

Case 35

58 year old Chinese female.
Right breast wide excision.



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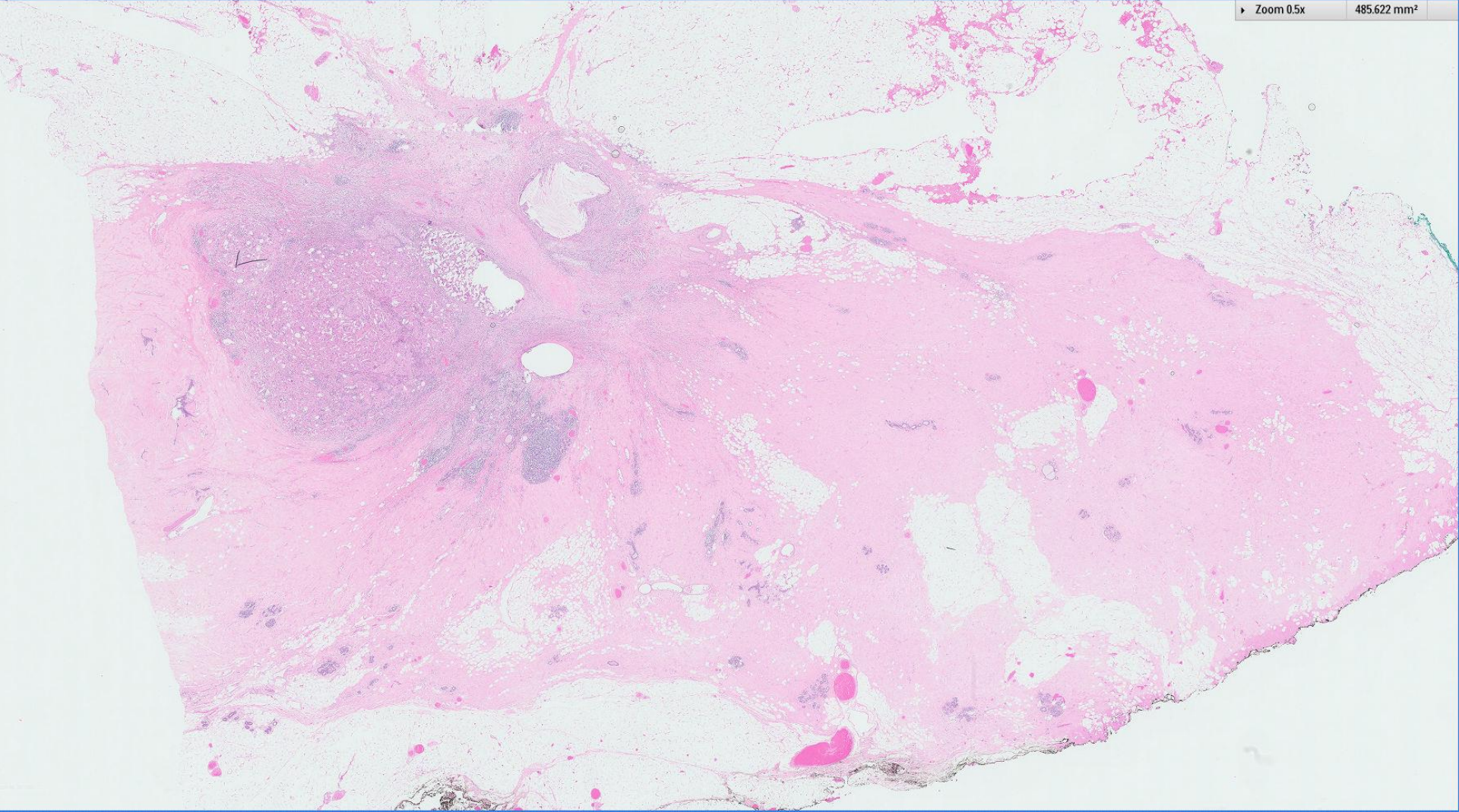


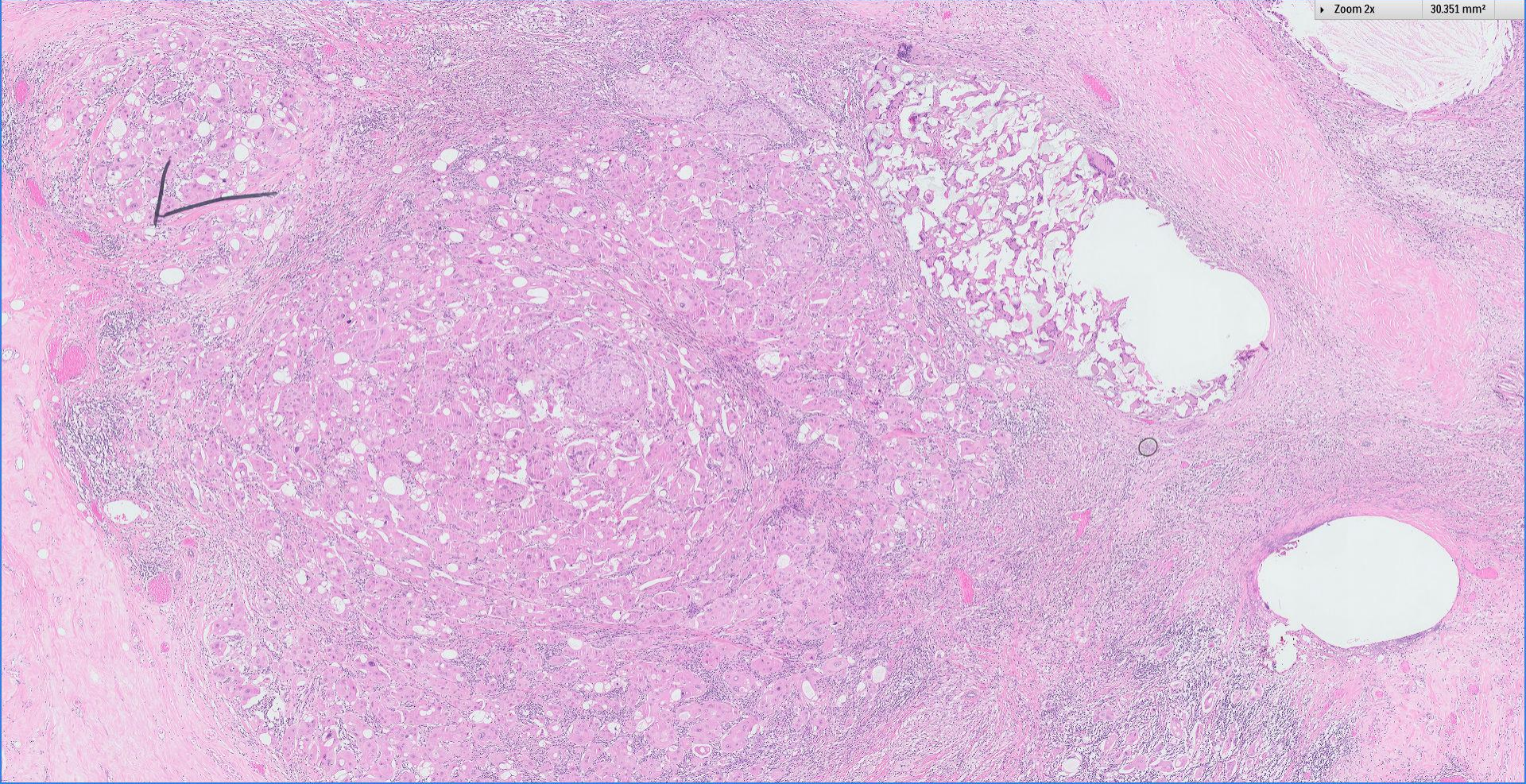
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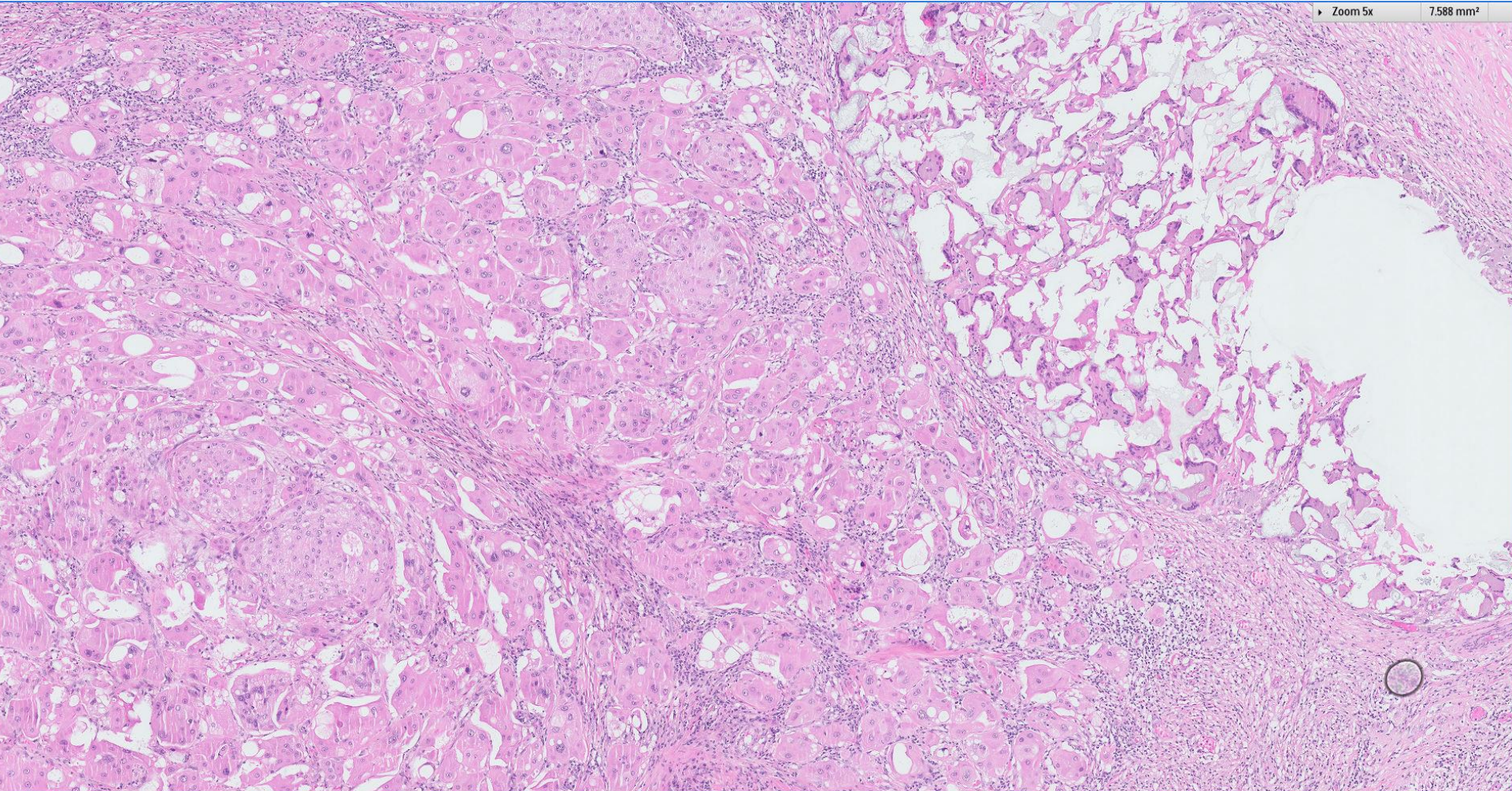
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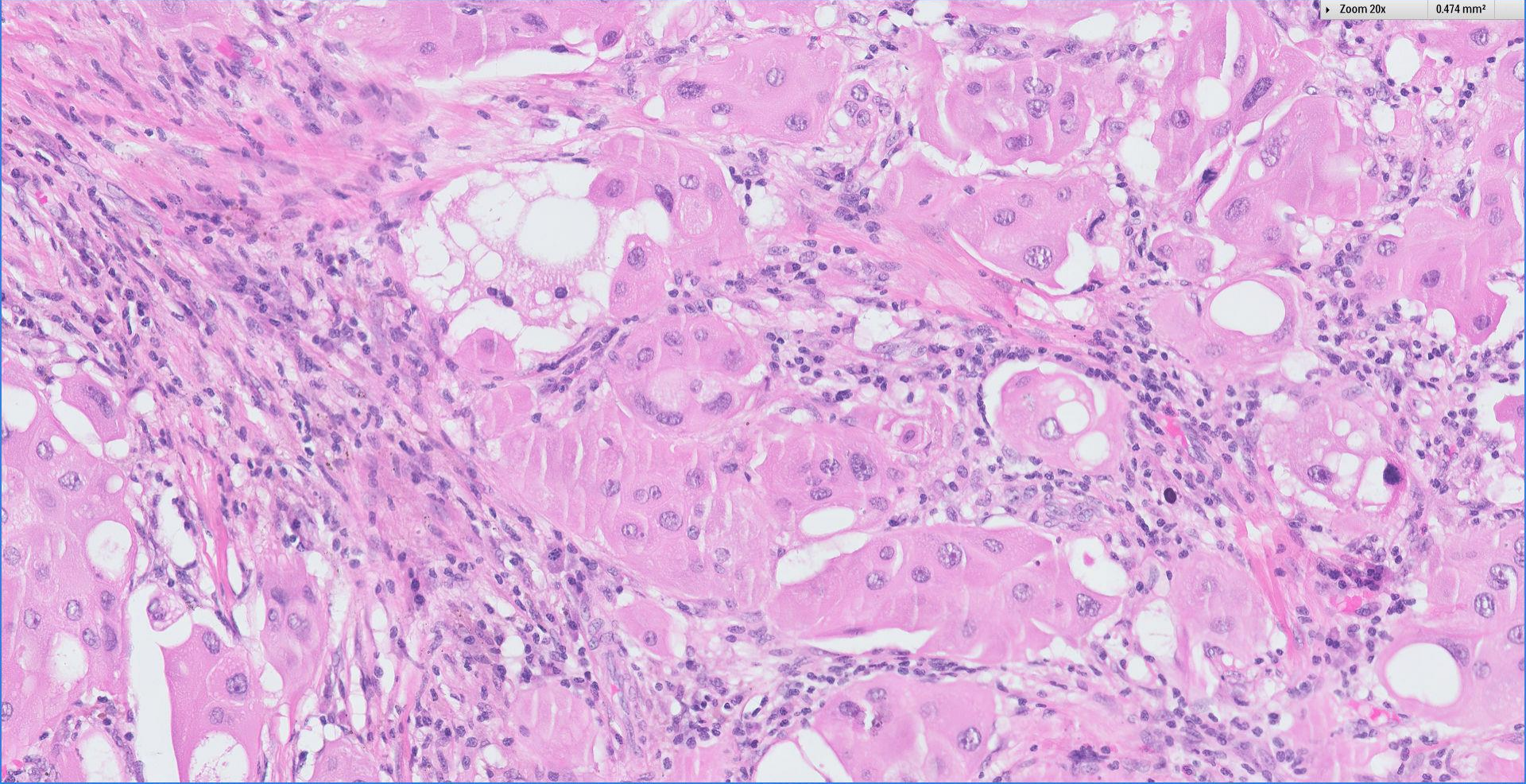






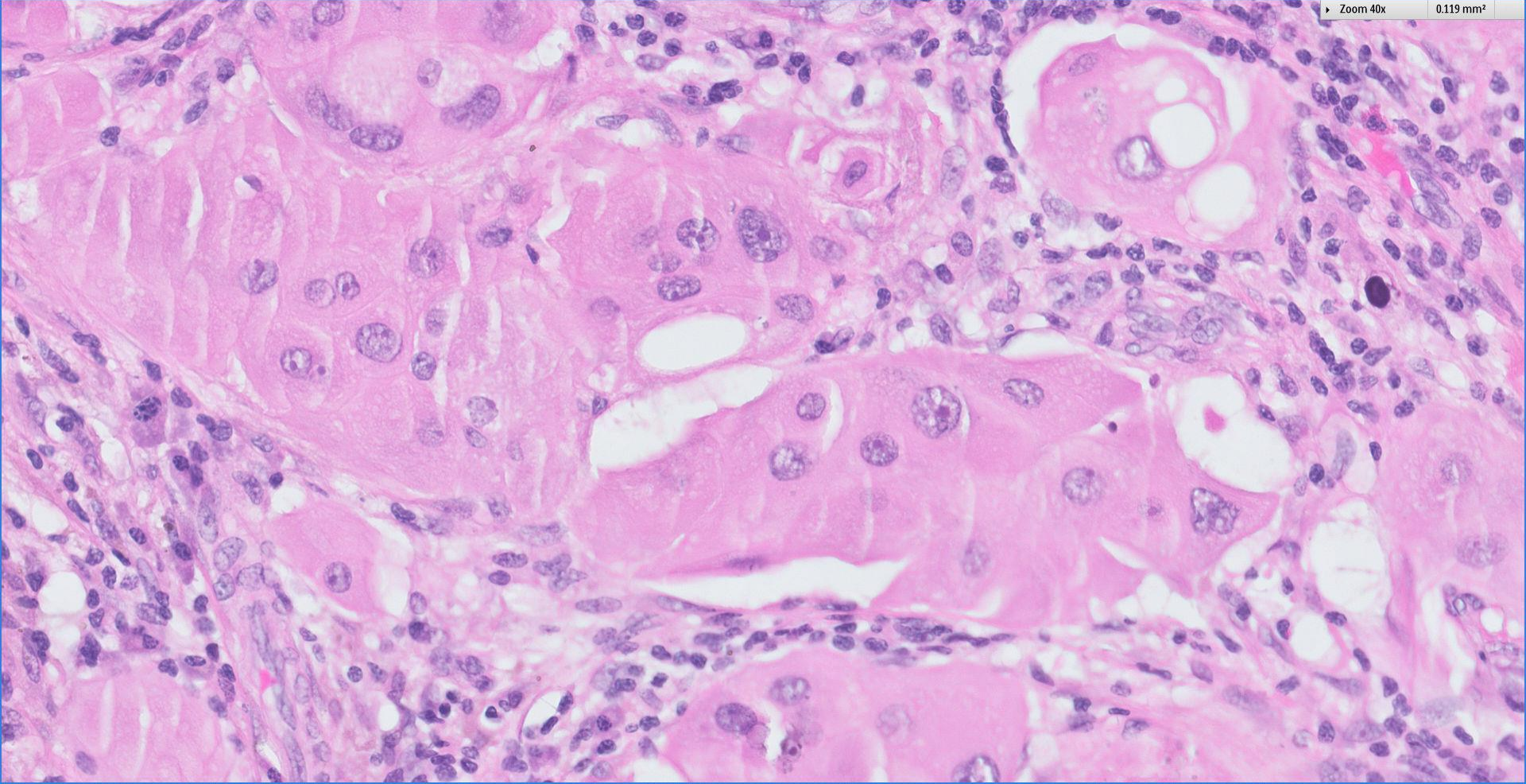
Zoom 20x

0.474 mm²



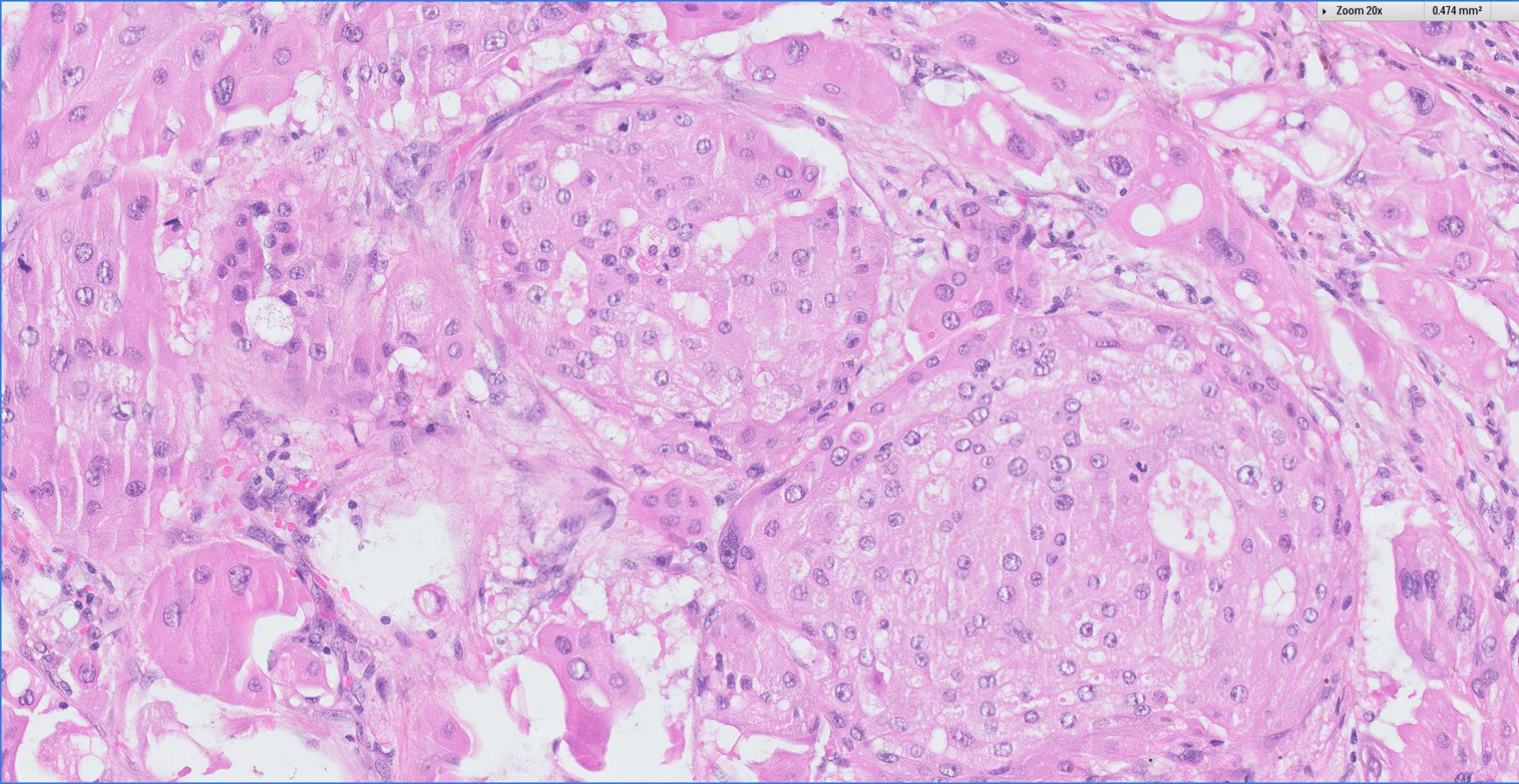
Zoom 40x

0.119 mm²



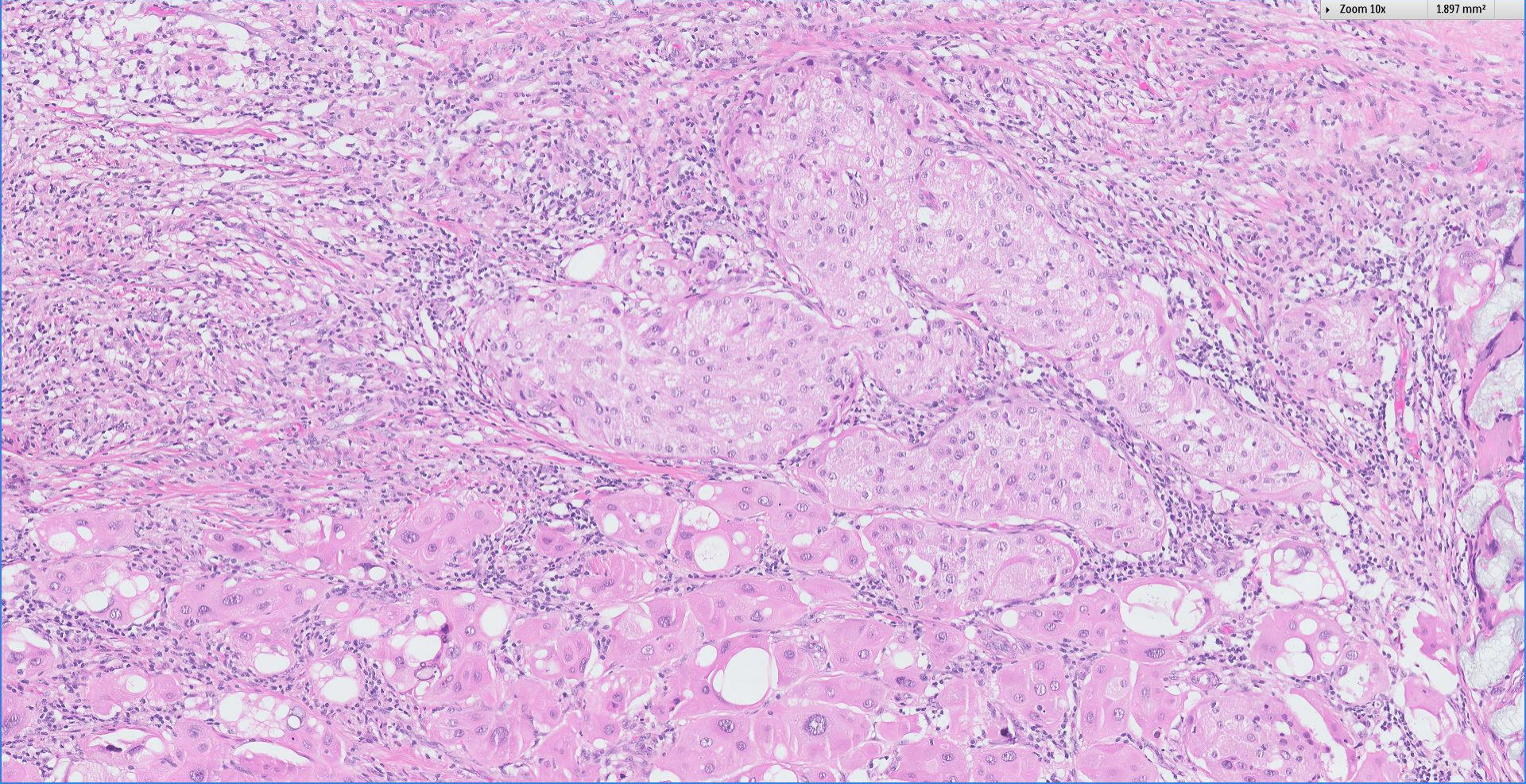
Zoom 20x

0.474 mm²



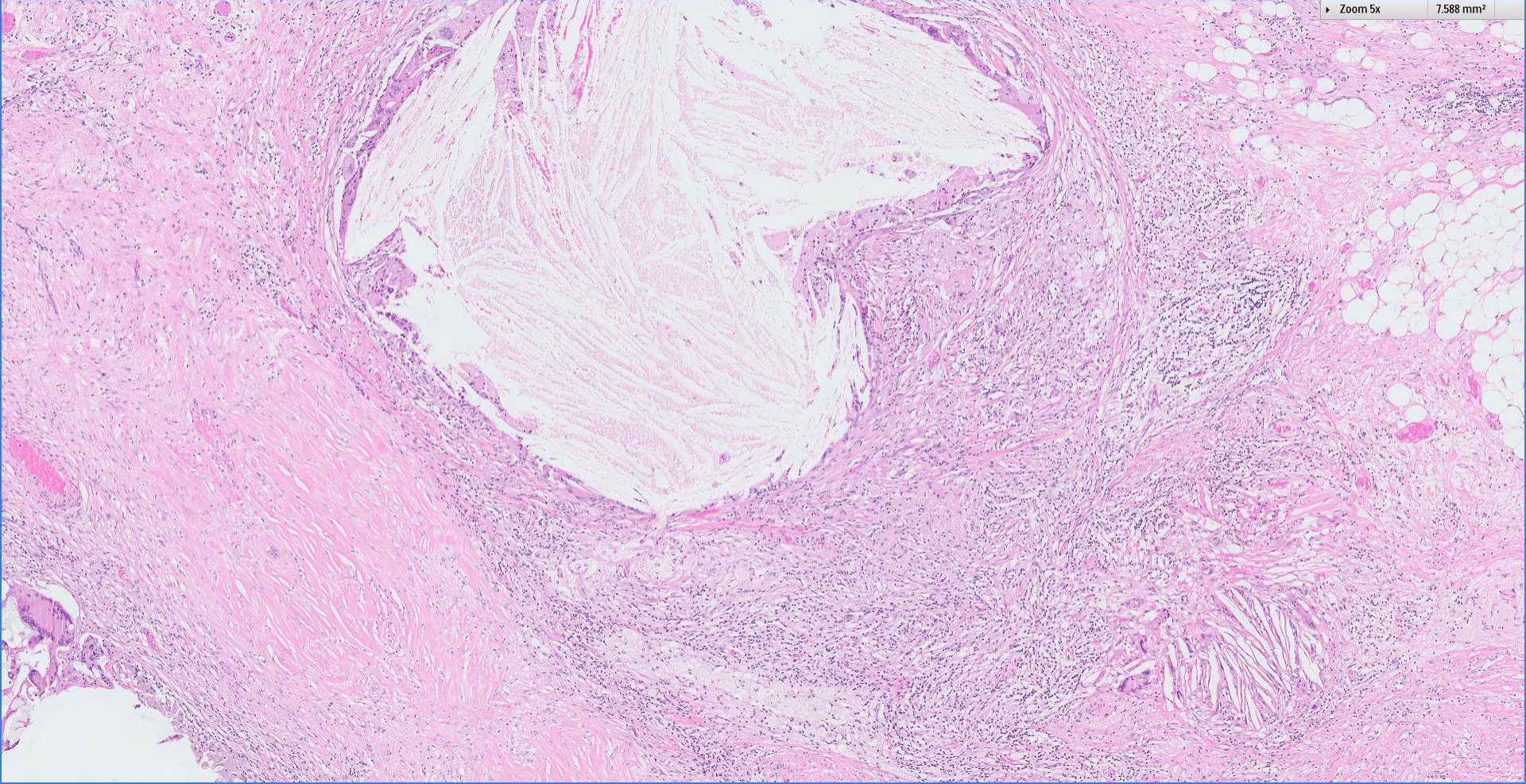
Zoom 10x

1.897 mm²



Zoom 5x

7.588 mm²



Diagnosis

Right breast wide excision ~

Residual invasive carcinoma with apocrine features,
4.5mm.

Previous biopsy site.



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Invasive apocrine carcinoma

- Generally regarded as a morphologic variant of invasive breast carcinoma not otherwise specified, rather than a special type of invasive cancer.
- Term should be reserved for neoplasms in which almost all tumour cells show apocrine cytological features.
- Focal apocrine differentiation is quite common and has been reported in up to 60 % of invasive carcinomas of no special type.



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Table 7.1 Immunohistochemical profile of apocrine lesions of the breast

Marker	Benign Lesions, %	Carcinomas, %
Androgen receptor	>90	>80
Oestrogen receptor	0	<10
Progesterone receptor	0	<10
c-erbB-2	10 ^a	50
EGFR	0	50
p53	10	50
Bcl-2	0	50
E-cadherin	>90	80
GCDFP-15	>90	85

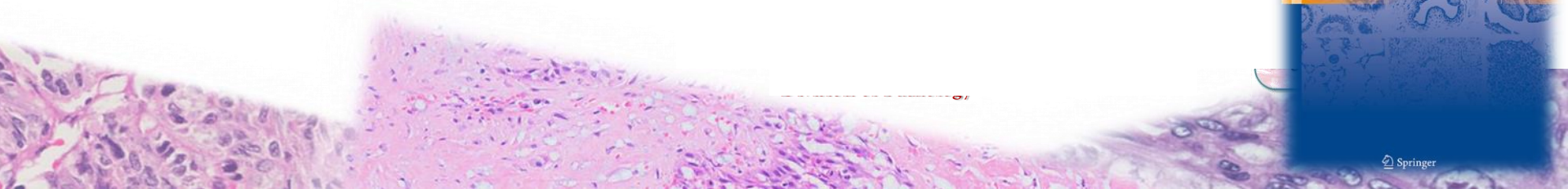
^aImmunohistochemistry positive, gene amplification negative

EGFR epidermal growth factor receptor, *GCDFP* gross cystic disease fluid protein

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Aysegül A. Sahin

Atlas of Differential
Diagnosis in
Breast Pathology

Springer



Invasive apocrine carcinoma ~ differential diagnosis

- Breast neoplasms with abundant cytoplasm
 - Granular cell tumour
 - Histiocytoid carcinoma
 - Lipid rich carcinoma
 - Secretory carcinoma
 - Invasive carcinoma with squamous differentiation



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