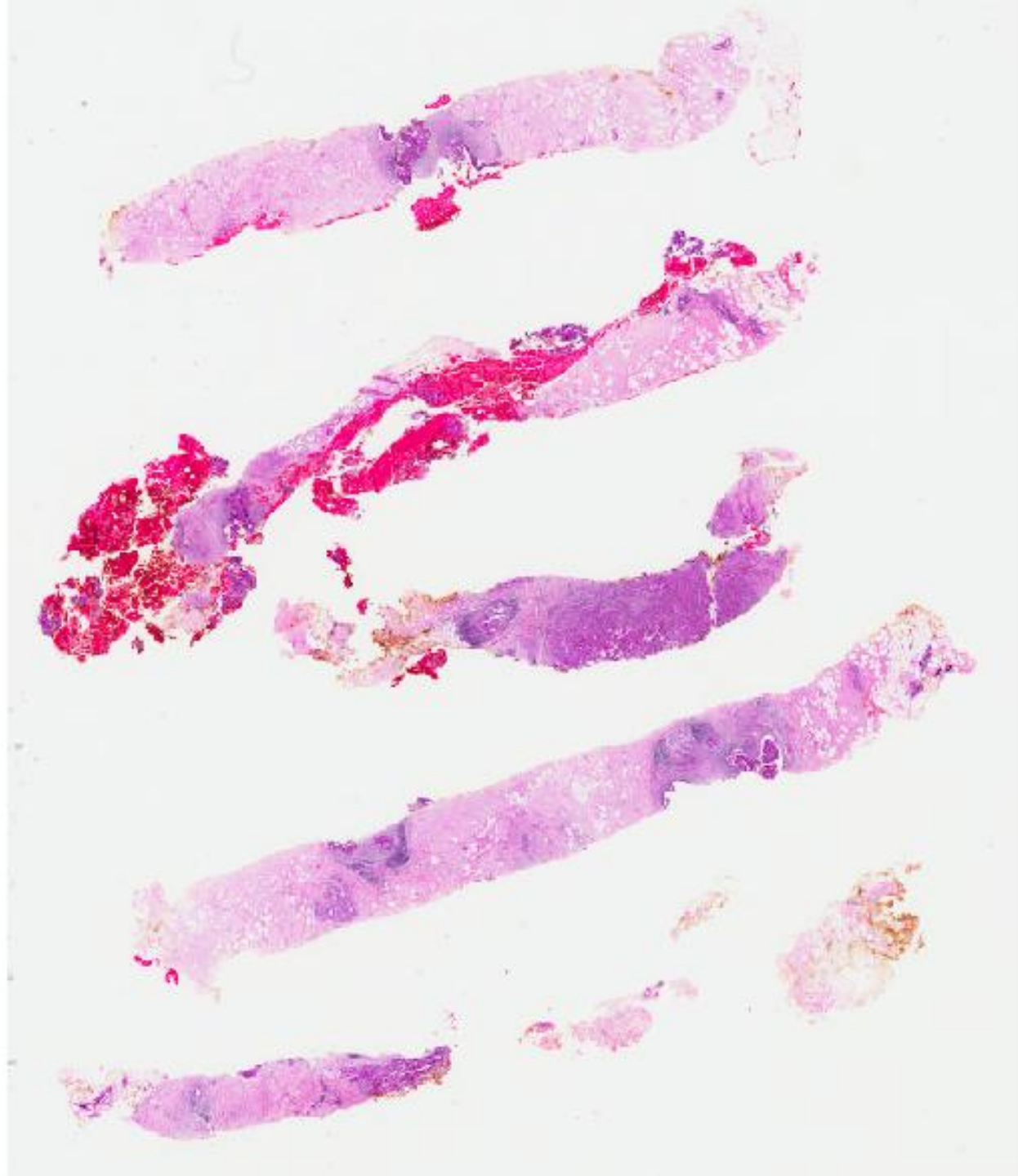


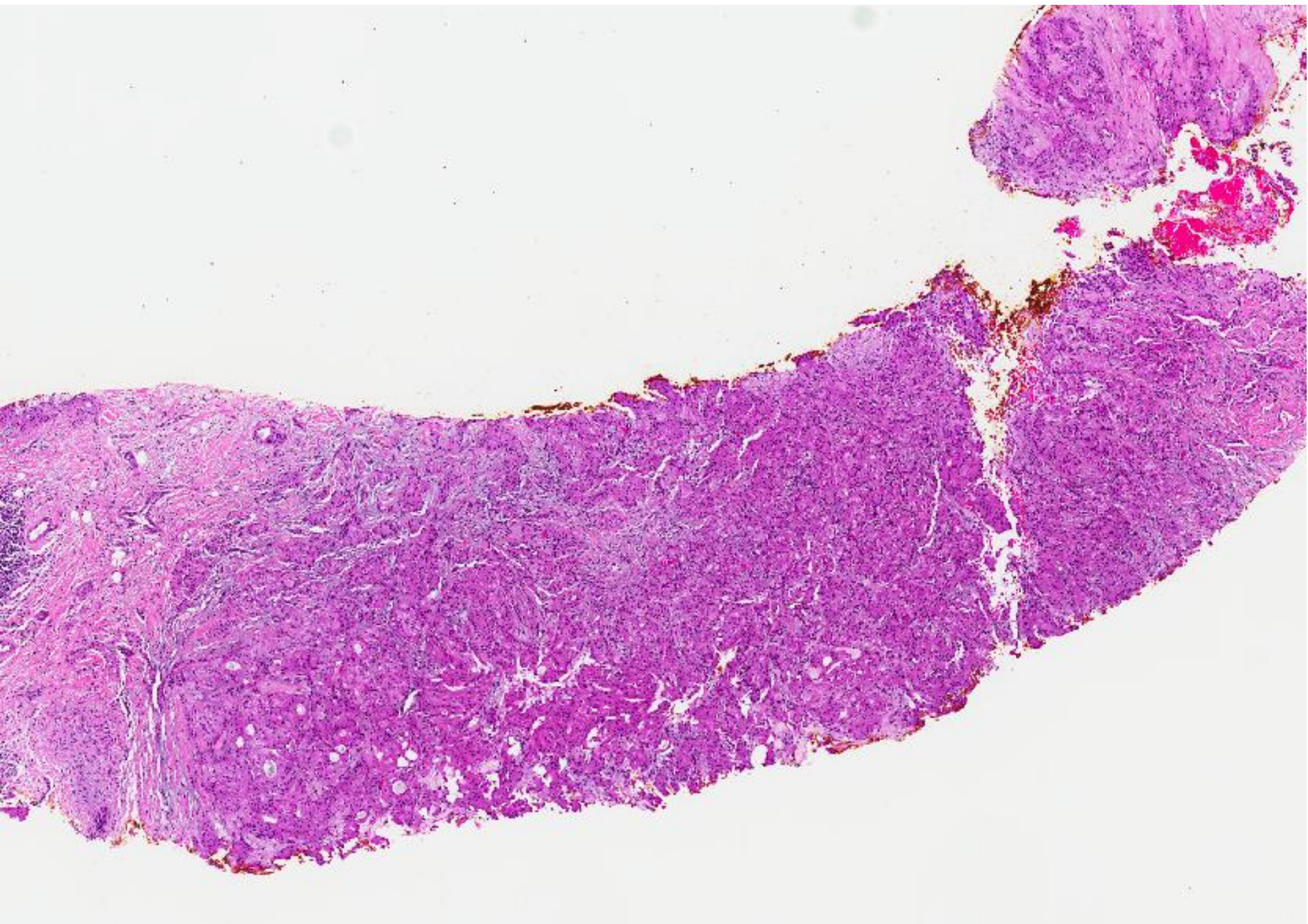
## CASE 11

A 65 year old Chinese lady was radiologically found to have an irregular hypoechoic mass with some vascularity at the 9-11 o'clock position of the right breast.

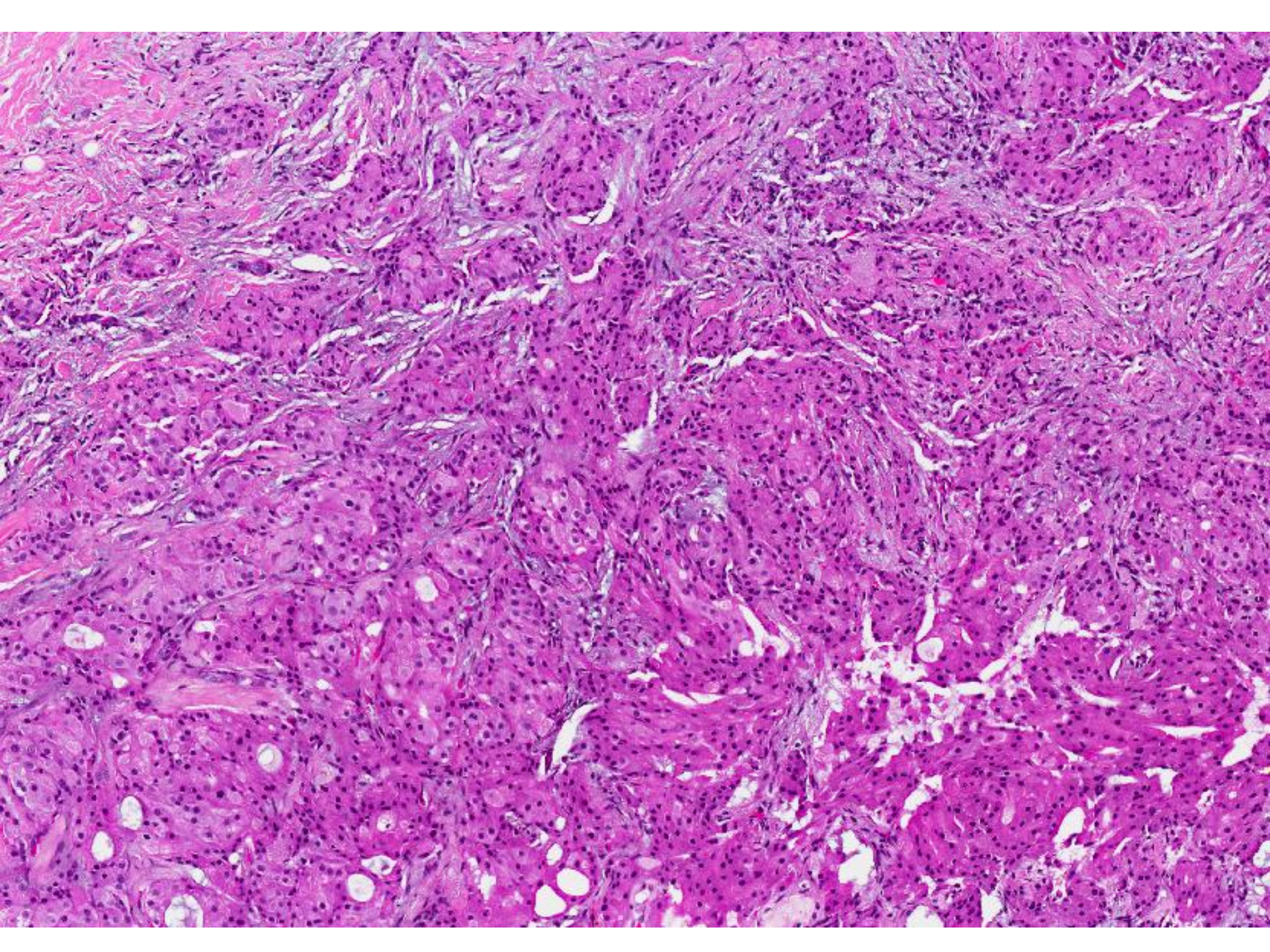
The mass was vaguely palpable.

She underwent a 14G core needle biopsy of the mass.

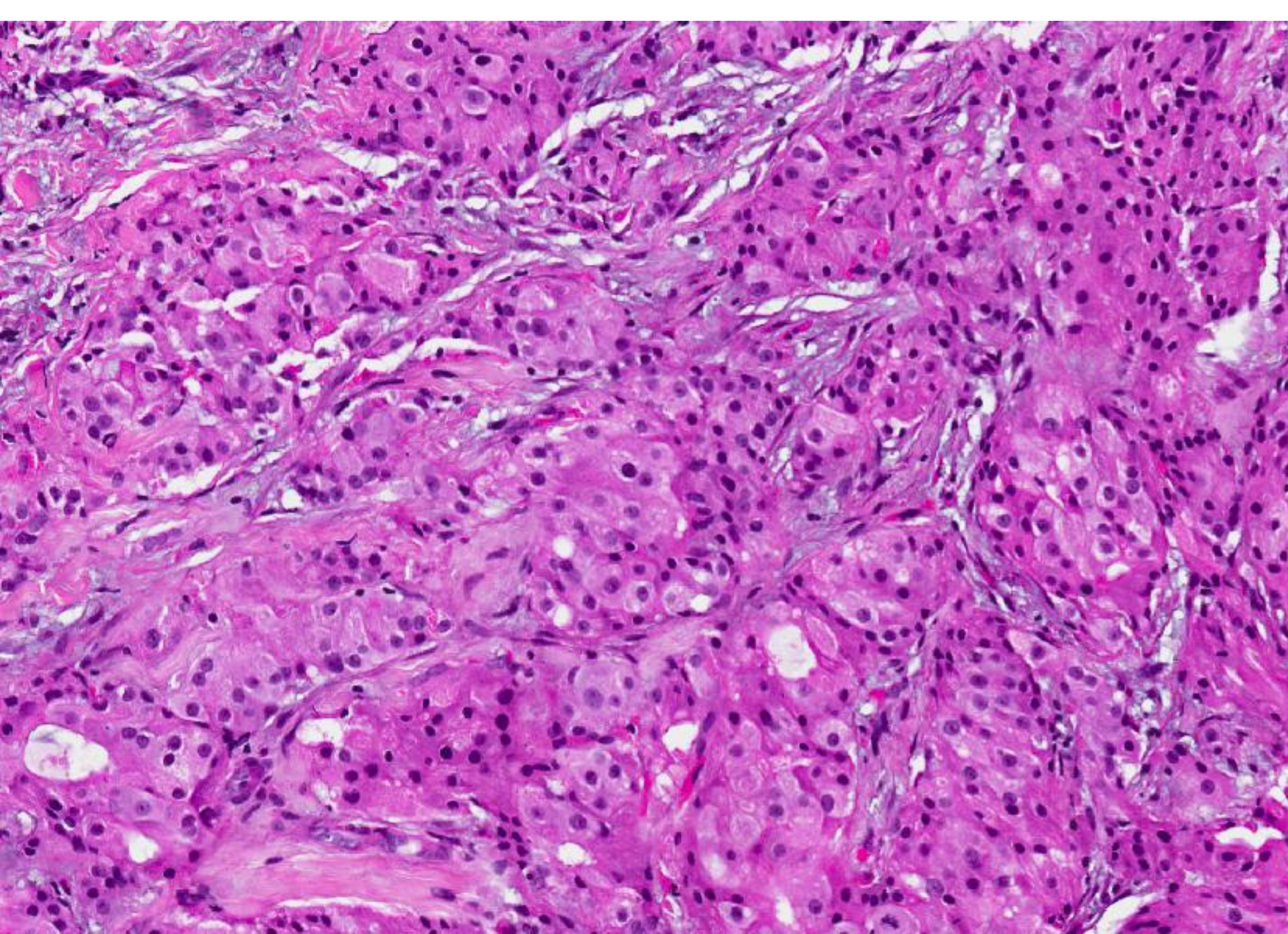




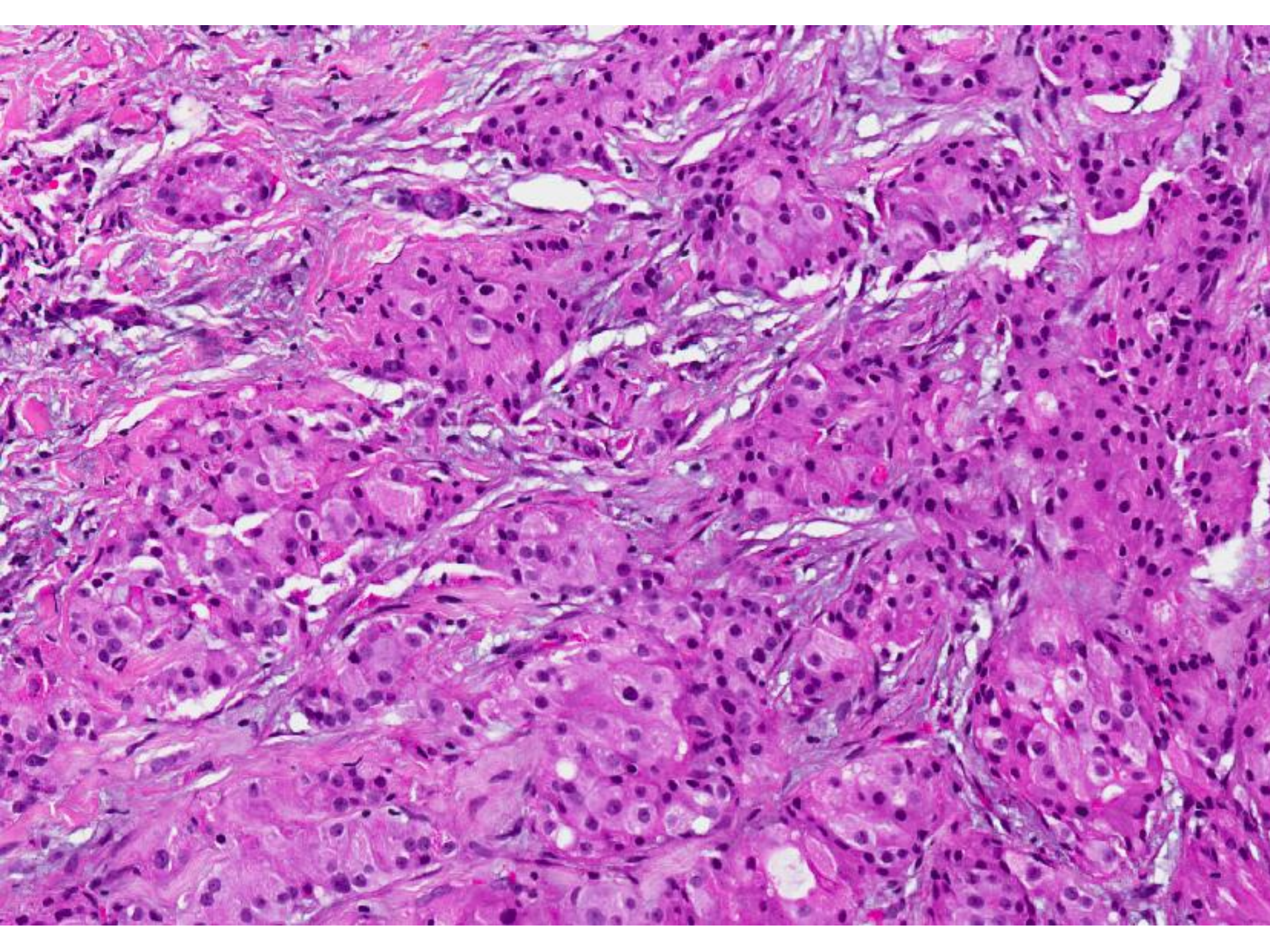




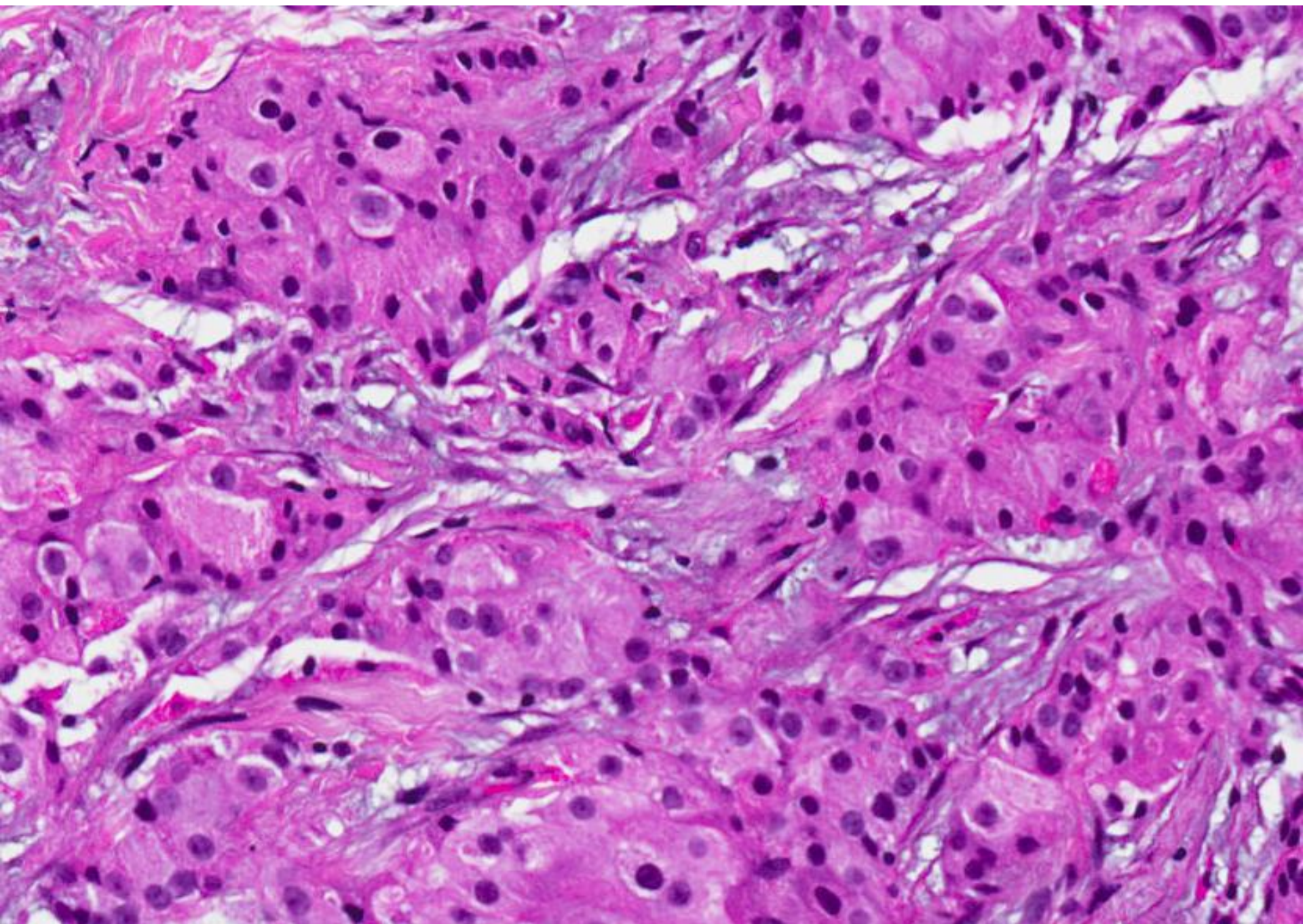




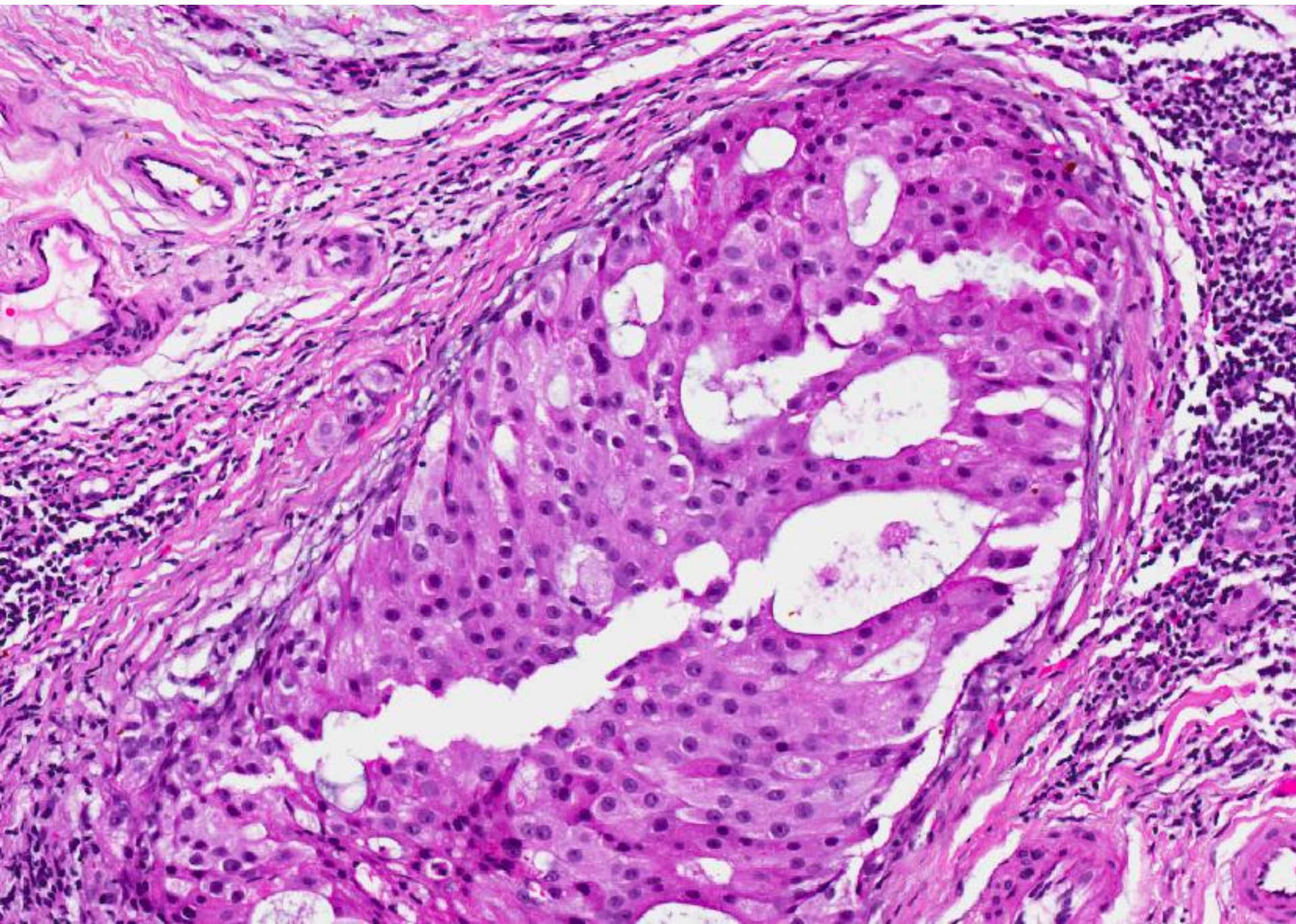














# Diagnosis

- Invasive carcinoma with apocrine features .
- Accompanying apocrine DCIS.



# Invasive carcinoma with apocrine features

- Invasive breast carcinoma in which the cells show apocrine differentiation.
- Not a distinct entity.
- Focal apocrine differentiation is common in infiltrative ductal carcinoma and other special subtypes.
- Extensive apocrine differentiation is noted in about 4% of breast carcinomas.
- Usually ER/PR negative, but novel isoform of ER (ER-alpha36) can be overexpressed.
- GCDFP15 positive, AR positive, bcl2 negative, HER2 can be positive.



# Prognosis

- Similar prognosis to invasive ductal carcinoma when matched for grade and stage.
- Androgen signalling associated with these tumours may herald new therapeutic approaches.