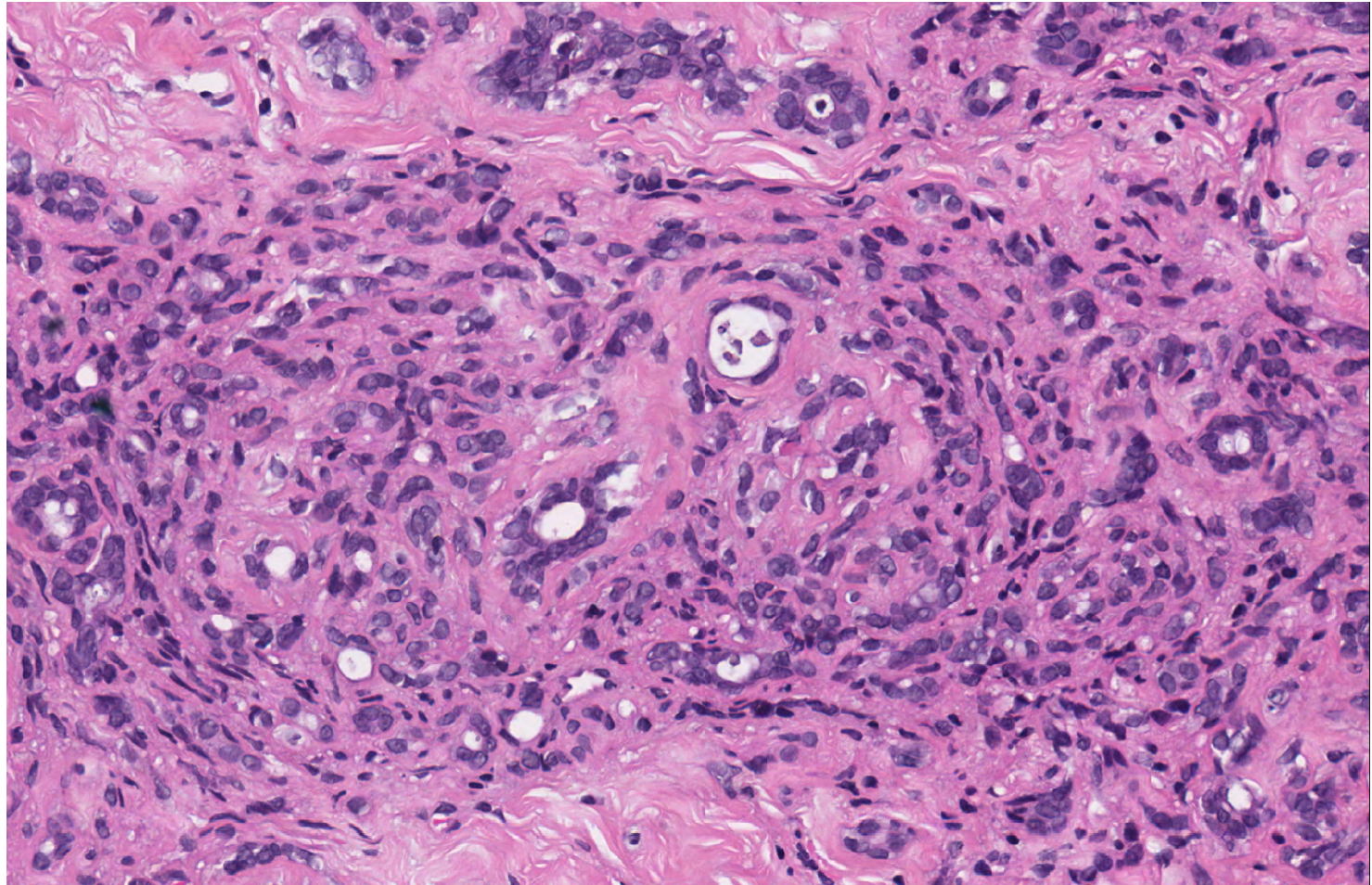


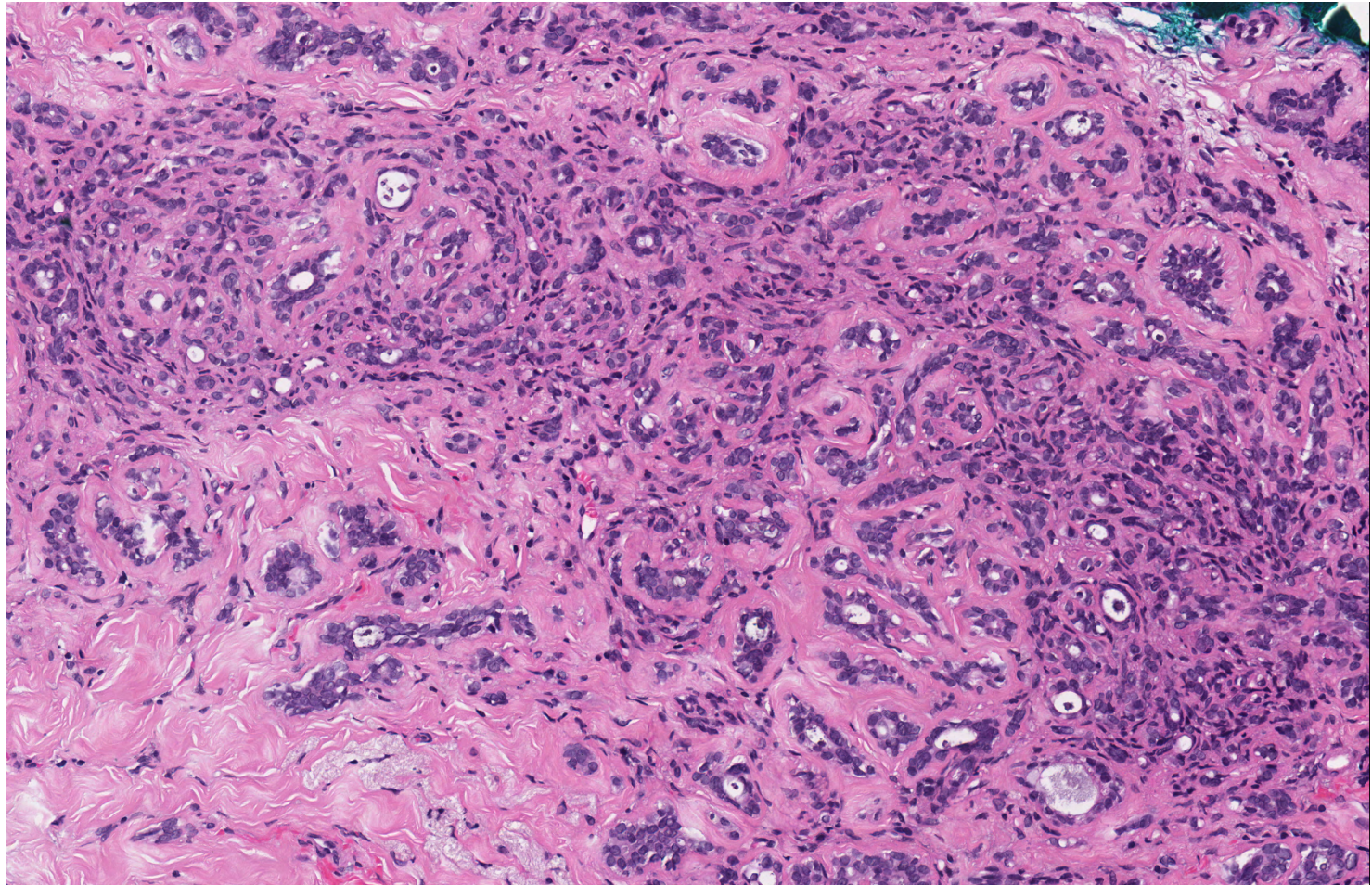




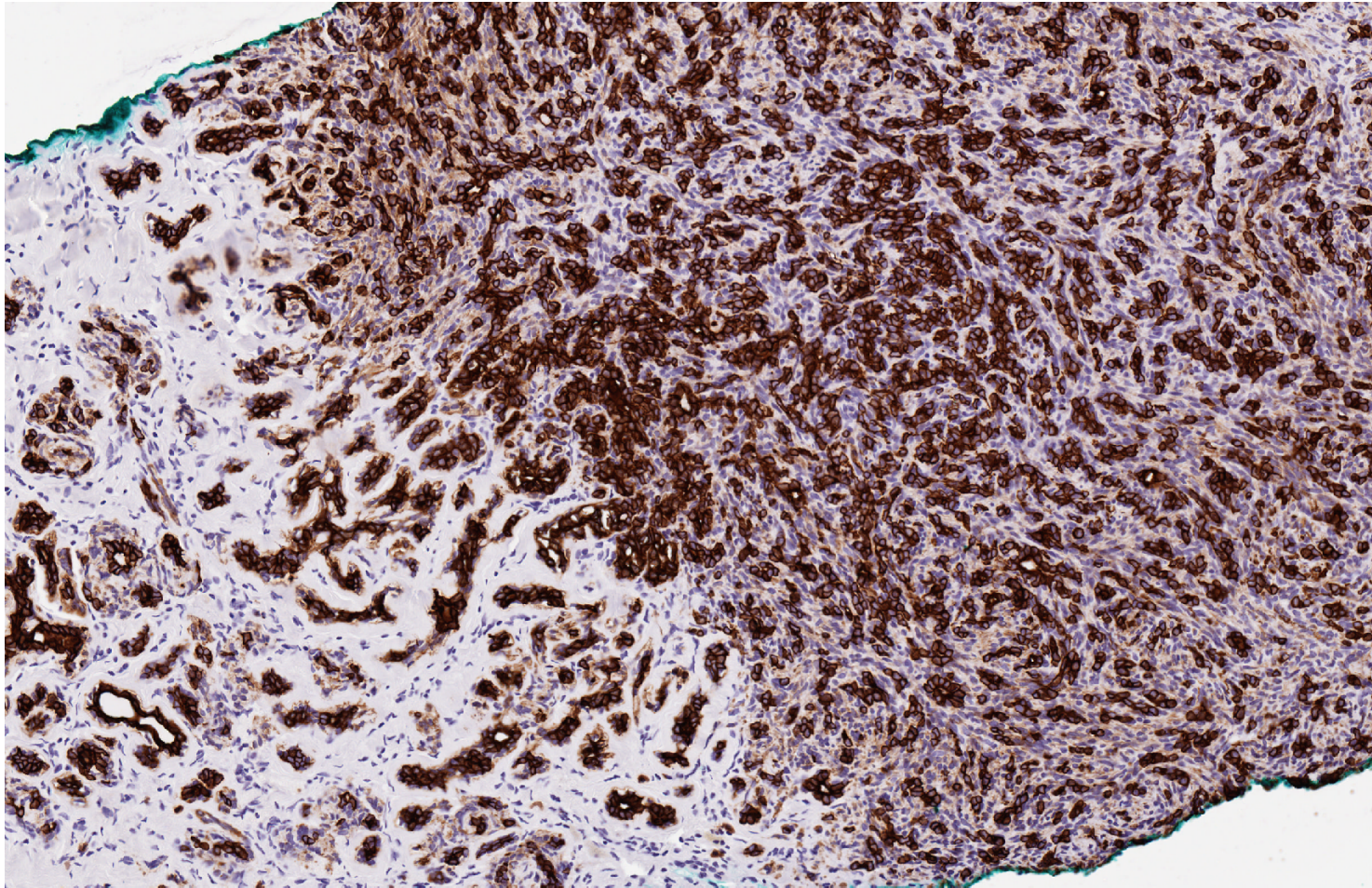




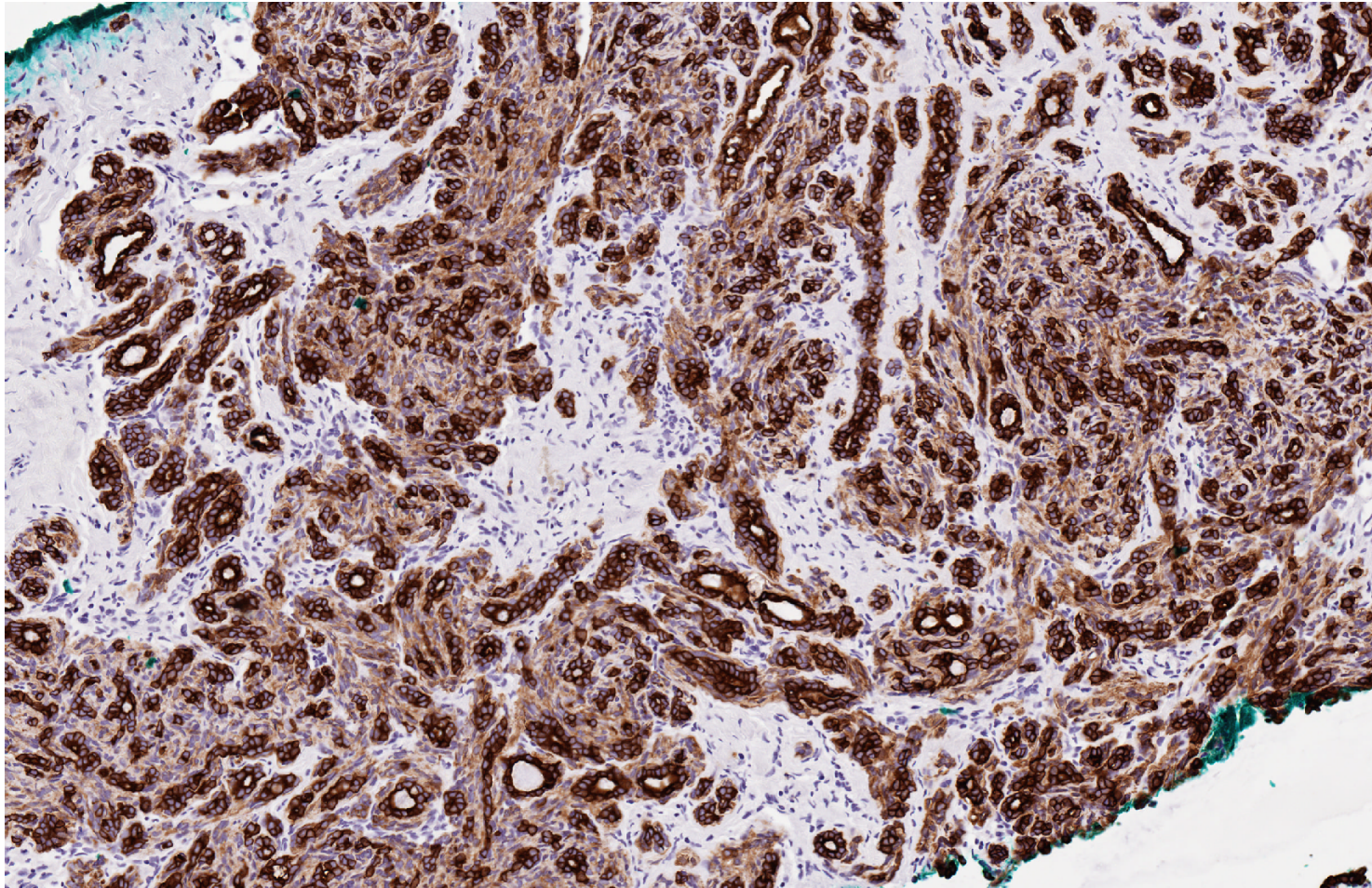




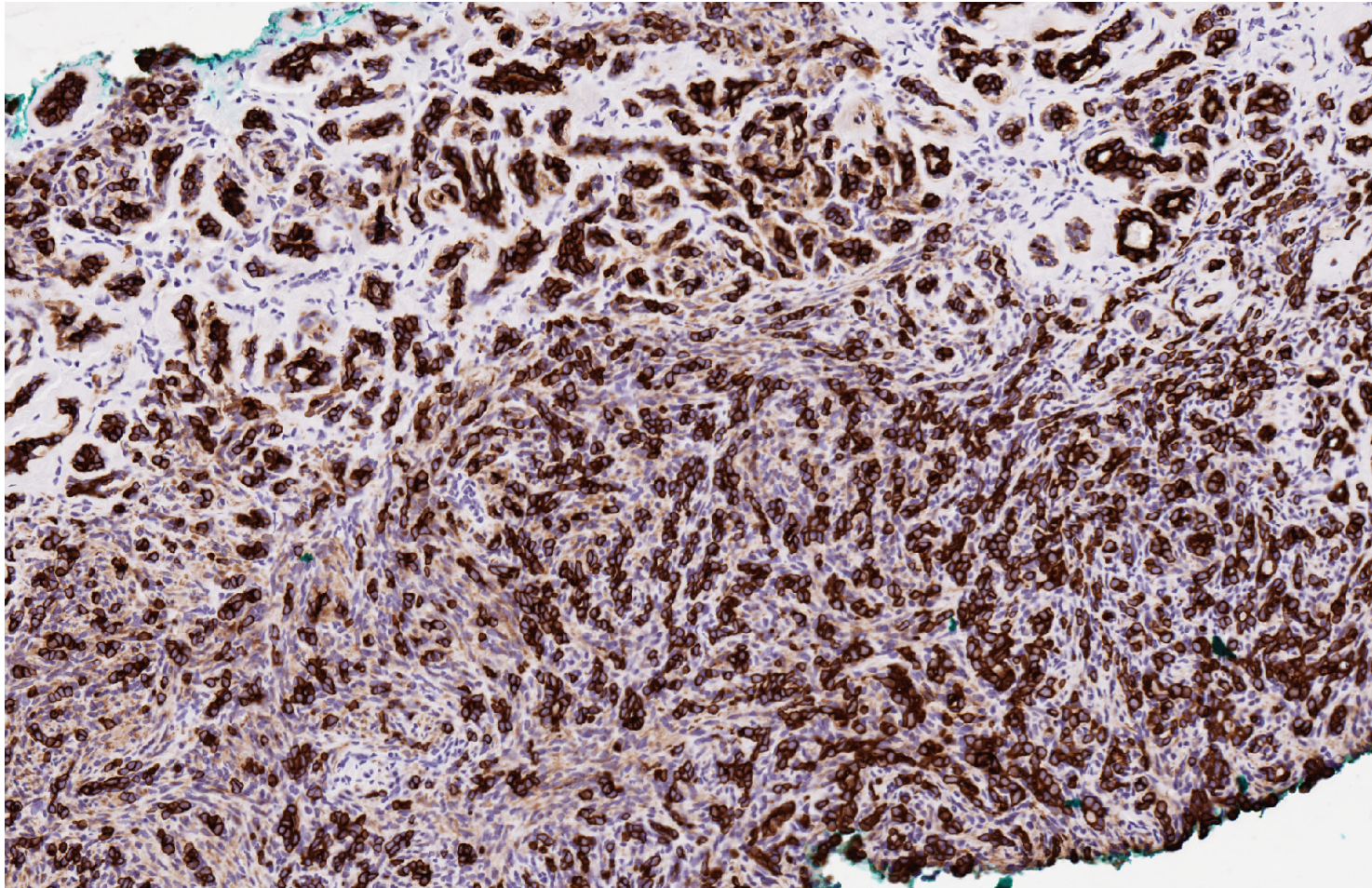
Cam 5.2



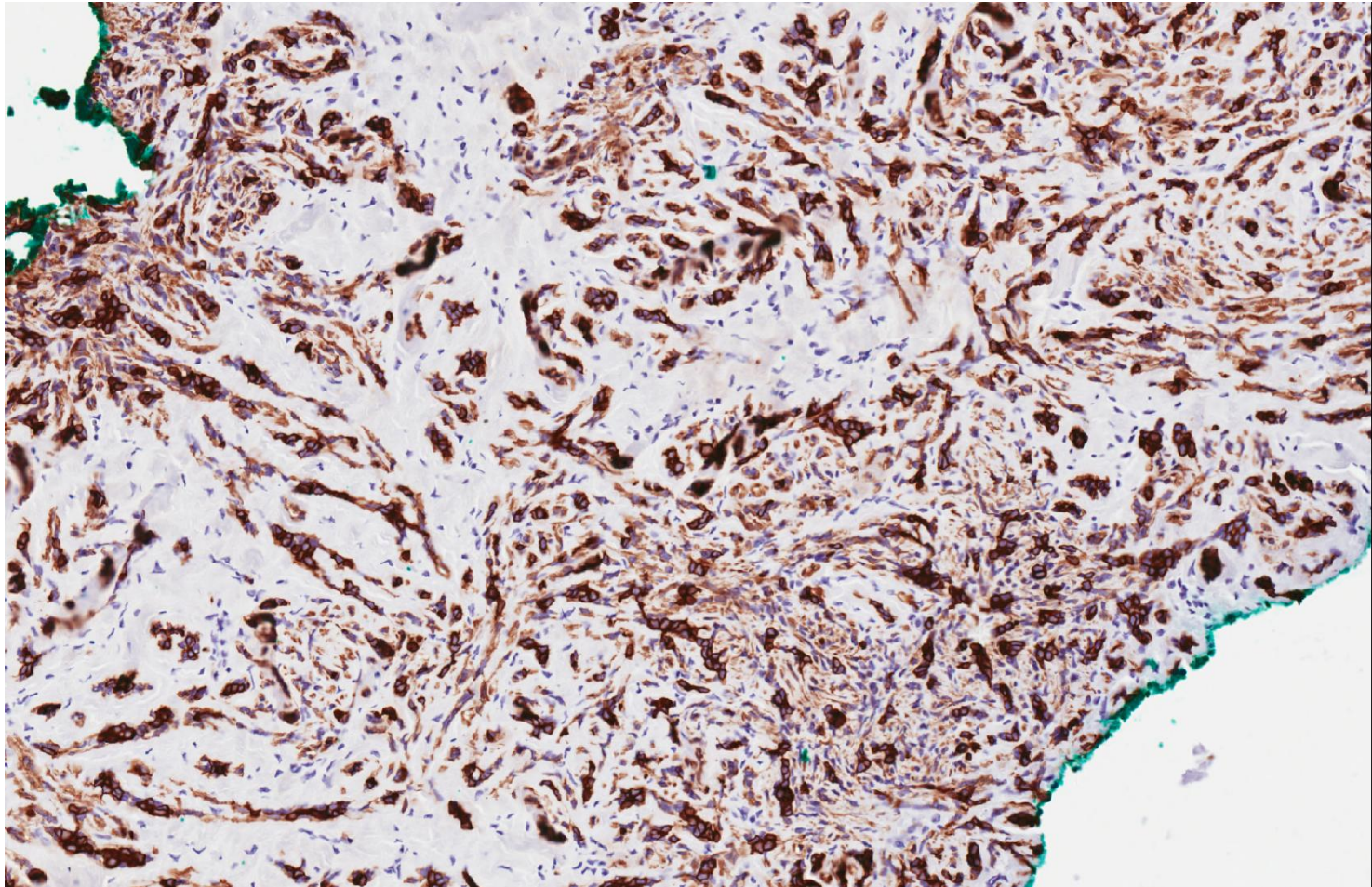
Cam 5.2



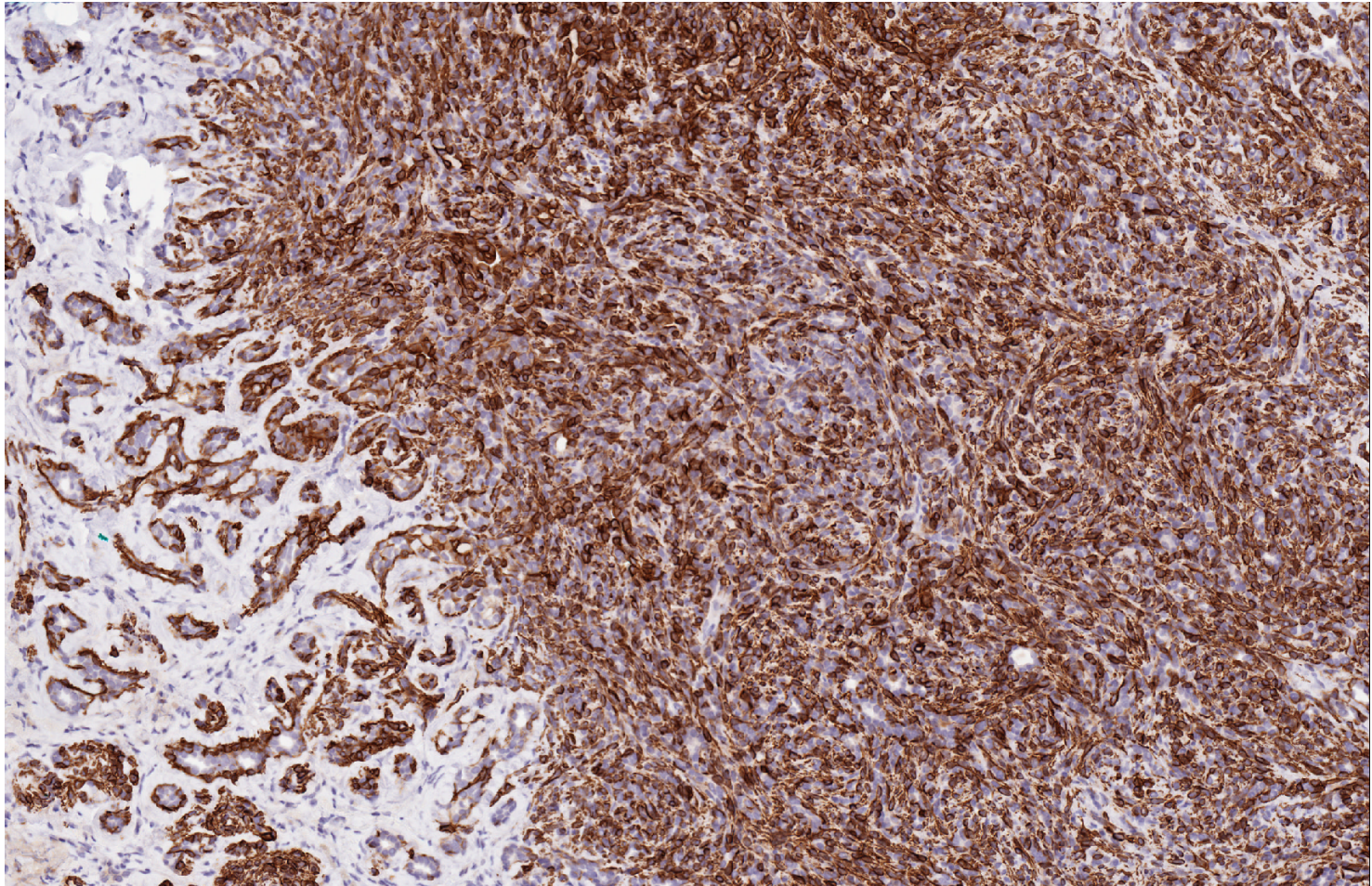
Cam 5.2



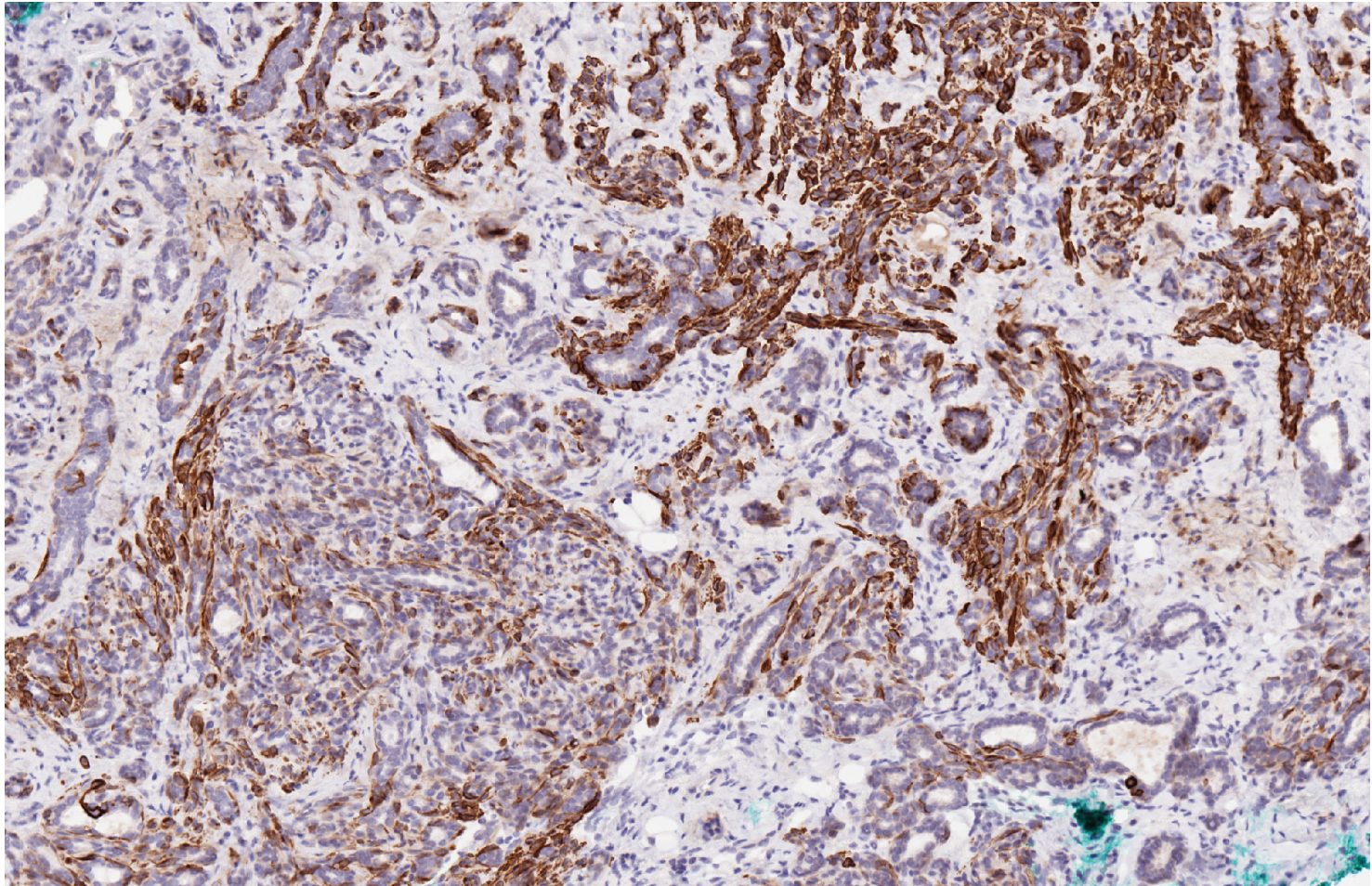
Cam 5.2



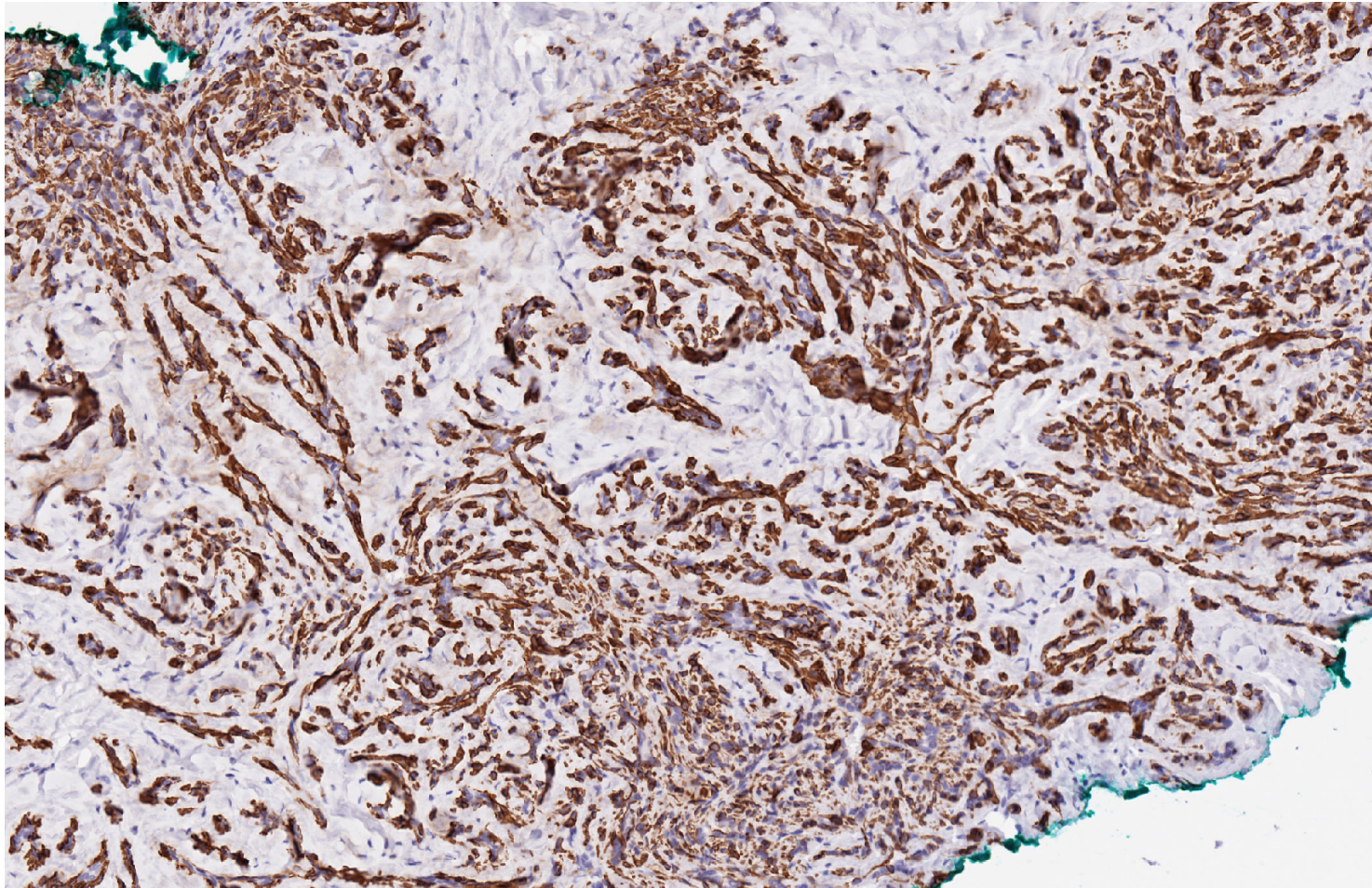
CK14



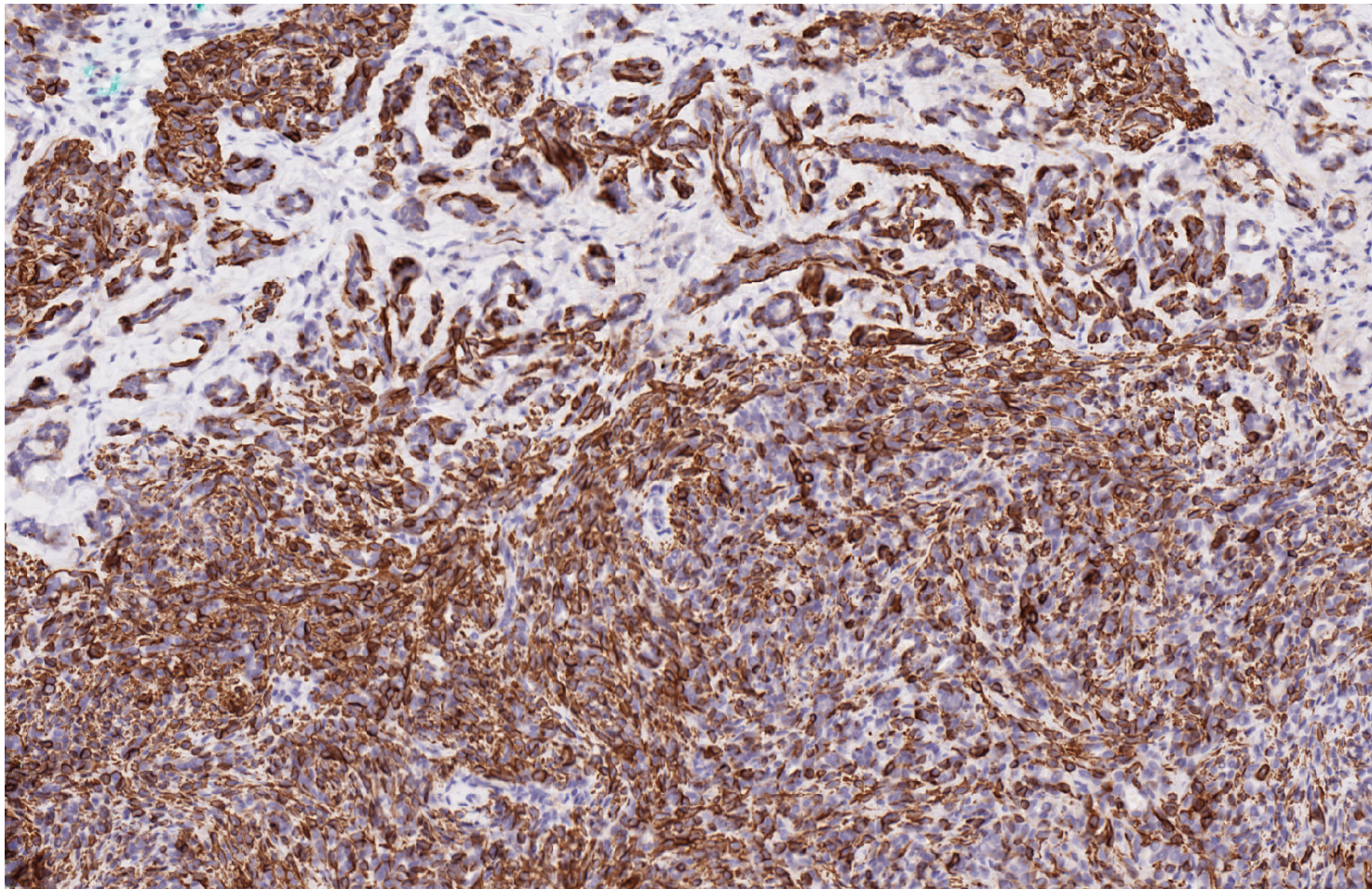
CK14



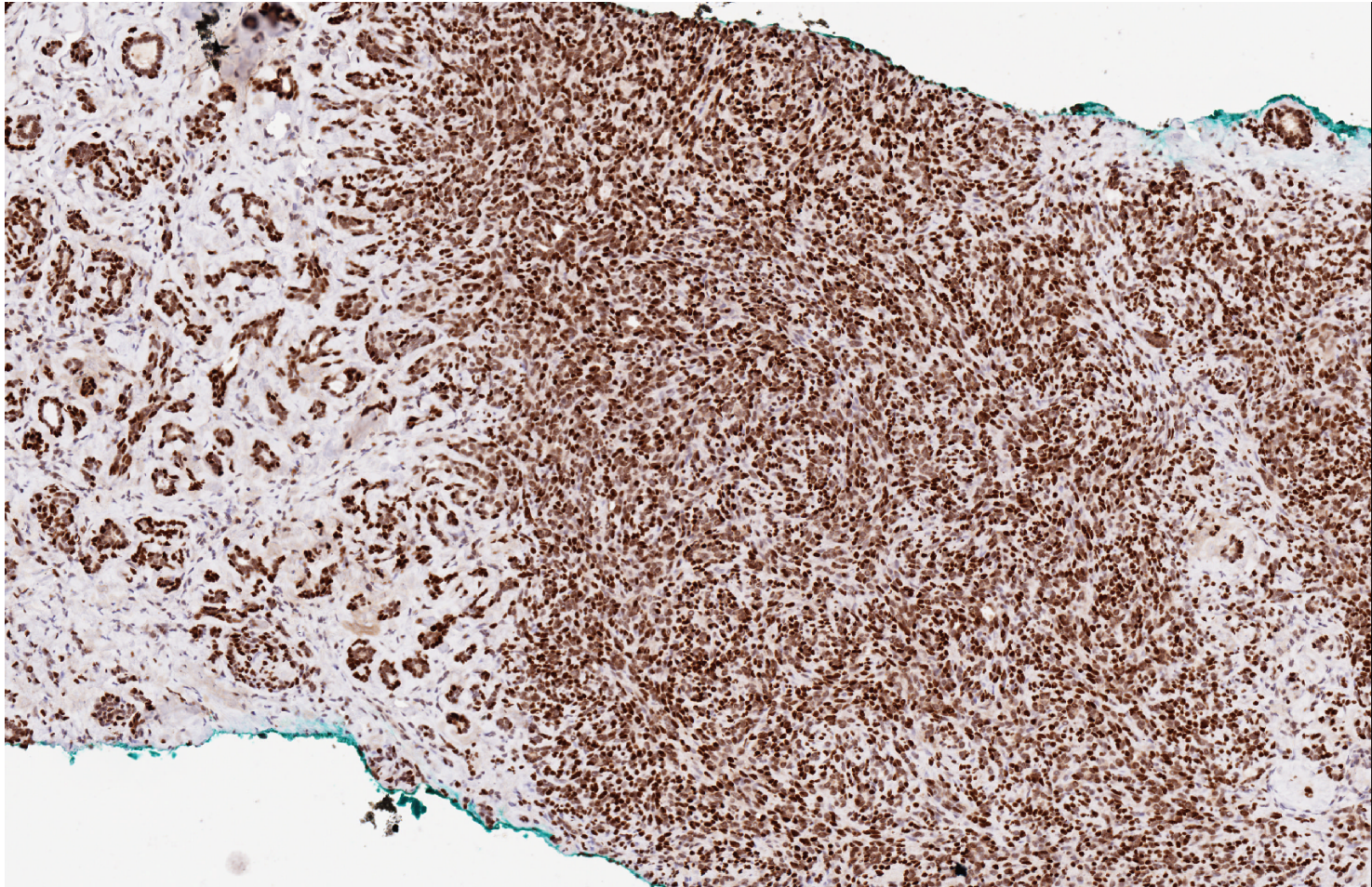
CK14



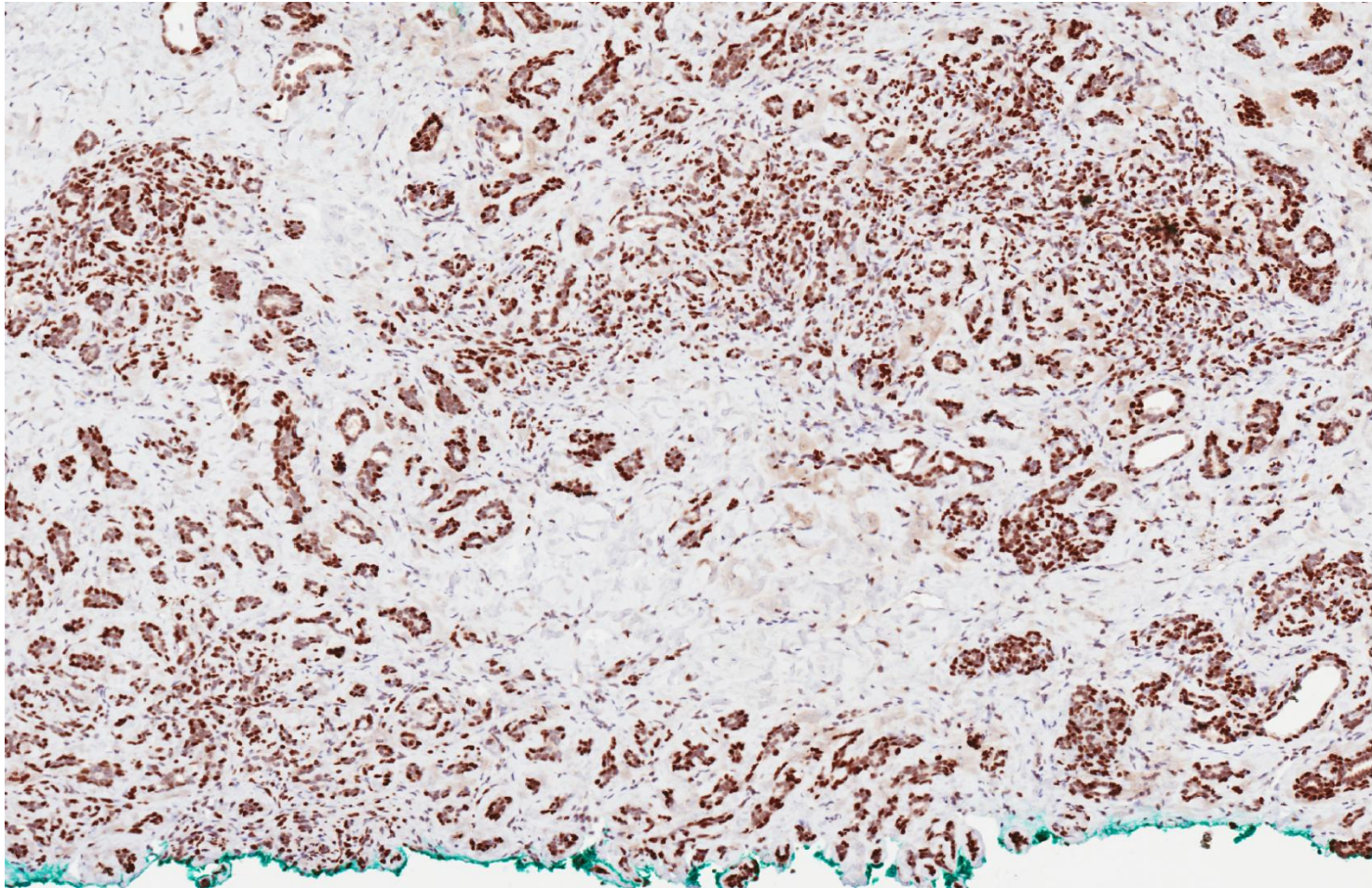
CK14



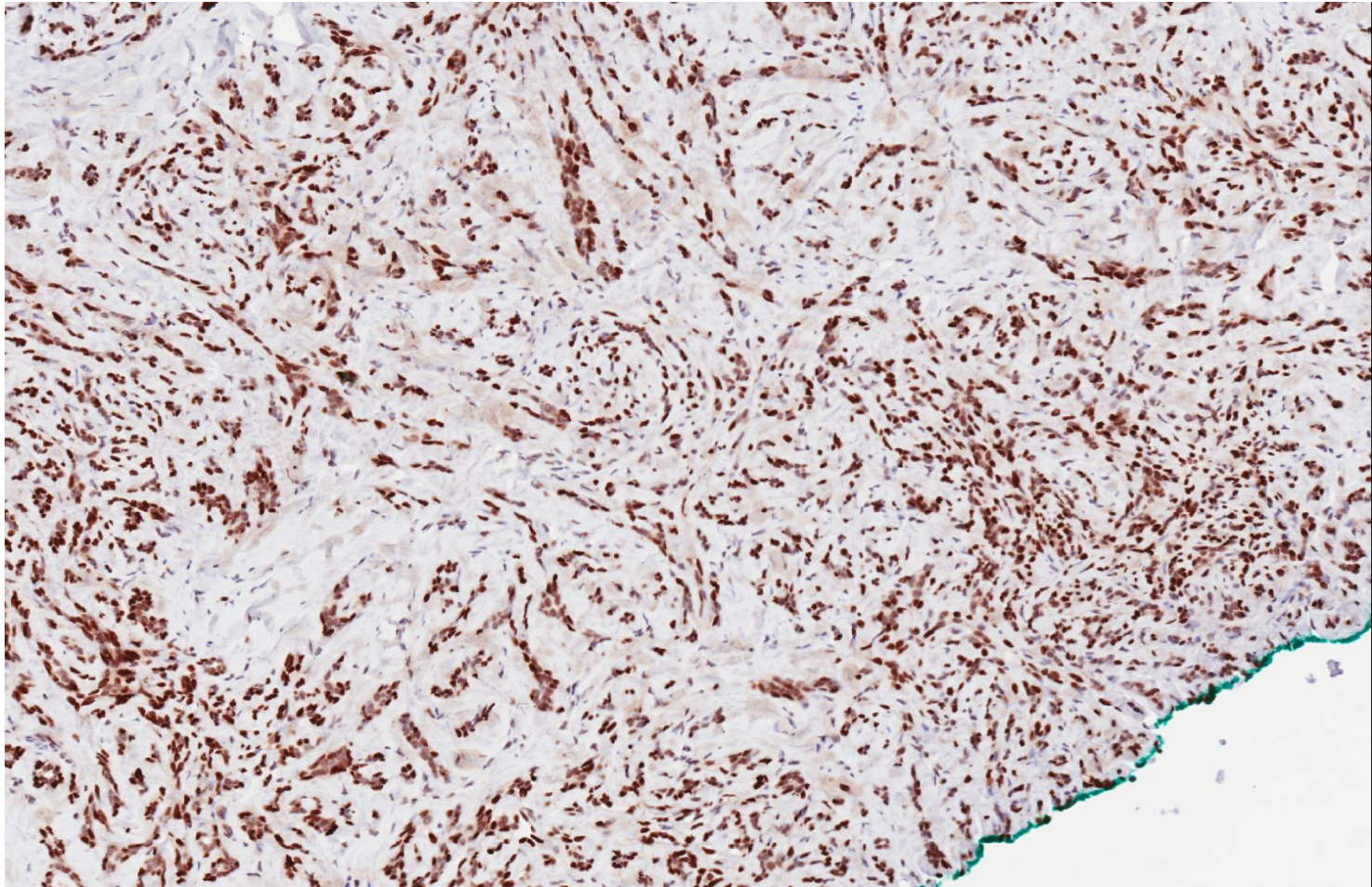
p63



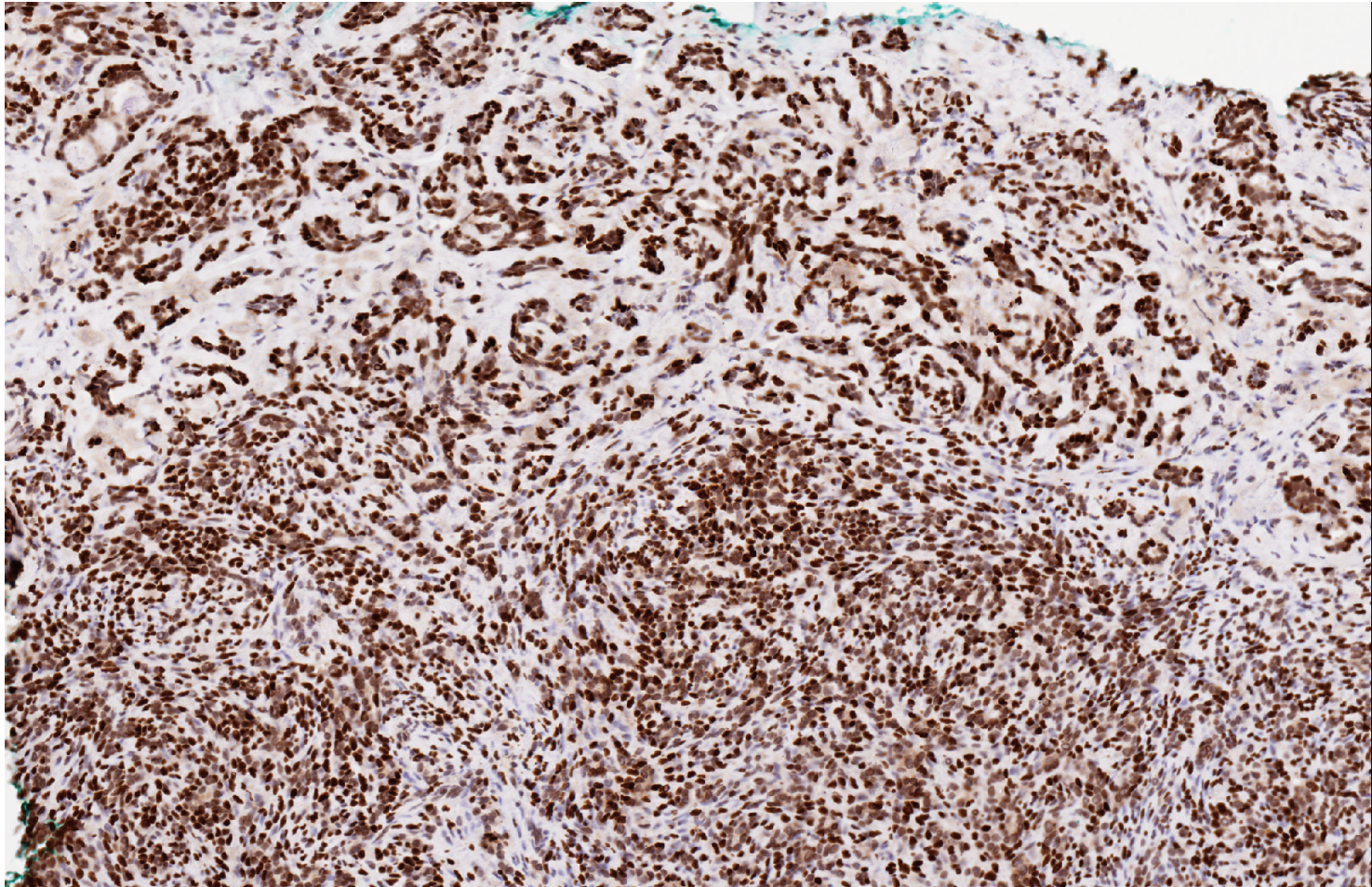
p63



p63



p63



- Nodular sclerosing adenosis with fibrocystic changes.

Sclerosing adenosis

- Lobulocentric proliferation of glands and tubules, accompanied by stromal proliferation, with compression and distortion of glands.
- Usually incidental microscopic finding.
- Occasionally discovered on mammography as density or microcalcifications.
- Perineural involvement can be seen on histology.
- **Nodular adenosis/adenosis tumour** refers to florid sclerosing adenosis resulting in radiologic lesion or palpable mass.
- 1.5 – 2x increased risk of subsequent breast cancer development.
- When found on core biopsy, further excision is not required.

Learning points

- Diagnosis of sclerosing adenosis.
- Differential diagnoses of cellular spindle cell areas.
- Exclusion of stromal lesions.
- Radiologic correlation with hypoechoic lesion.