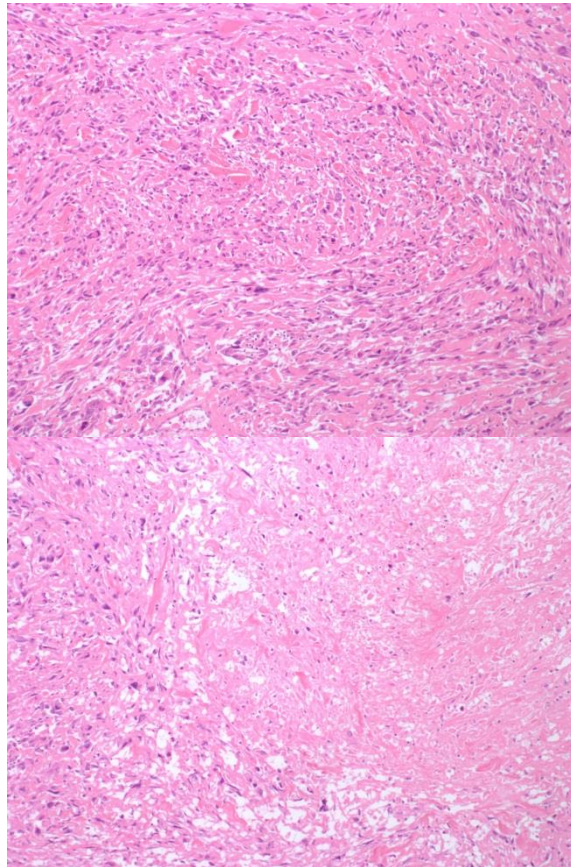
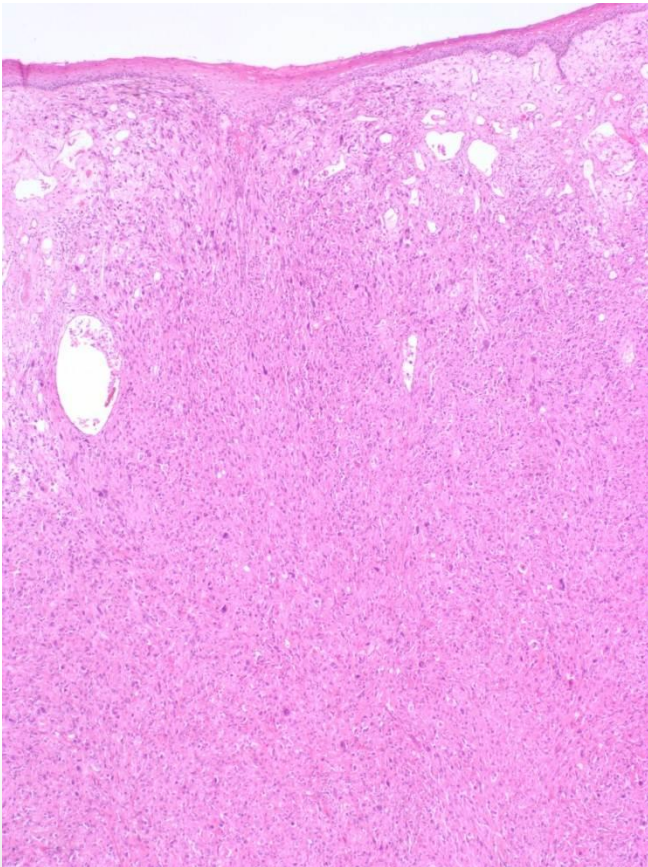
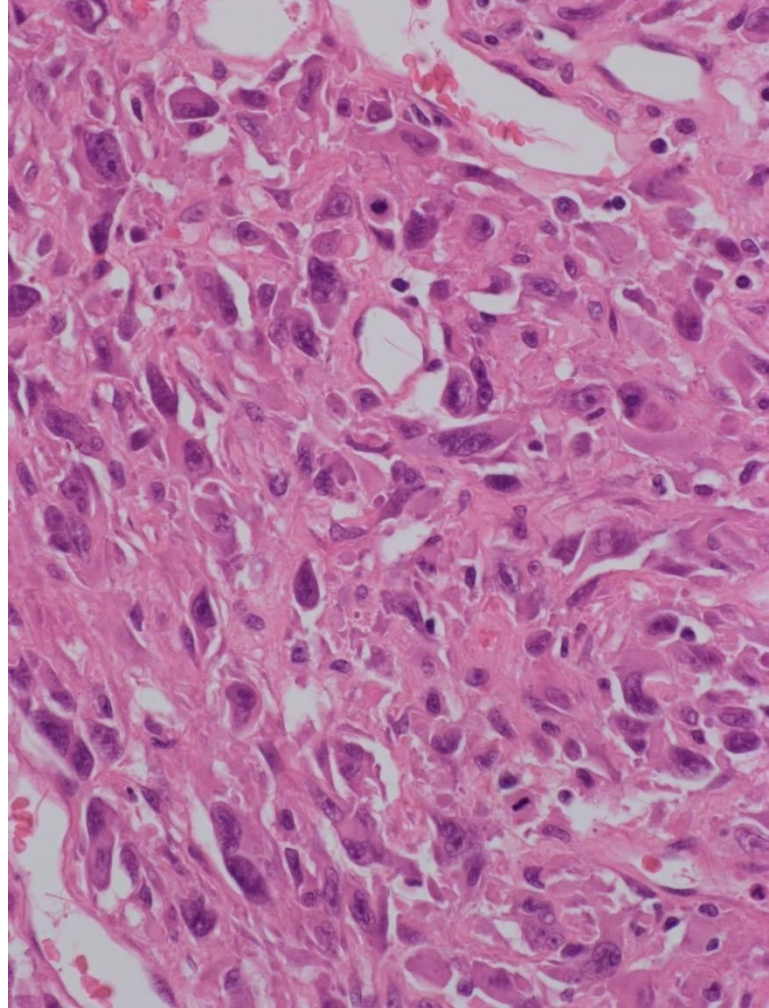
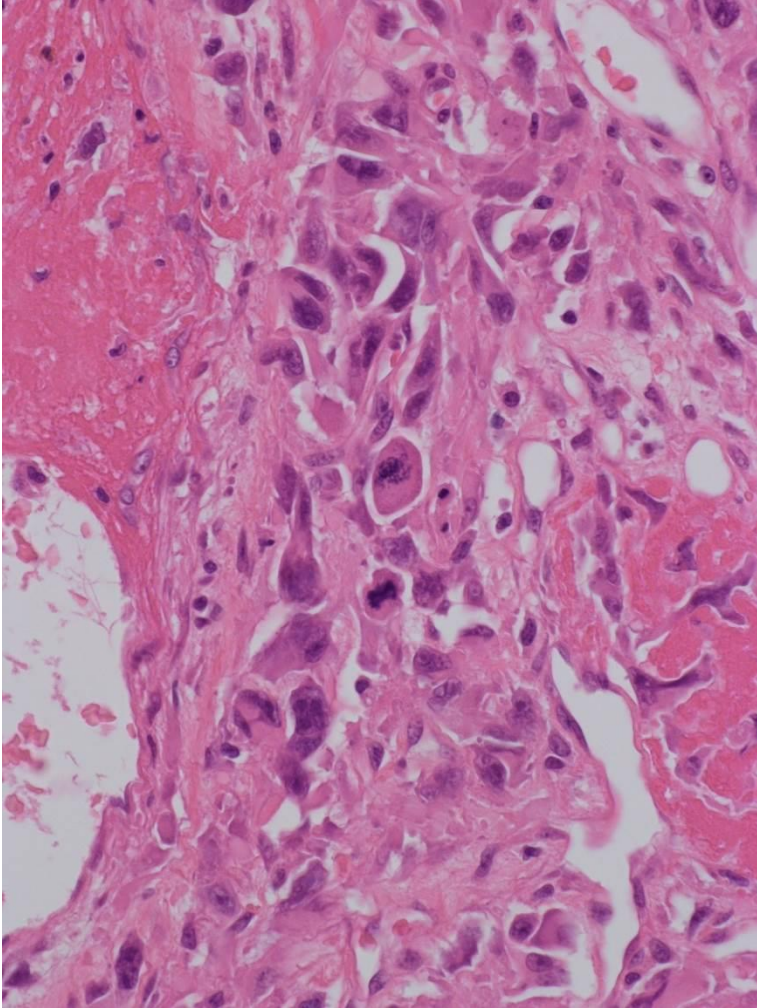


Case 5

- 80 year old female. Clinically malignant mass in left inframammary fold.

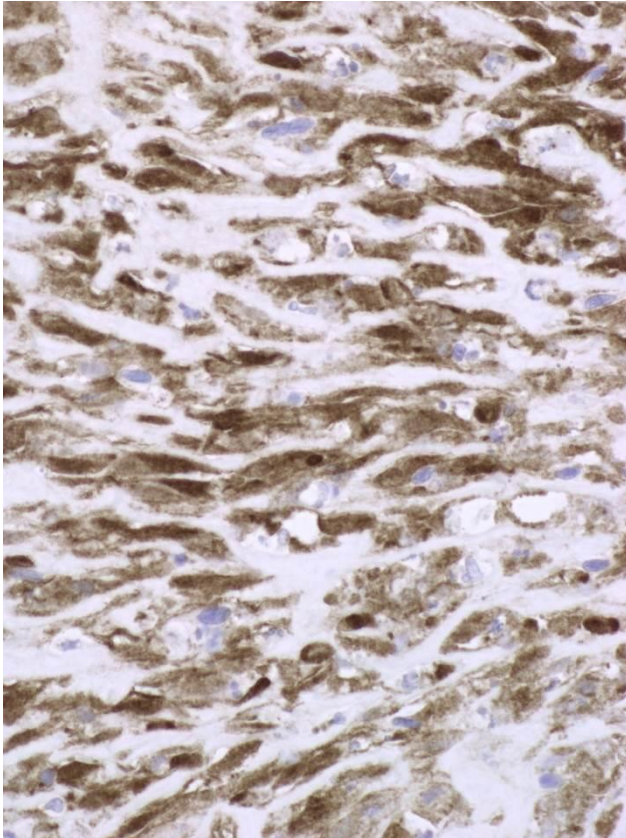


Case 5

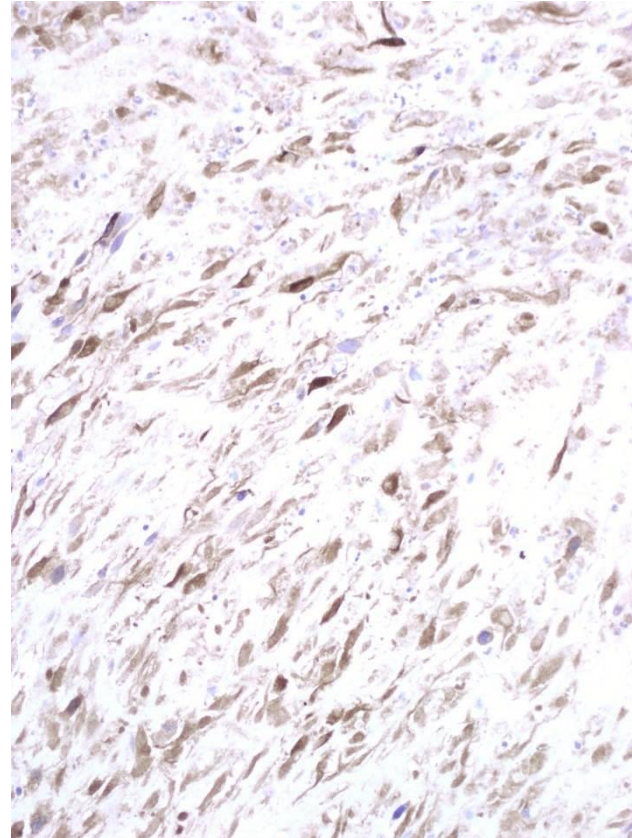


Case 5

CK 7



CK AE1/ AE3



Case 5

- Core biopsy – malignant spindle cell lesion. Occasional cells positive for CK 7, CK 14, CK MNF and CK AE1/ AE3. Desmin positive. ER, HER2, P63, CD31, CD 34, S100 and myogenin negative.
- DDx includes spindle cell metaplastic carcinoma – pending final excision.
- Excision – malignant tumour with spindle cell and focal epithelial elements; positivity for CK 7 and AE1/ AE3.
- Final Dx - 70 mm grade 3 invasive metaplastic carcinoma.

Metaplastic carcinoma

- Low grade adenosquamous
 - Fibromatosis-like
 - Spindle cell carcinomas
 - Matrix producing carcinomas
 - Squamous cell carcinomas
-
- 'All spindle cell lesions of the breast are metaplastic carcinoma until proven otherwise' – Sarah Pinder

Metaplastic carcinoma

- Clues – associated NST carcinoma or DCIS
nuclear atypia or mitoses
associated chronic inflammation
- ER/ PgR/ HER2 negative

Metaplastic carcinoma

- Cam5.2 – 21% -52%
- AE1/AE3 – 79% -85%
- EMA – 33% positive
- Broad spectrum CK – 96% positive, 74% in >50% cells
- CK8/18 – 82-100%
- CK5 – 39%; CK14 – 33%
- CK7 – 17%
- CD34 – 0%
- NEED TO USE A PANEL OF CYTOKERATINS INCLUDING BROAD SPECTRUM AND BASAL CYTOKERATINS
- STAINING CAN BE VERY FOCAL

Metaplastic carcinoma

	CK	p63	Nuclear B-catenin	CD34
Phyllodes tumour	- (rare focal)	- (rare focal)	+	+/-
Metaplastic carcinoma	+ (often focal)	+/-	-/+	-
Fibromatosis	-	-	+	-

- Focal CK positivity seen in PT – MNF116 12%, CK7 28%, CK14 and Cam5.2 2%, AE1/3 8% . Associated with malignant subtype.
- Focal CK and p63 positivity identified in malignant PT (21% and 57% respectively);
- CD34 – 57% malignant PT positive, no staining in sarcomatoid carcinoma

Metaplastic carcinoma

- Behaviour intermediate between carcinoma and sarcoma
- Intermediate risk of axillary LN metastases – may relate to proportion of carcinomatous component
- Tendency to visceral metastases particularly lung
- Poor response to neoadjuvant chemotherapy
- Increased risk of local recurrence even with mastectomy – complete excision with good margins and RT important
- Poor survival: Median DFS 7 months (2-109/12)
- Median OS 18 months (4-109)