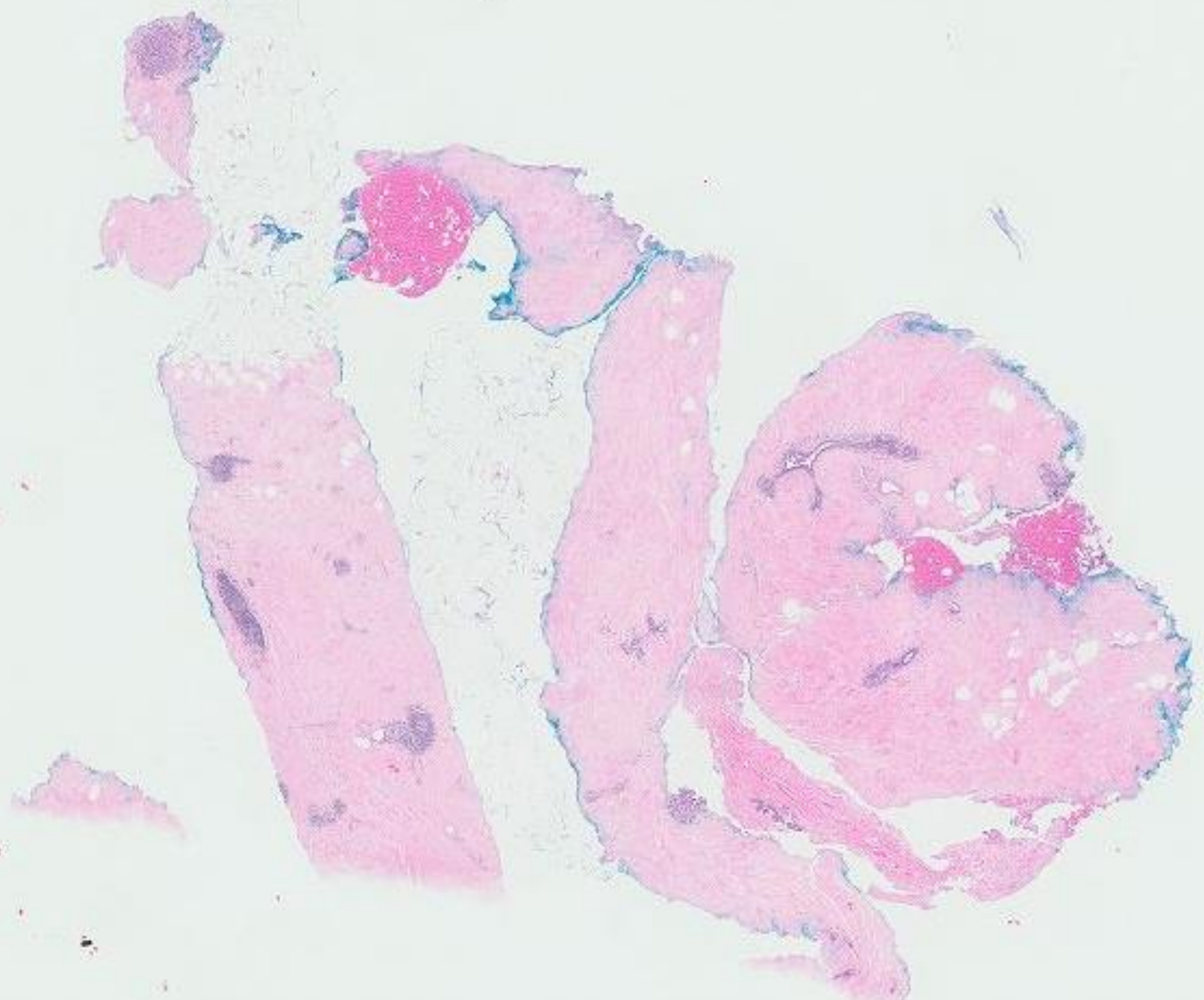


# Case 5

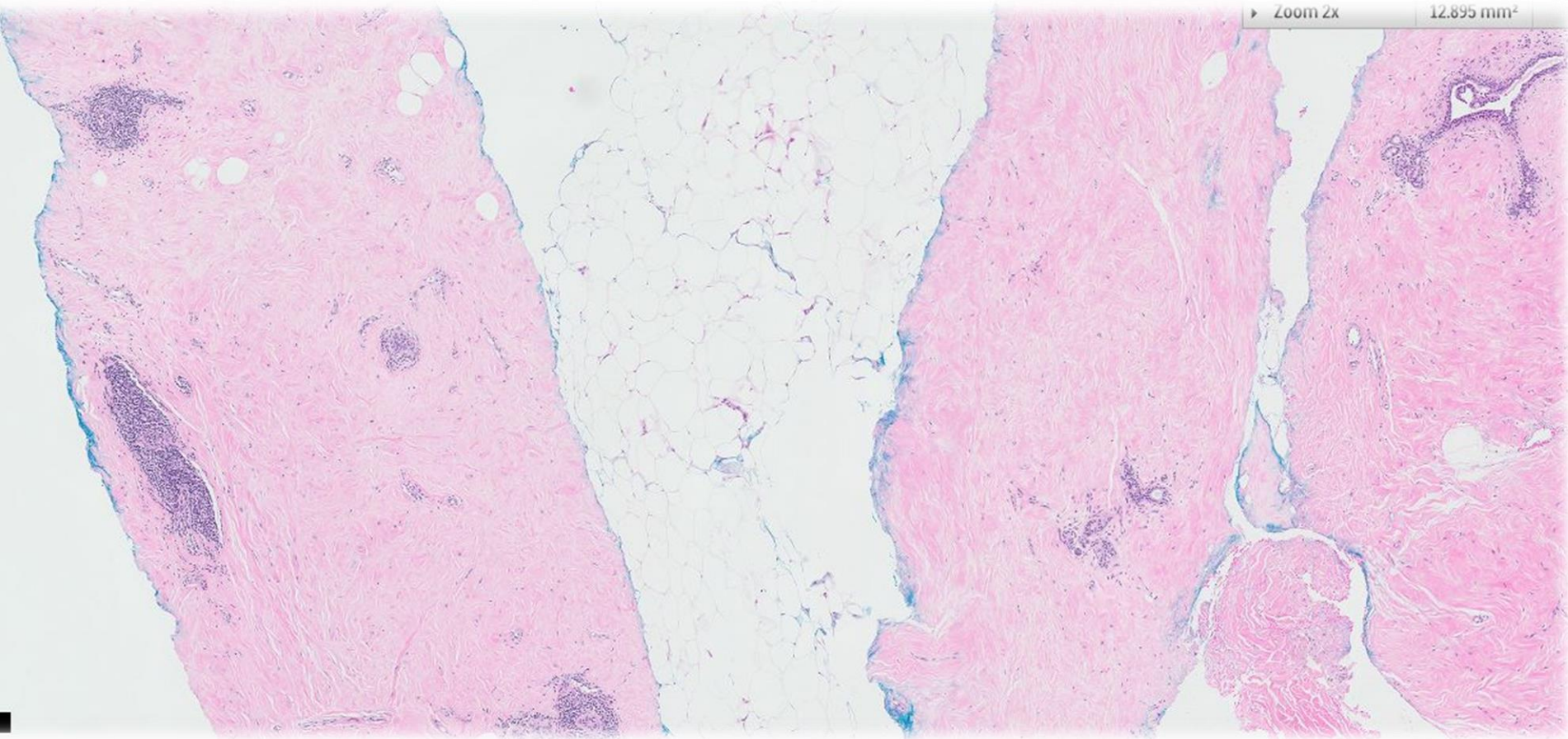
64 year old Chinese lady underwent core biopsies for a radiologically worrisome lesion.





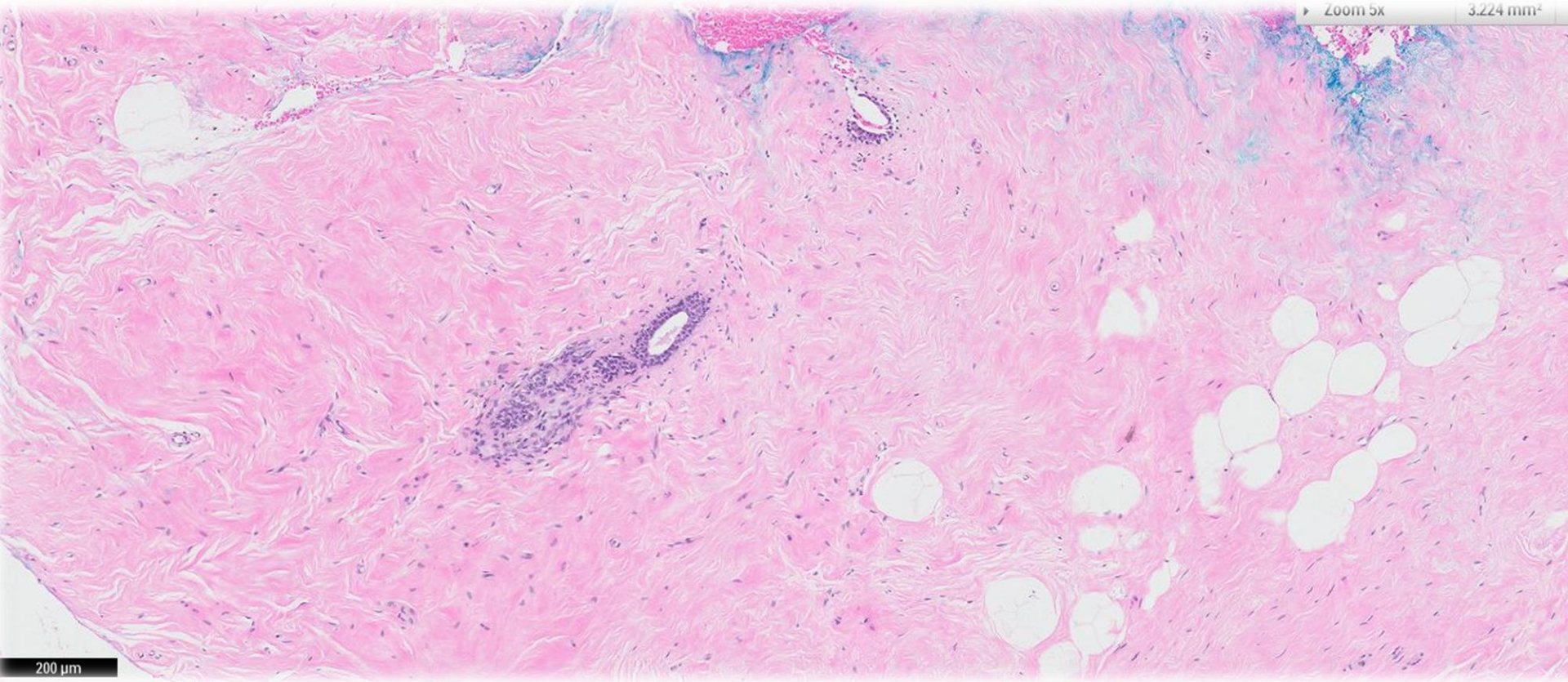
Zoom 2x

12.895 mm<sup>2</sup>



Zoom 5x

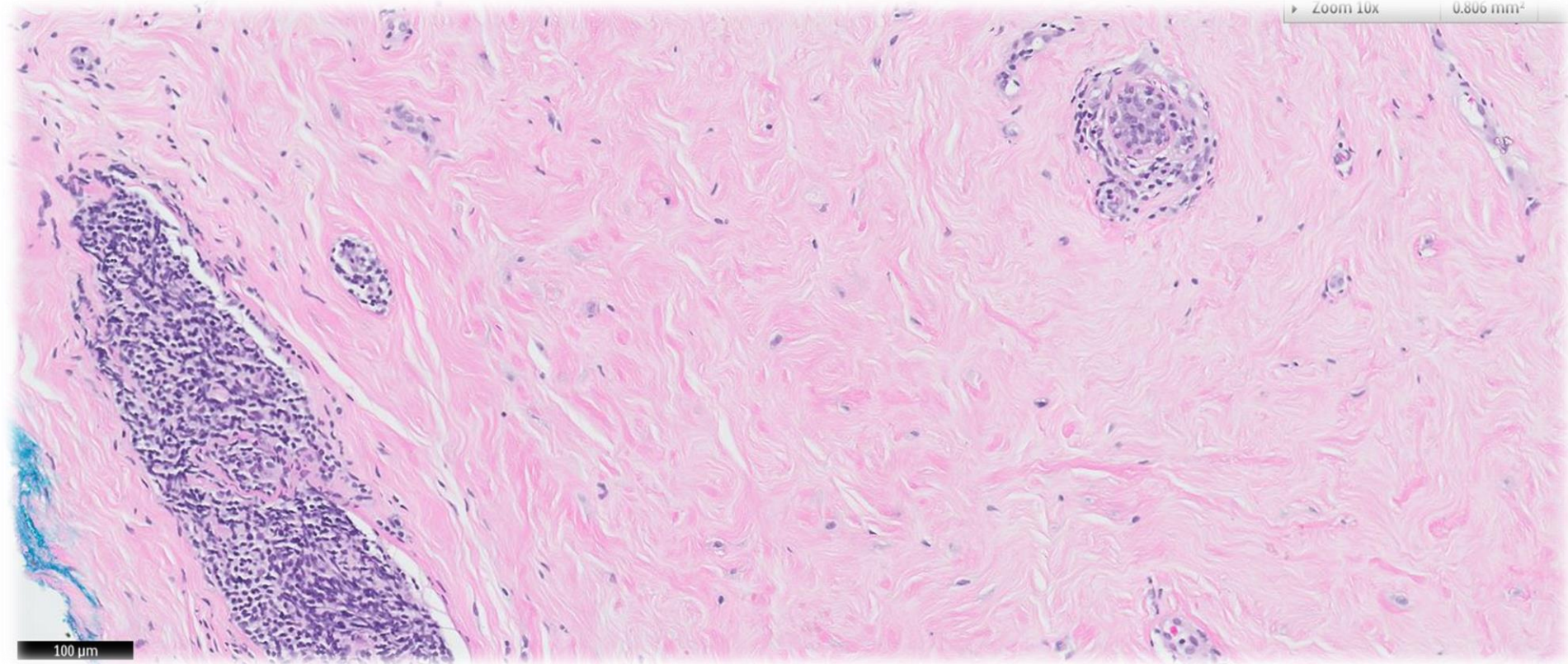
3.224 mm<sup>2</sup>



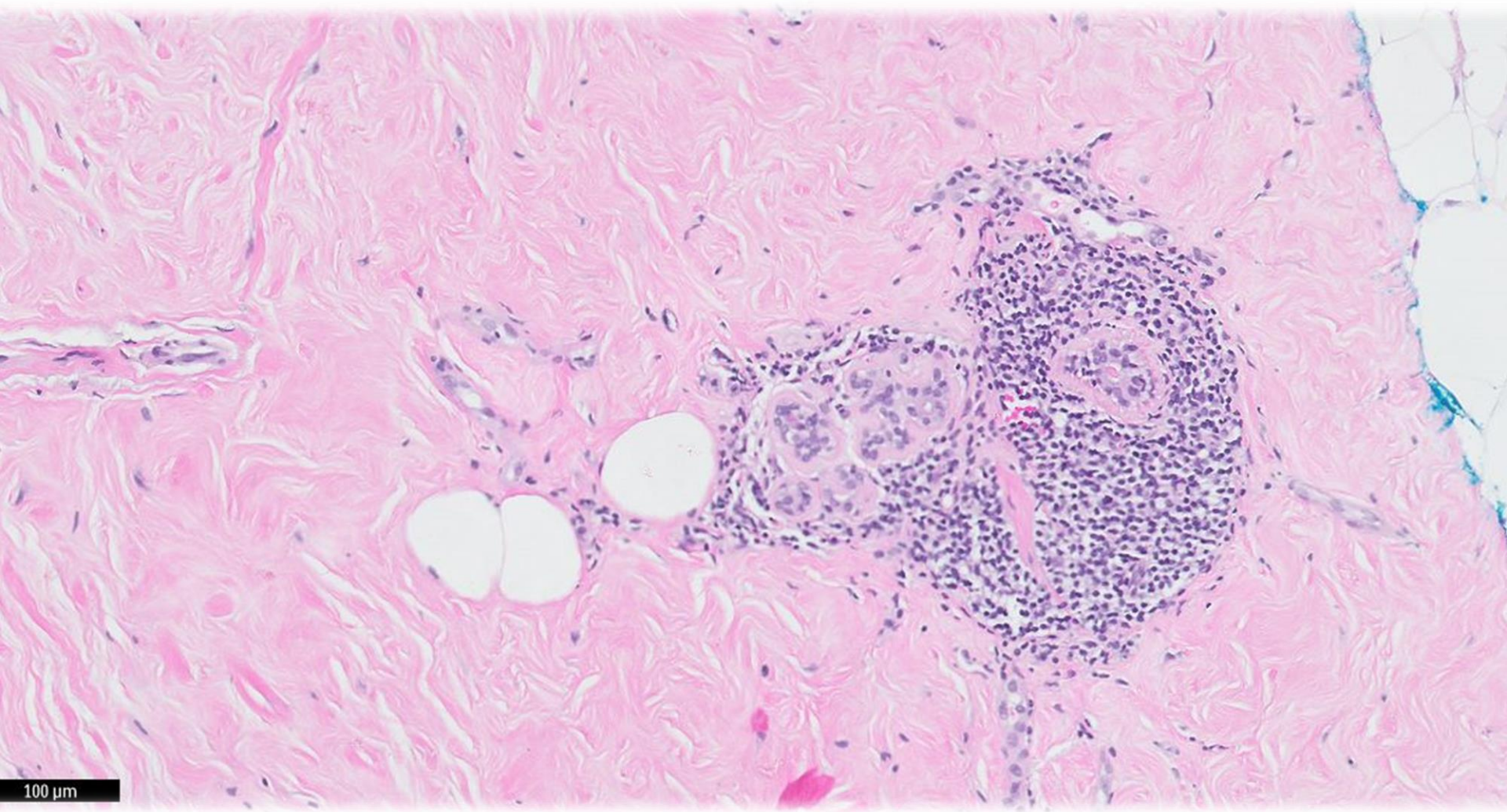
200 μm

Zoom 10x

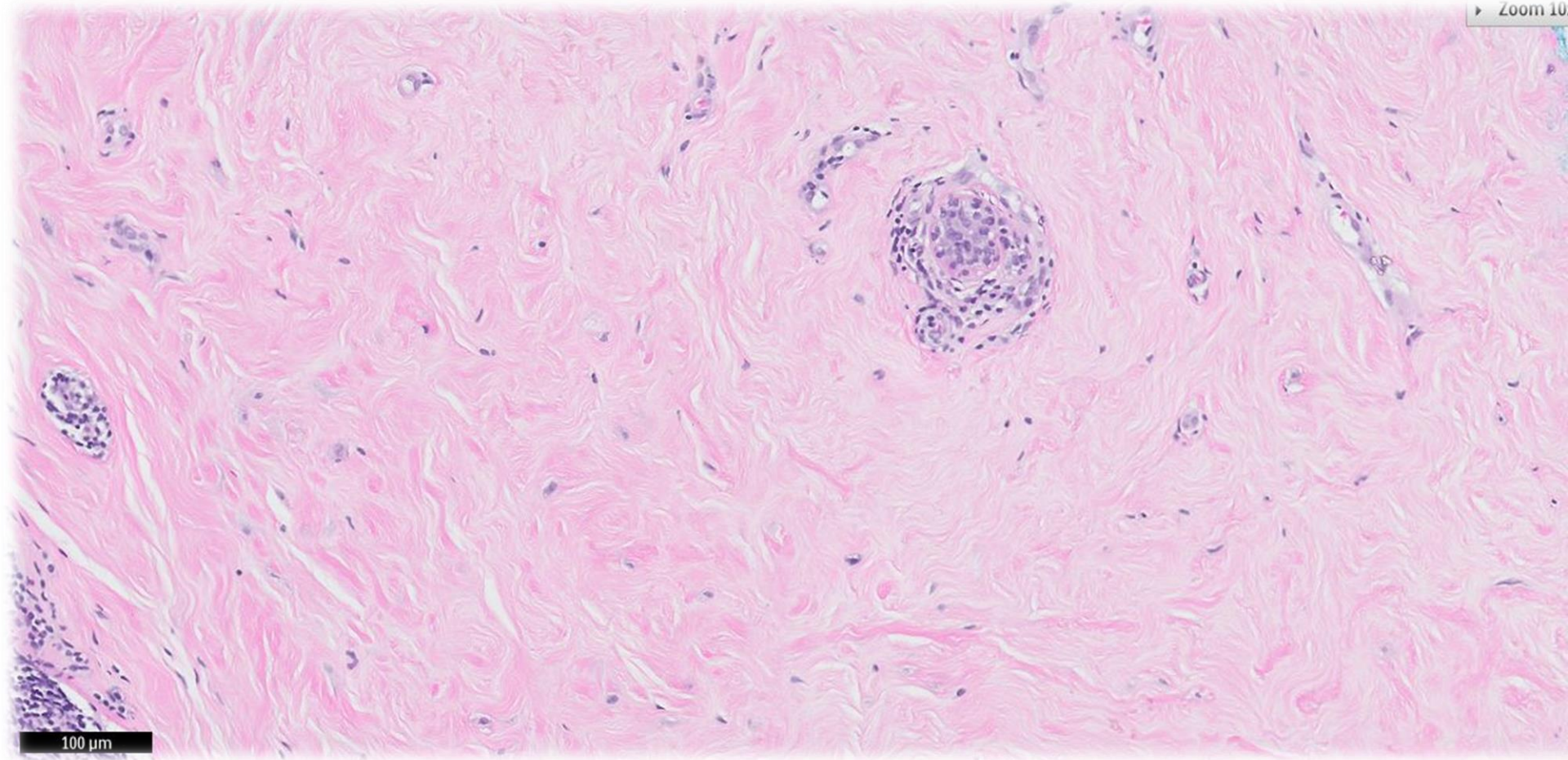
0.806 mm<sup>2</sup>



100 μm



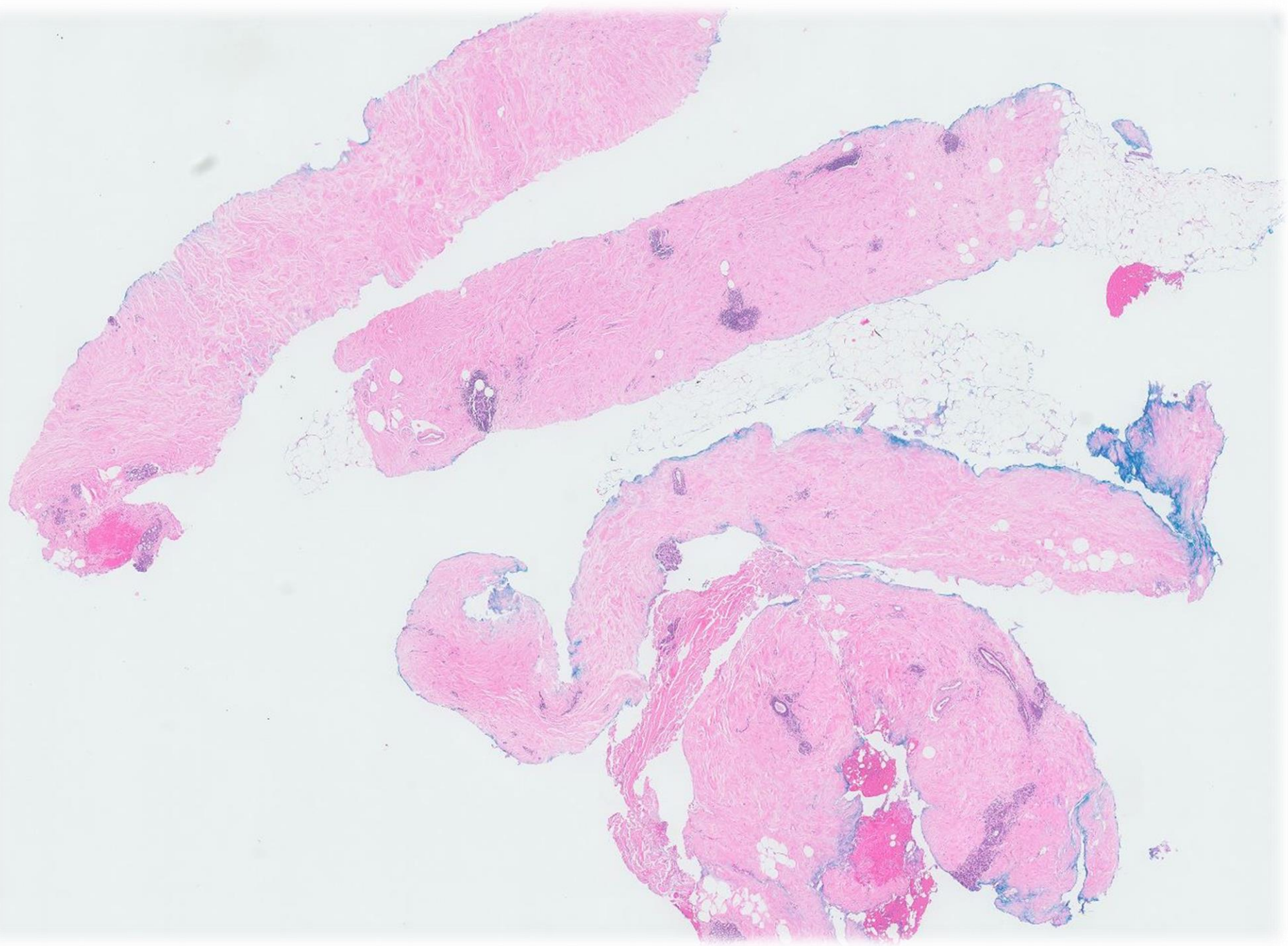
100  $\mu$ m

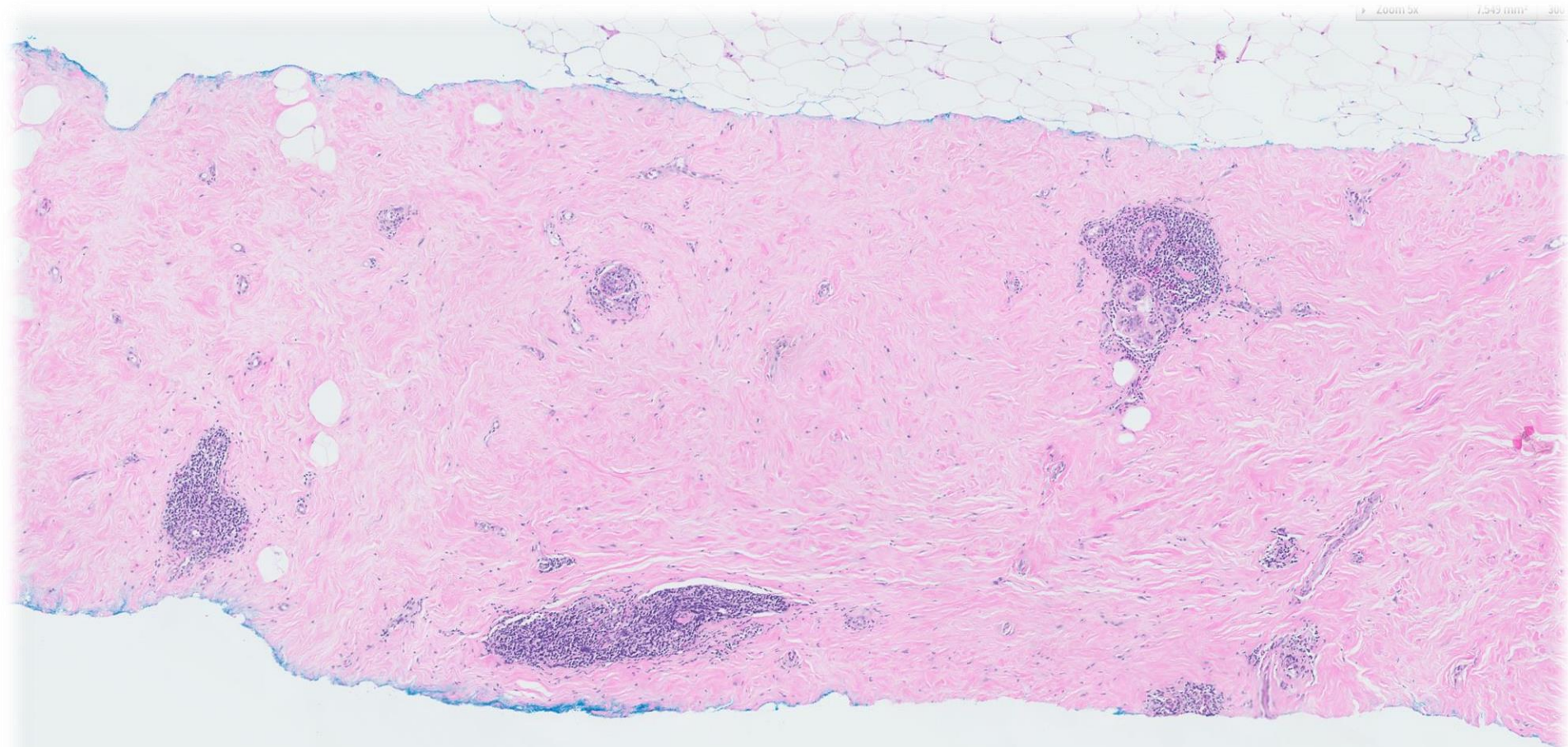


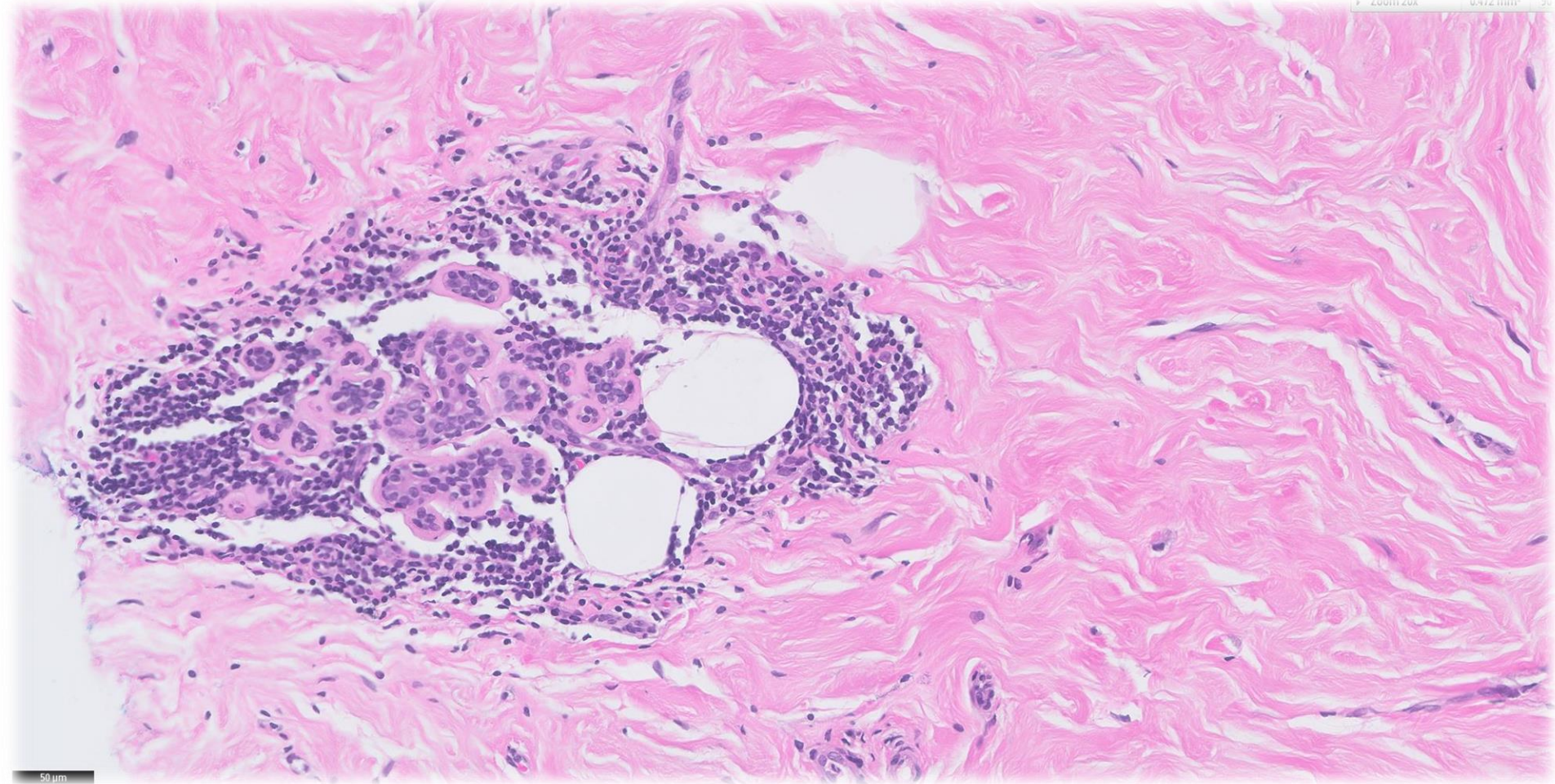


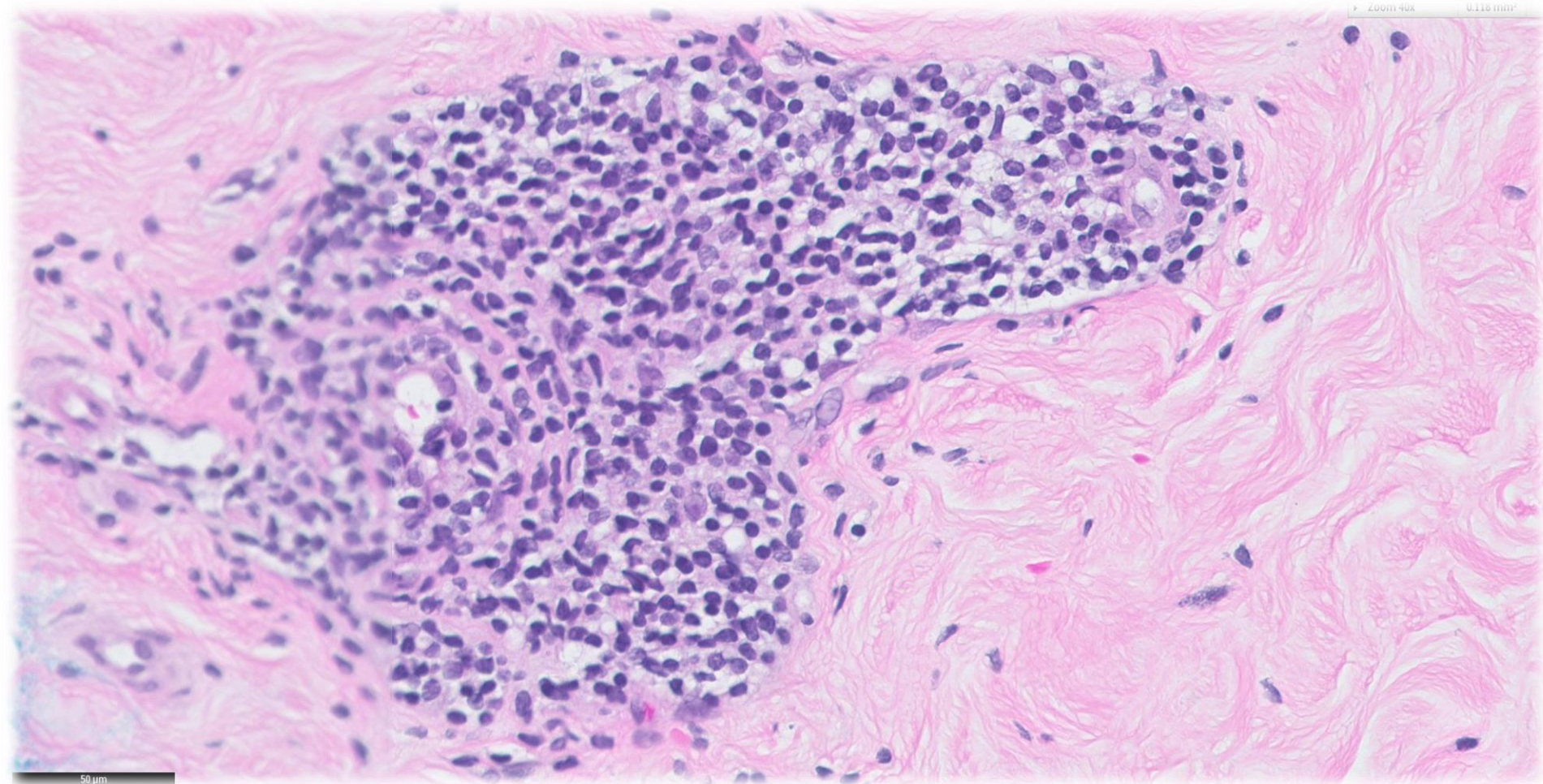
***Cool House  
Singapore Botanic Gardens***











# Diagnosis

- Fibrocollagenous stroma and focal lymphocytic infiltrates, consistent with diabetic mastopathy.

*{Patient has underlying diabetes}*



# Diabetic mastopathy

- Constellation of pathological changes in the breast resulting from abnormalities in glycosylation and collagen degeneration in patients with diabetes mellitus.
- Can occur in both type I and type II diabetes, but commoner in type I insulin dependent disease.
- Similar histological changes can be seen in hypothyroidism and autoimmune diseases.
- Clinicoradiologically mimics cancer.

# Diabetic mastopathy

- Self-limited stromal abnormality in premenopausal women.
- Recurrent tumours can occur.
- Synchronous and metachronous bilaterality.
- Excision is curative.
- No predisposition to breast carcinoma or stromal lesions such as fibromatosis.

