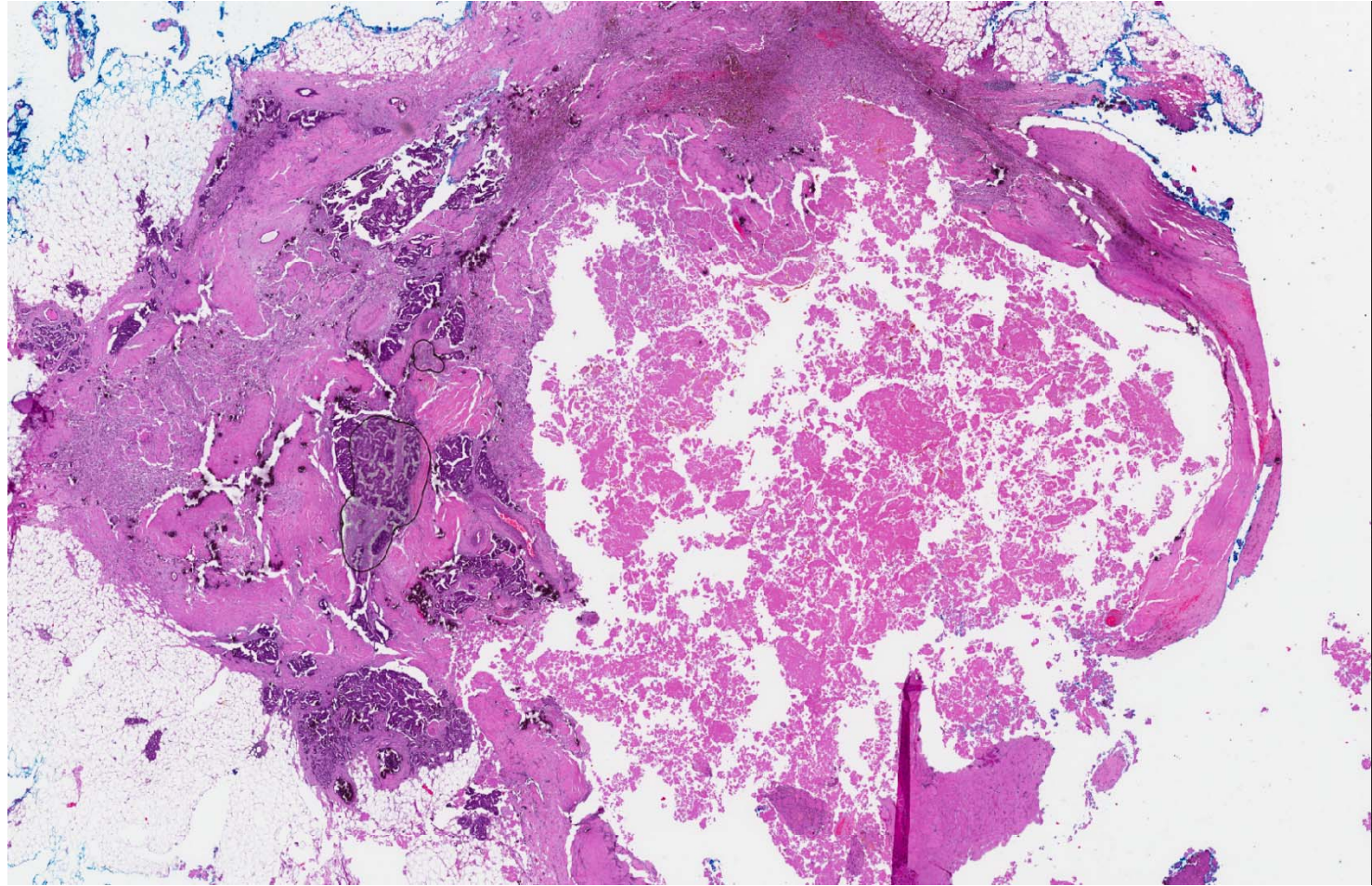
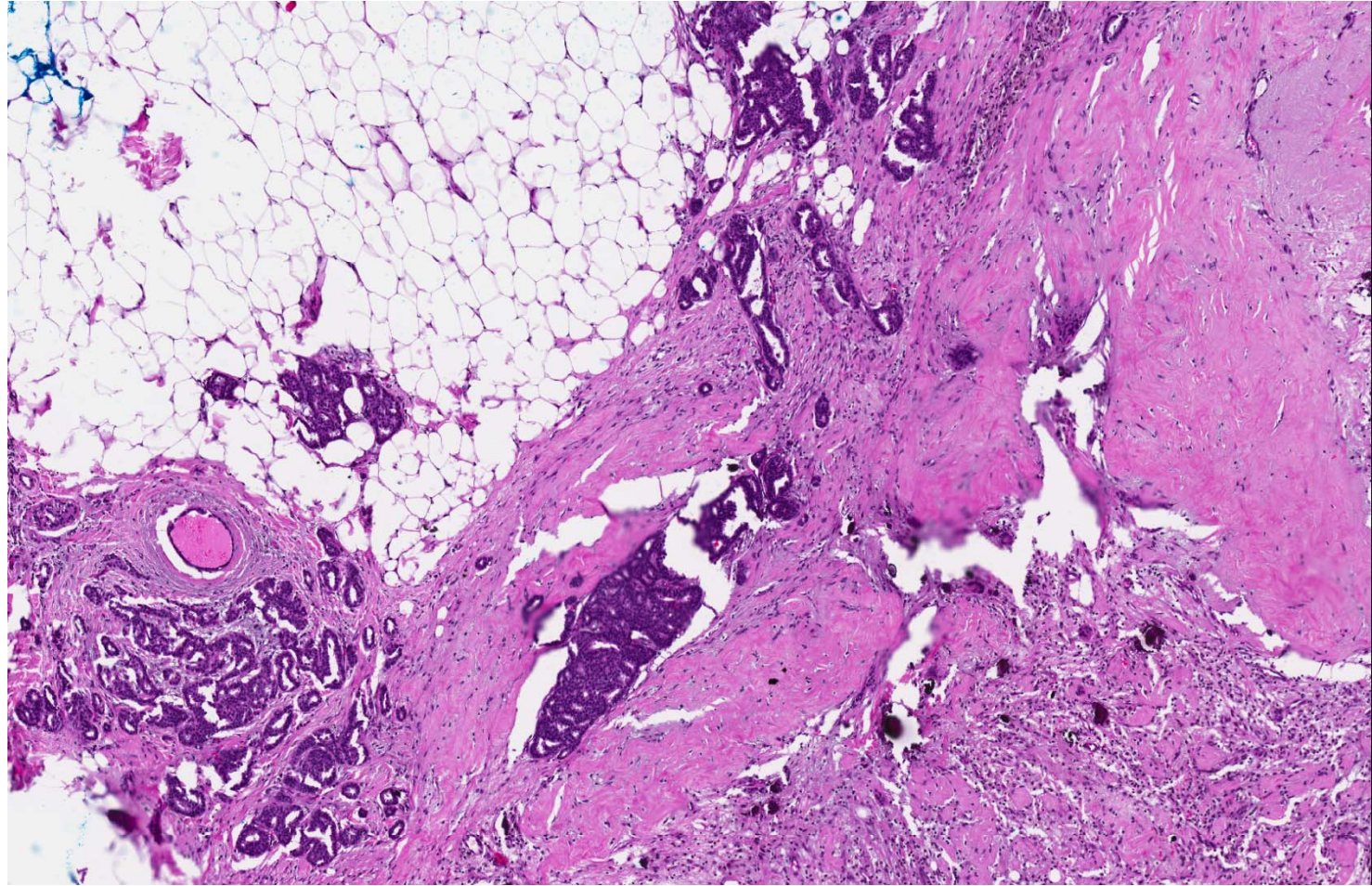
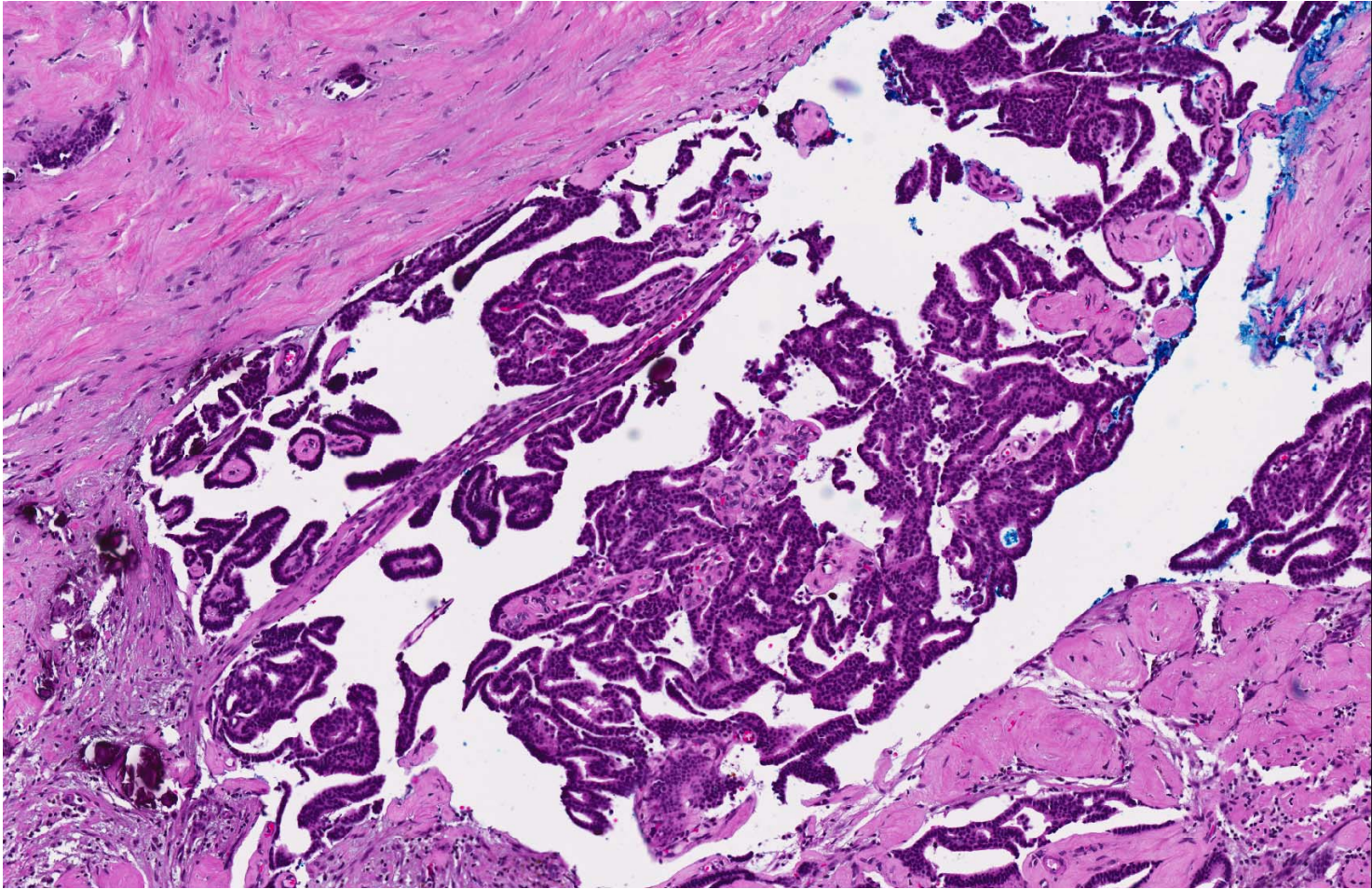
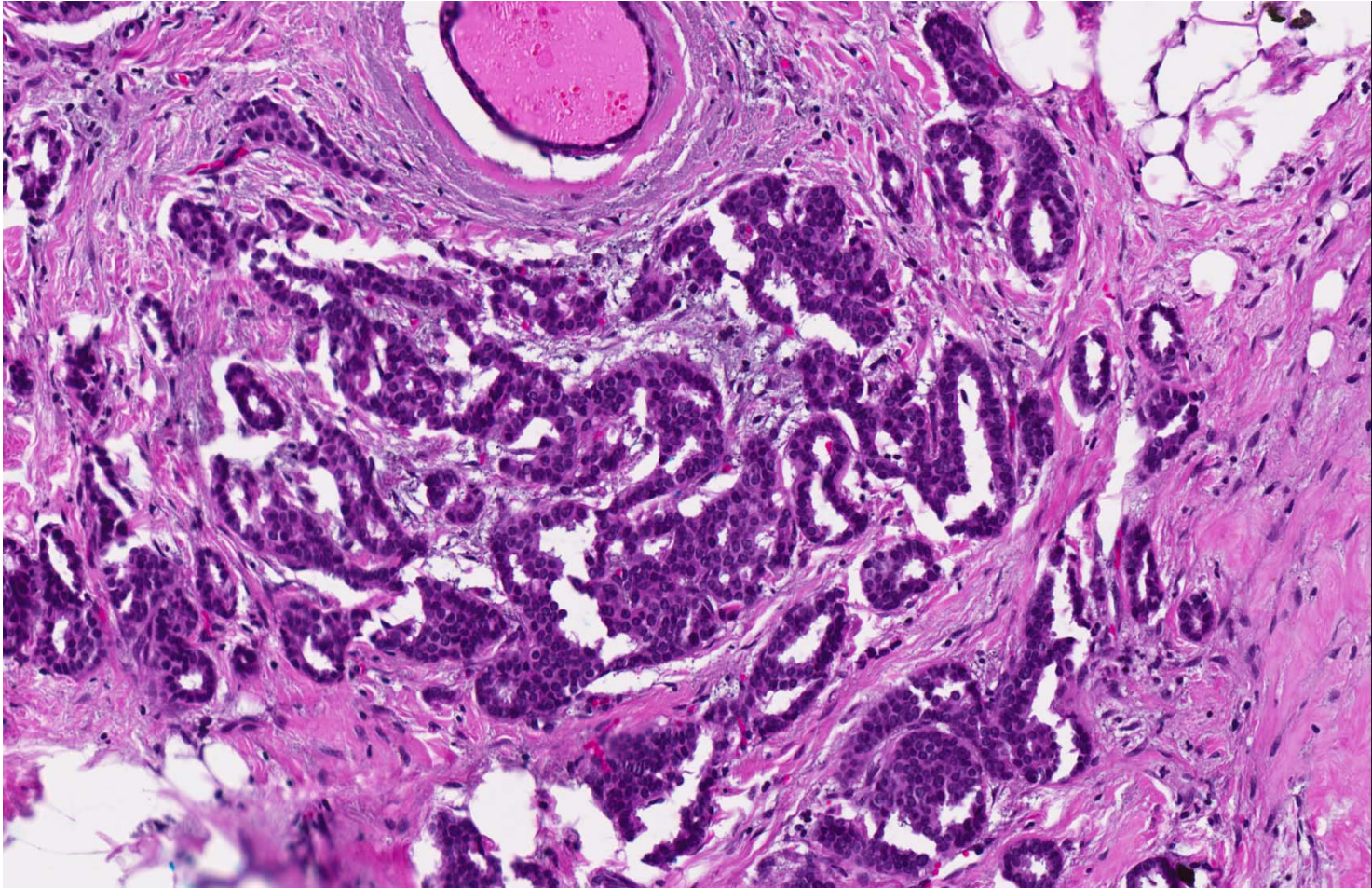


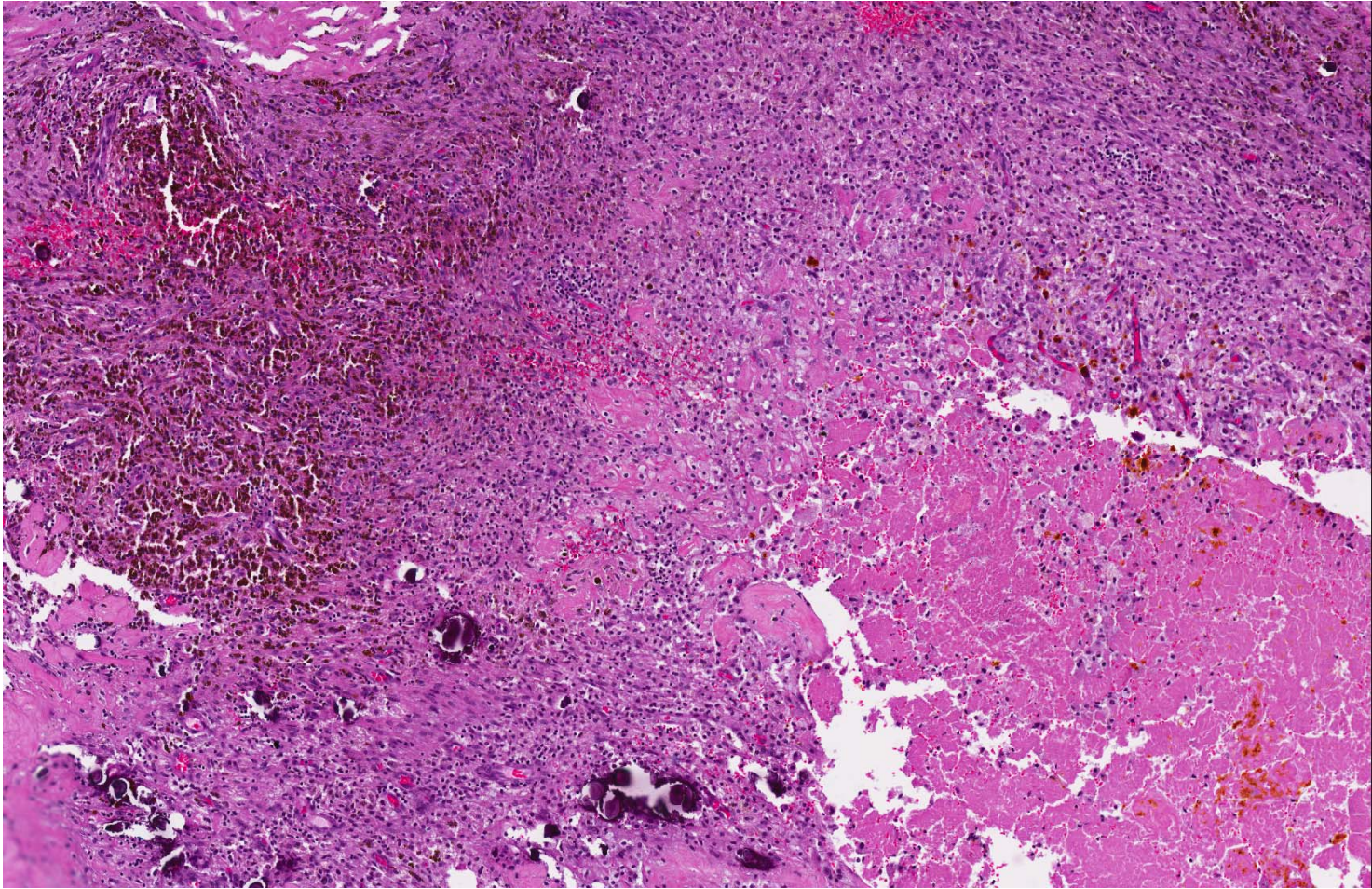
- Set A.9
- 64 year old Malay lady with a left breast lump. Excision specimen consisted of breast tissue containing a 1cm cyst with yellowish 'flaky' contents.

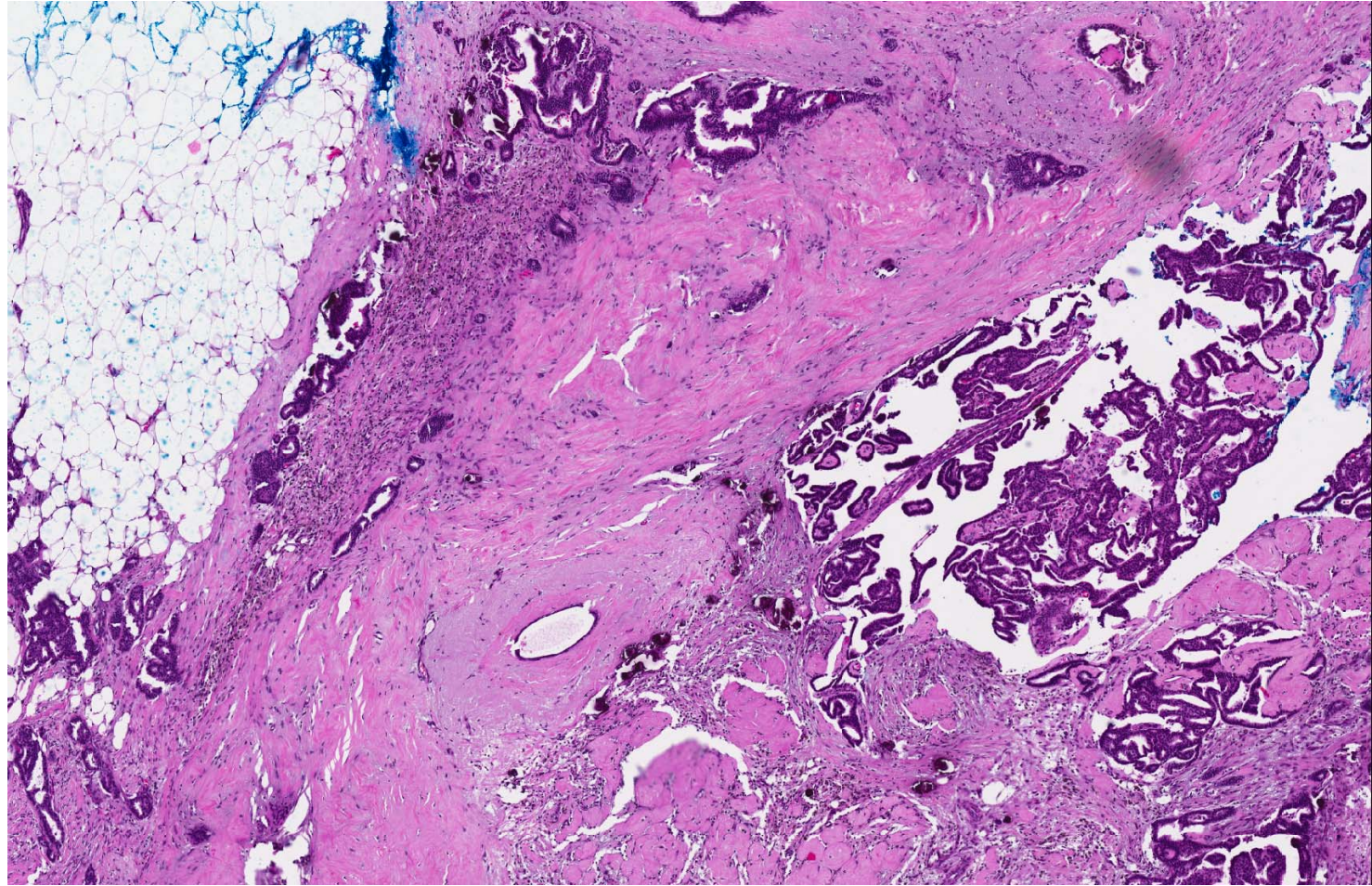


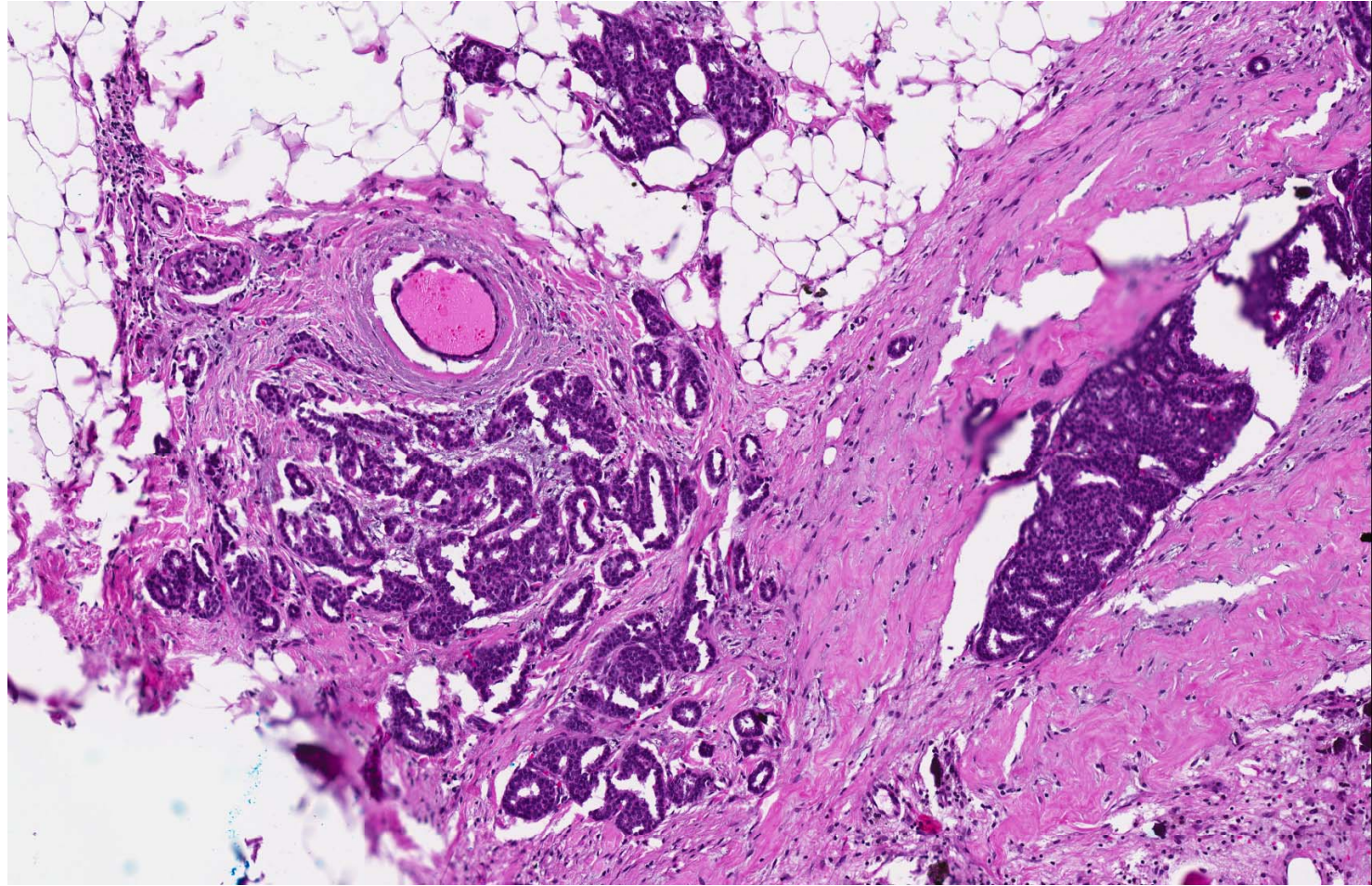




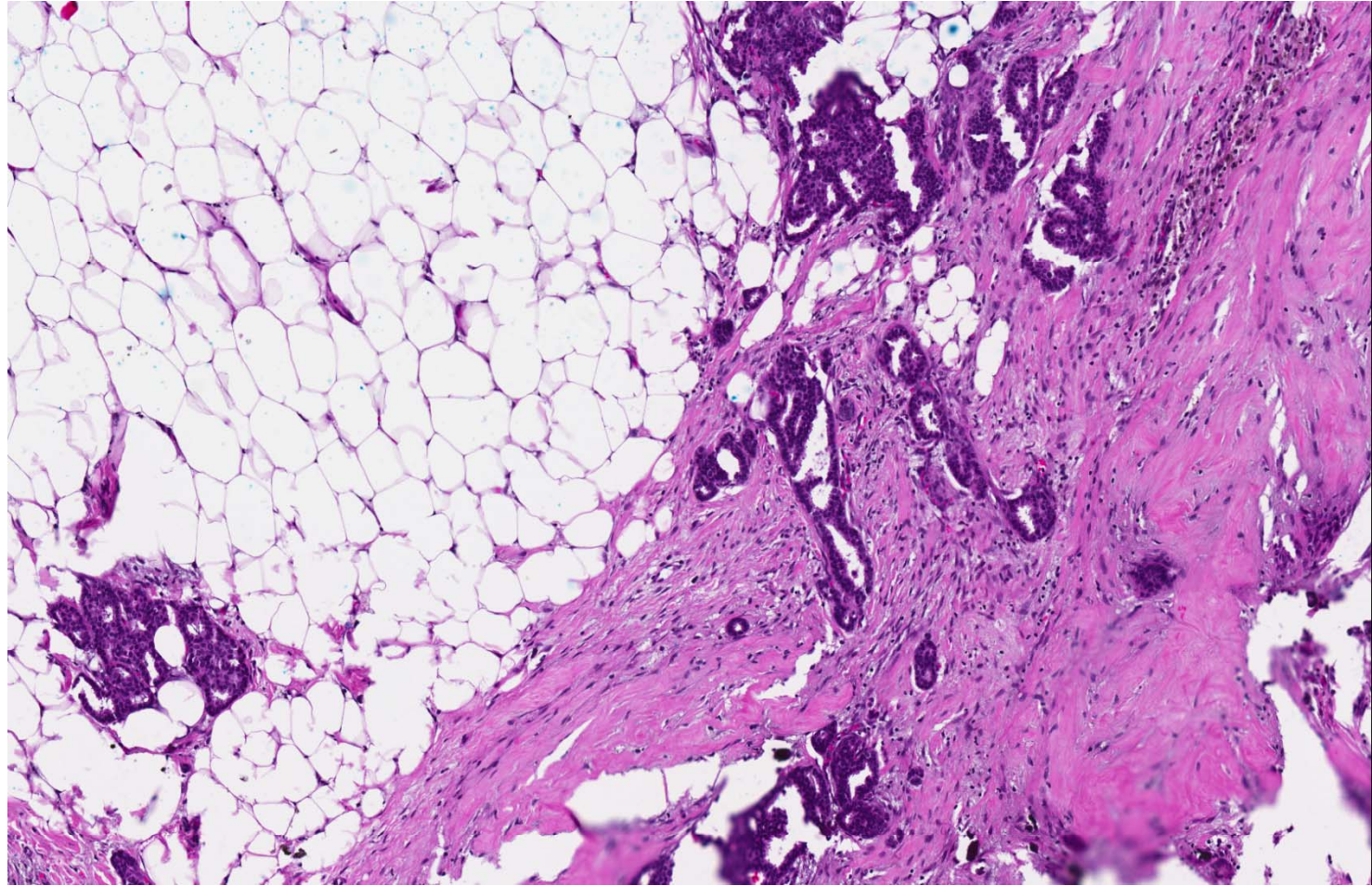


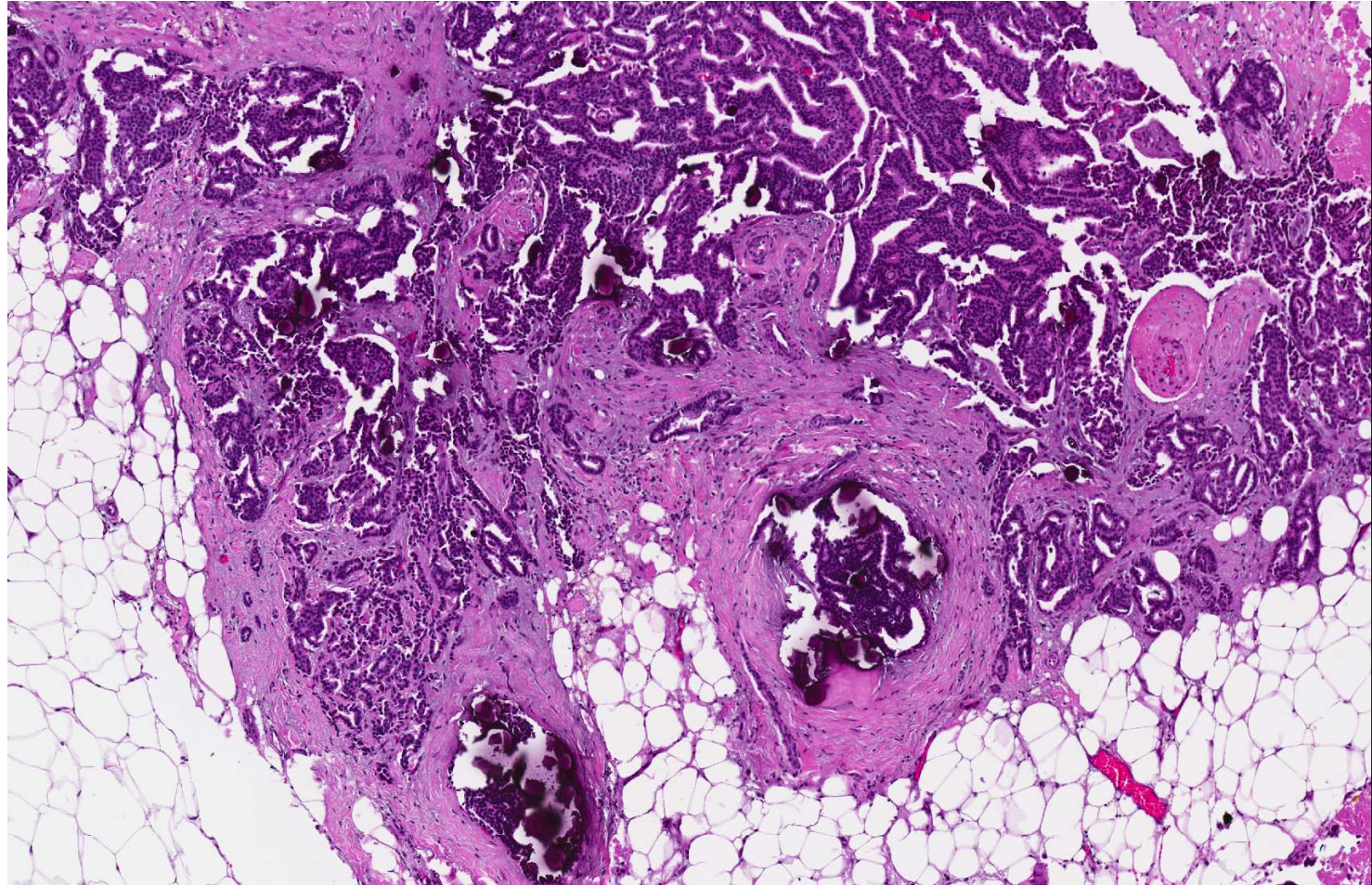


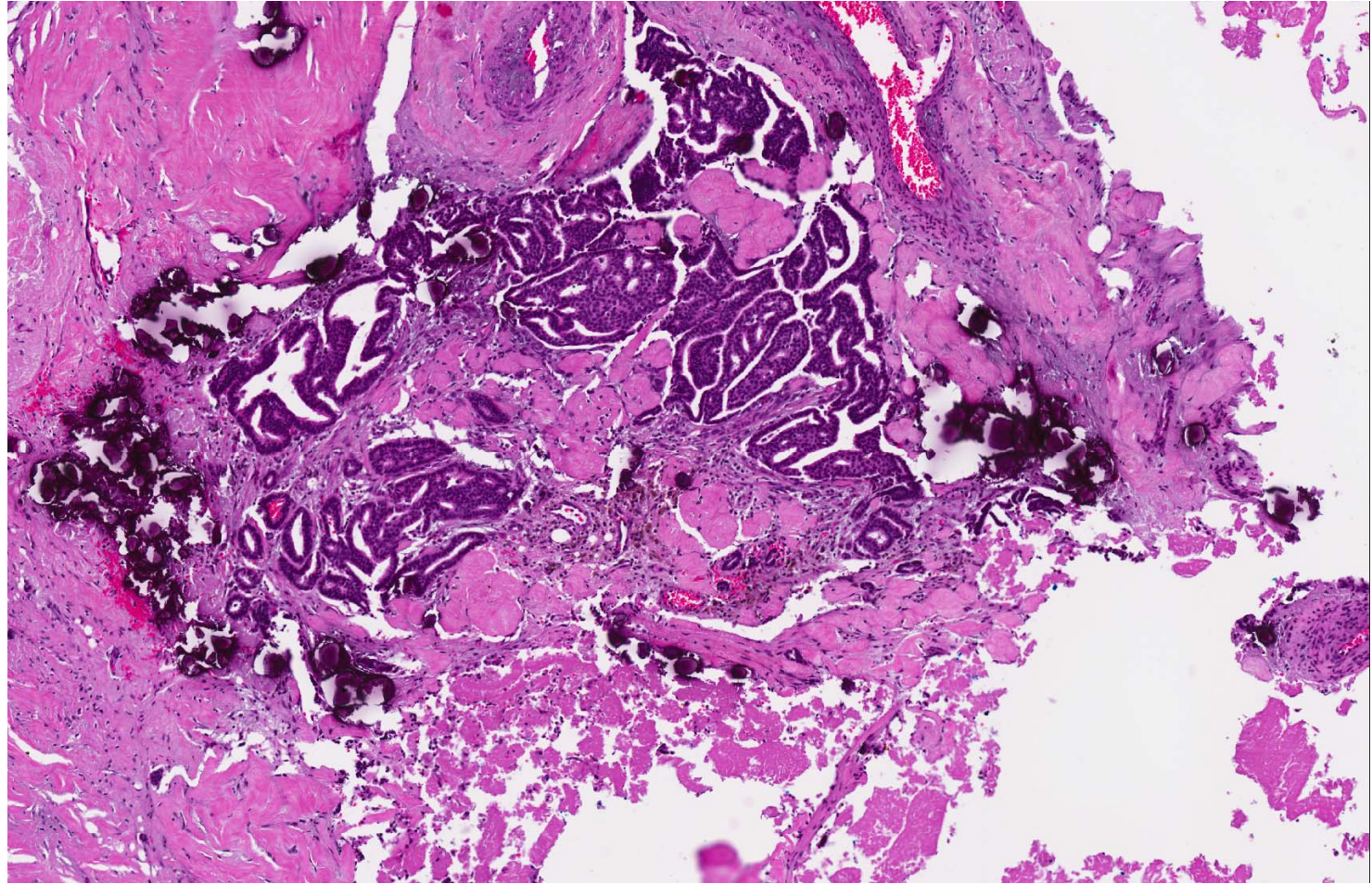




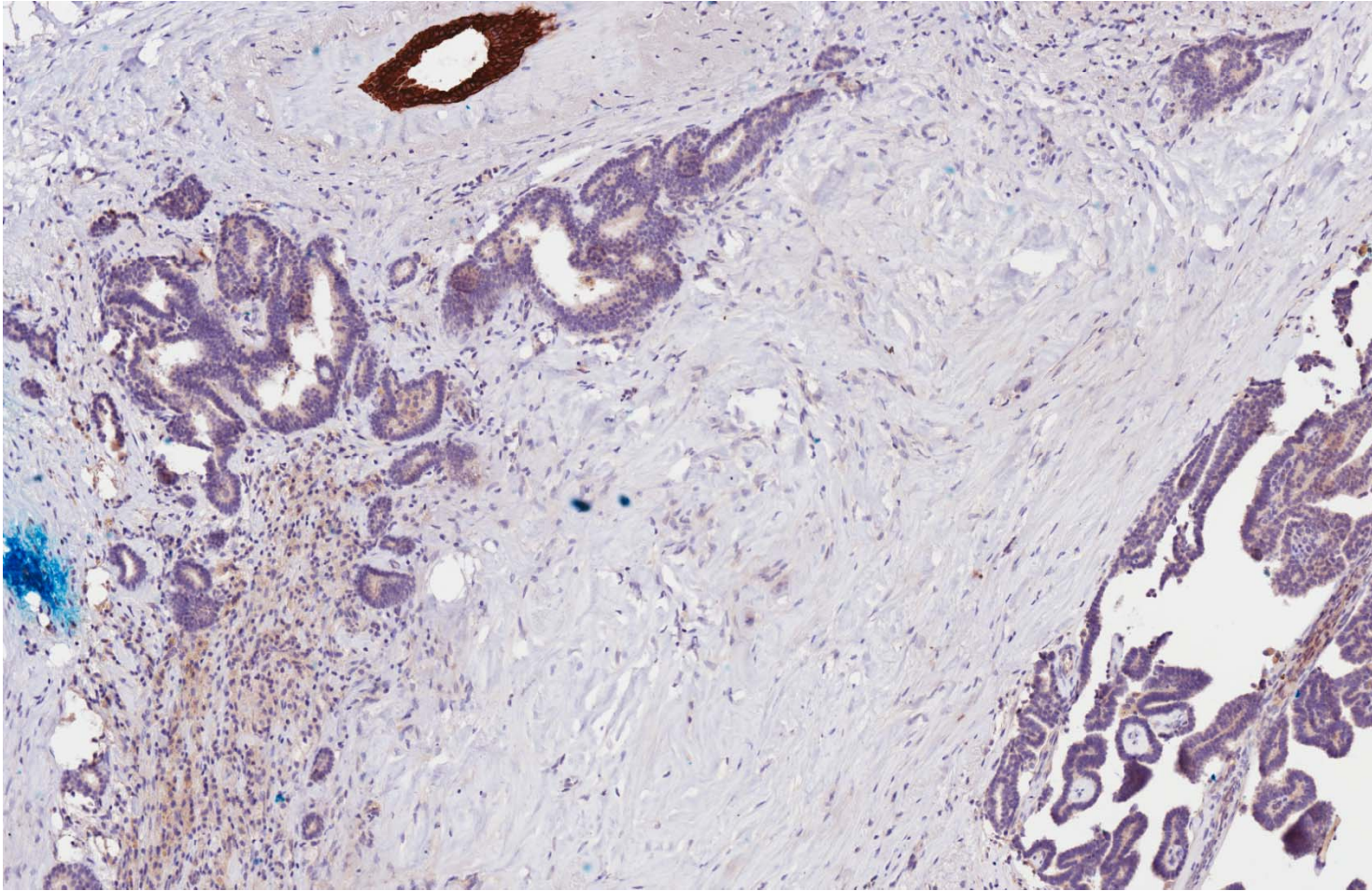




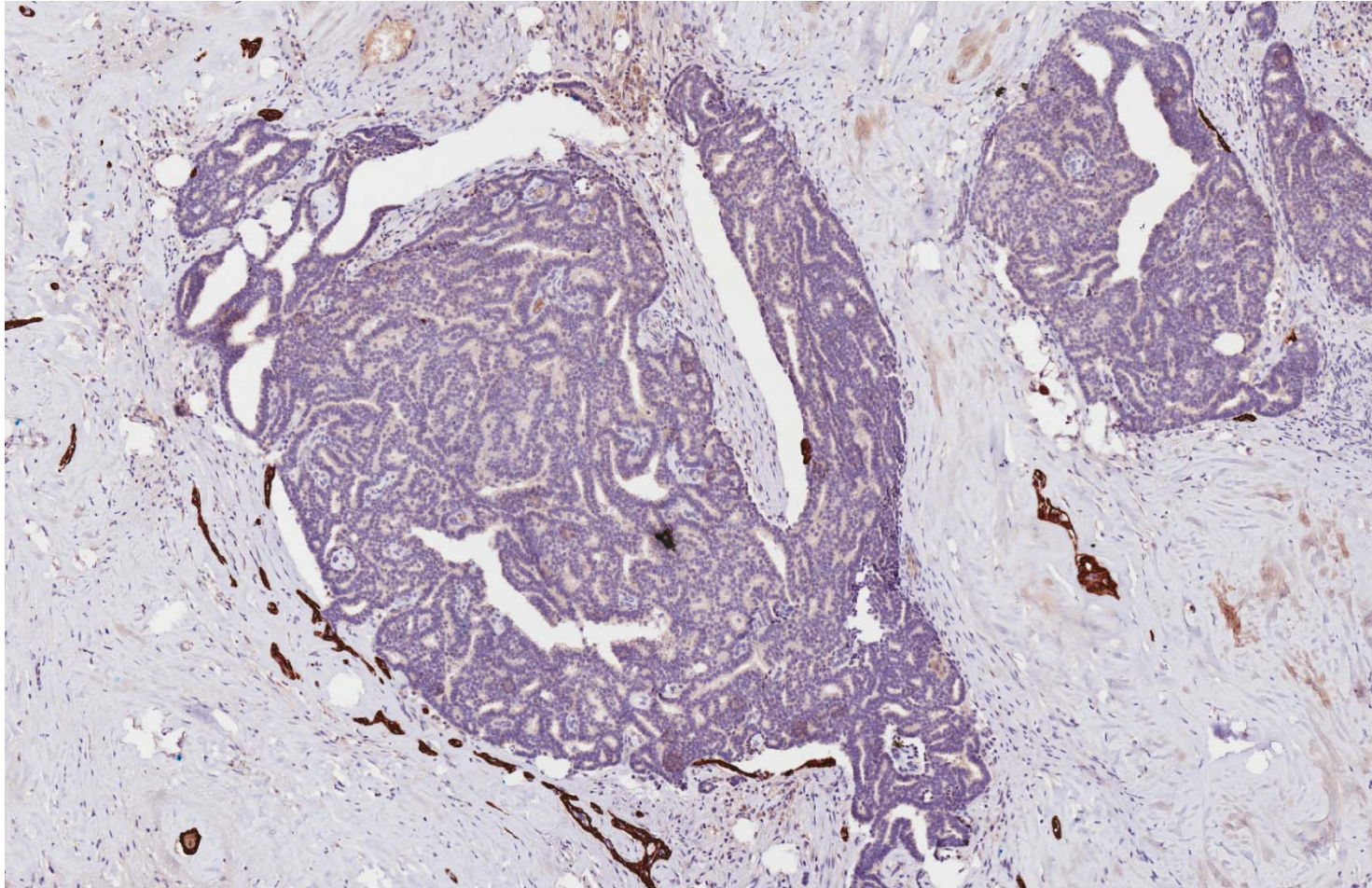




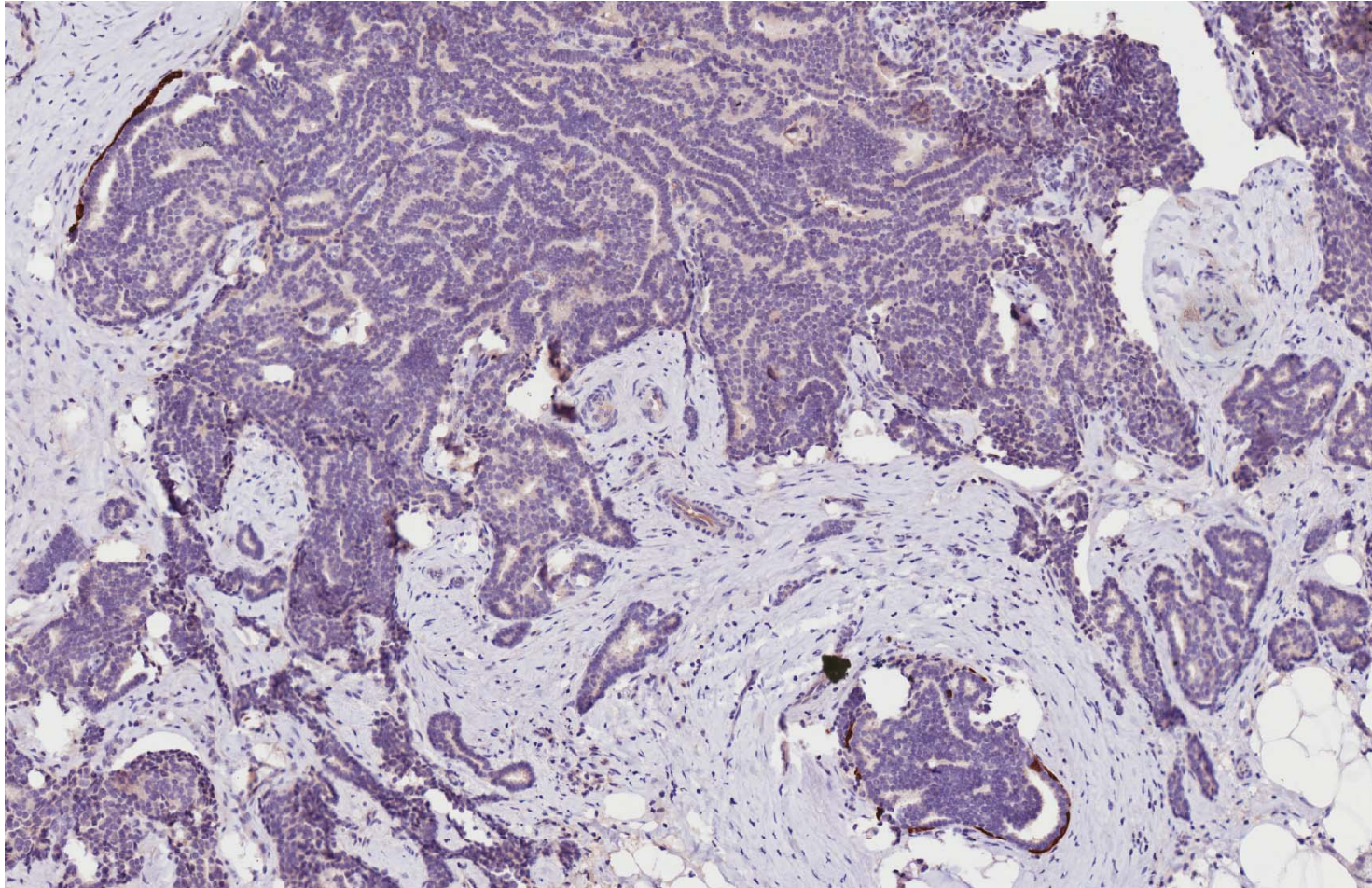
# CK14



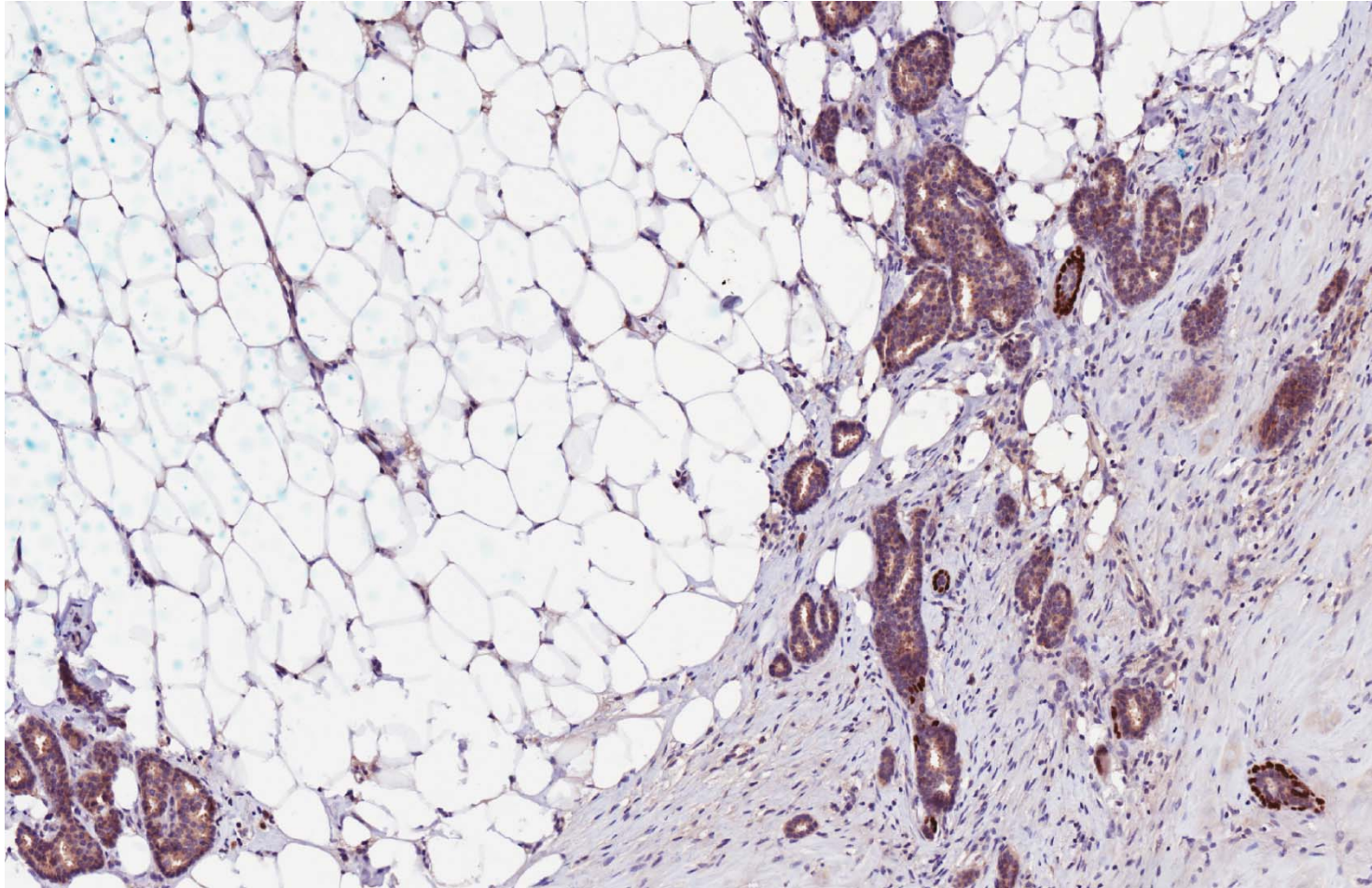
# CK14



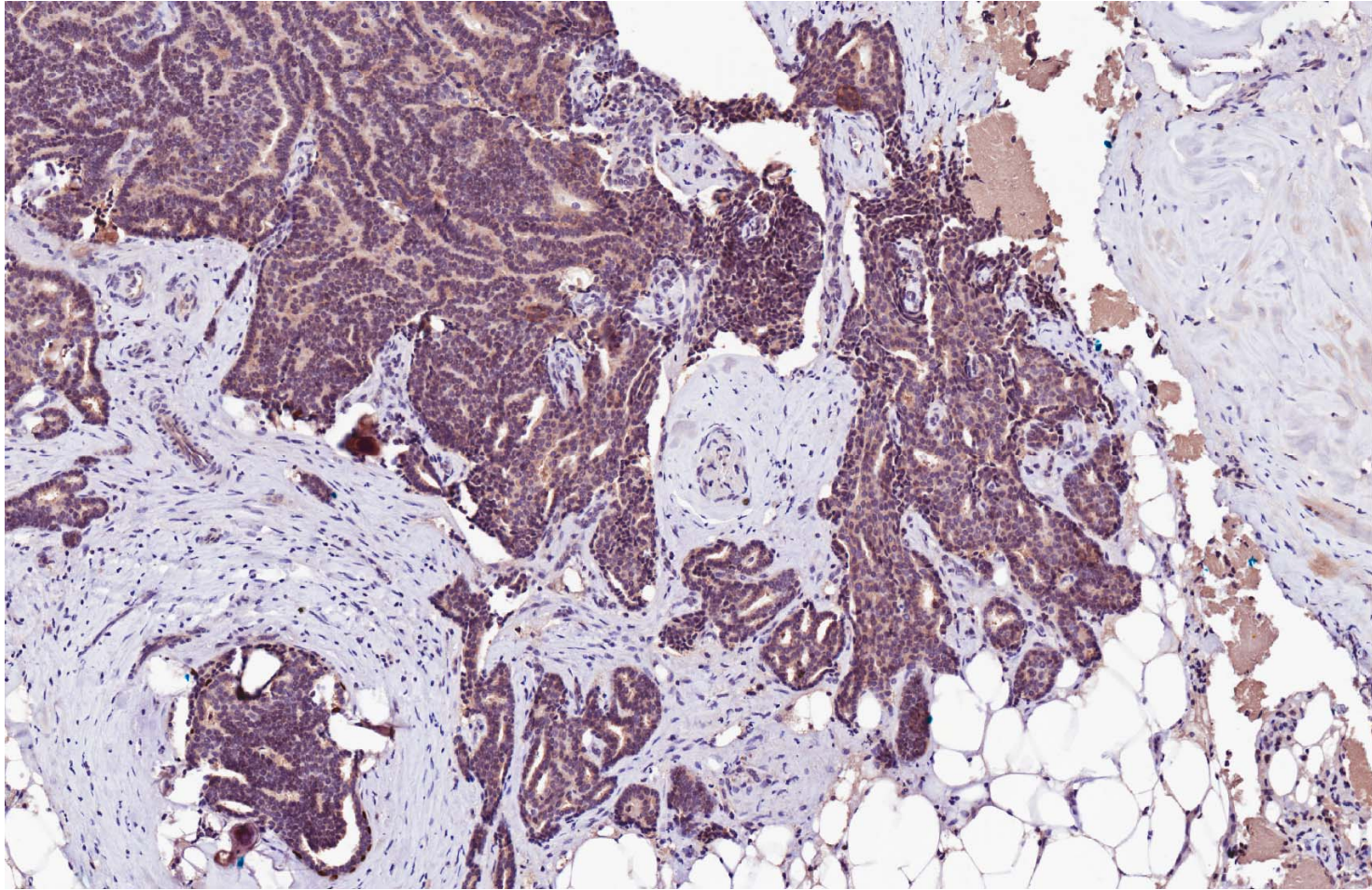
# CK14



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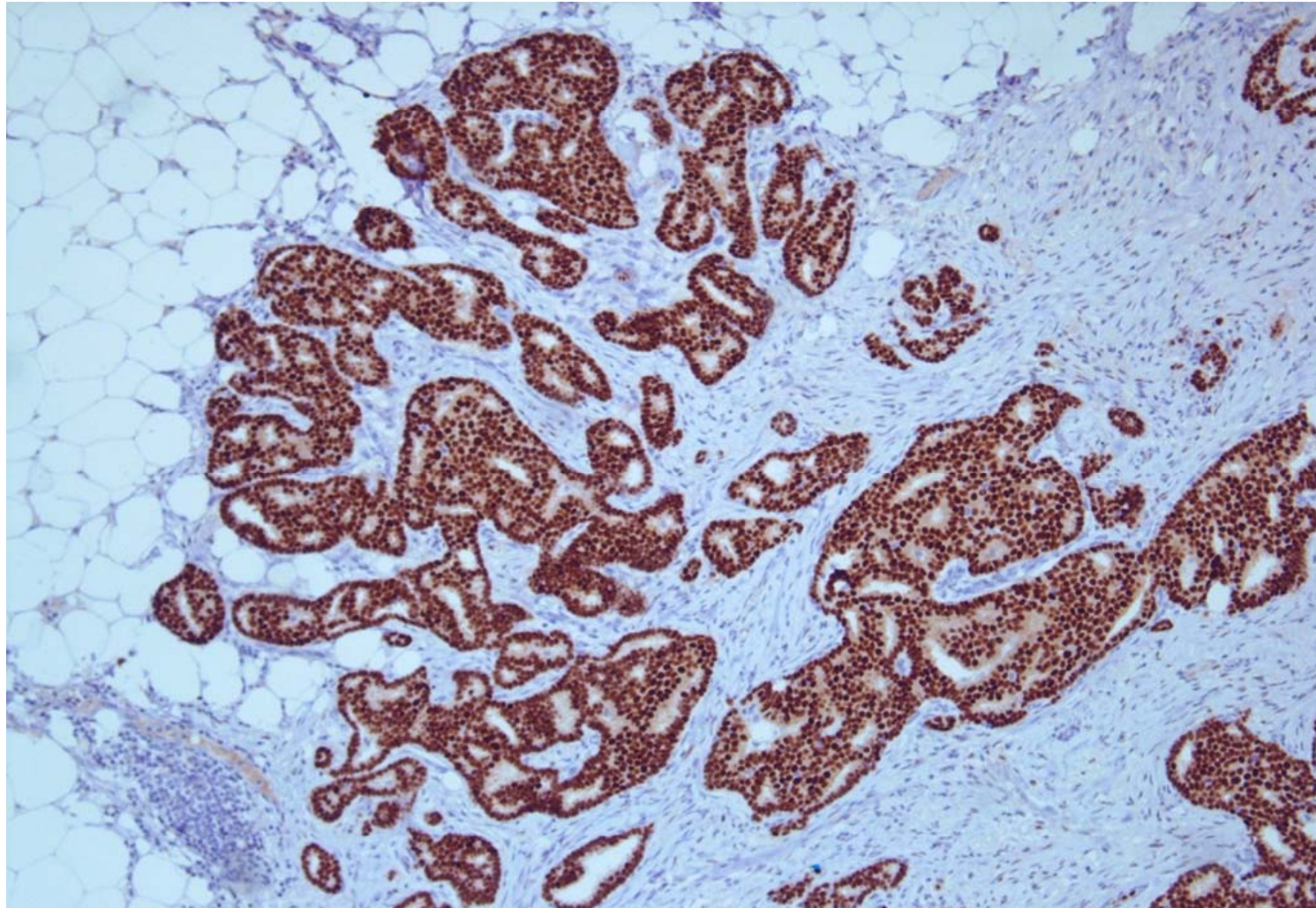


p63





ER



- Infarcted intracystic/encysted papillary carcinoma with invasive cribriform carcinoma

# Encapsulated papillary carcinoma

- Intracystic/encysted papillary carcinoma.
- Usually found in older women, presenting as a subareolar mass or with nipple discharge.
- Can be accompanied by low to intermediate nuclear grade DCIS in the surrounding breast tissue, usually micropapillary or cribriform pattern.
- Myoepithelial cells are absent in the papillae.
- Myoepithelial cells are also absent at the periphery of the lesion.
- Possibility that this lesion represents a form of low-grade invasive carcinoma with an expansile growth pattern, or part of a spectrum of progression from in situ to invasive disease.
  - Collins et al. *Am J Surg Pathol* 2006; 30: 1002-7.
  - Hill et al. *Am J Clin Pathol* 2005; 123: 36-44.

# Encapsulated papillary carcinoma with invasion

- Invasive component seen beyond the fibrous 'capsule' or outer boundaries of the encapsulated papillary cancer.
- Invasive cancer is most often of ductal subtype.

# Invasive cribriform carcinoma

- Special histologic subtype of invasive breast cancer with an excellent prognosis.
- May be seen with invasive tubules as in invasive tubular carcinoma, but the cribriform component predominates.
- Often grade 1, ER and PR positive, cerbB2 negative.
- Both cribriform DCIS and invasive cribriform cancer can appear morphologically similar.
- Distinction from DCIS based on:
  - Absence of myoepithelial cells.
  - Stromal desmoplasia and sometimes inflammatory reaction.
  - Irregular outlines of the cribriform islands with jagged contours.
  - Association with other invasive components such as invasive tubular or ductal cancer.

# Learning points

- Recognition of encysted papillary carcinoma.
- Diagnosis of invasion and determination of extent.
- Subtype of the invasive component - cribriform? ductal? papillary?
- Discussion on whether the infarcted areas are malignant or benign:
  - Ghost cell monotony.
  - Papillary cores are thin.
  - Merges with the invasive component, suggesting precursor link to invasion.