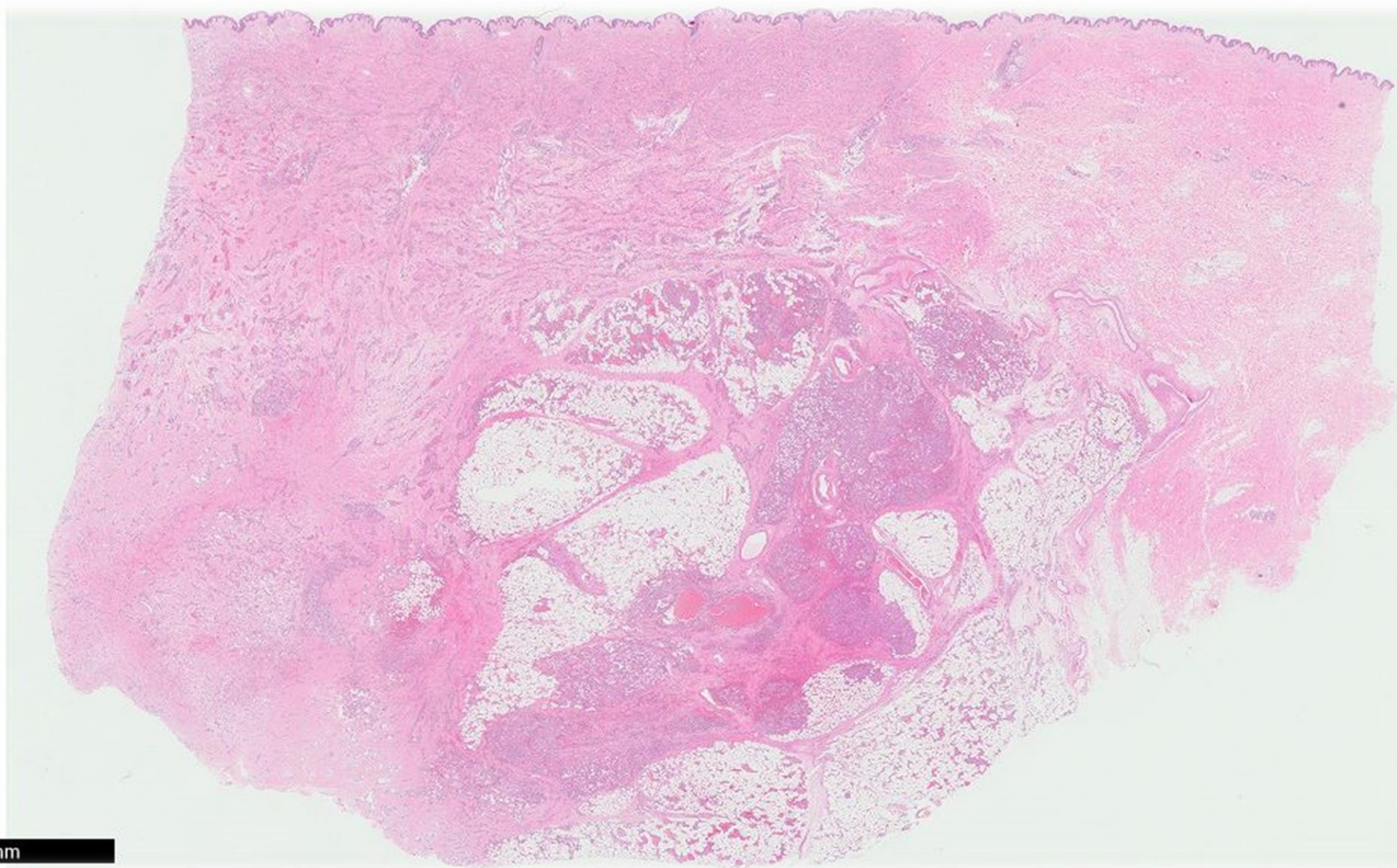


Case 22

31 year old lady complained of a persistent discolouration over the left breast.

Sections A and B are from different parts of the lesion.

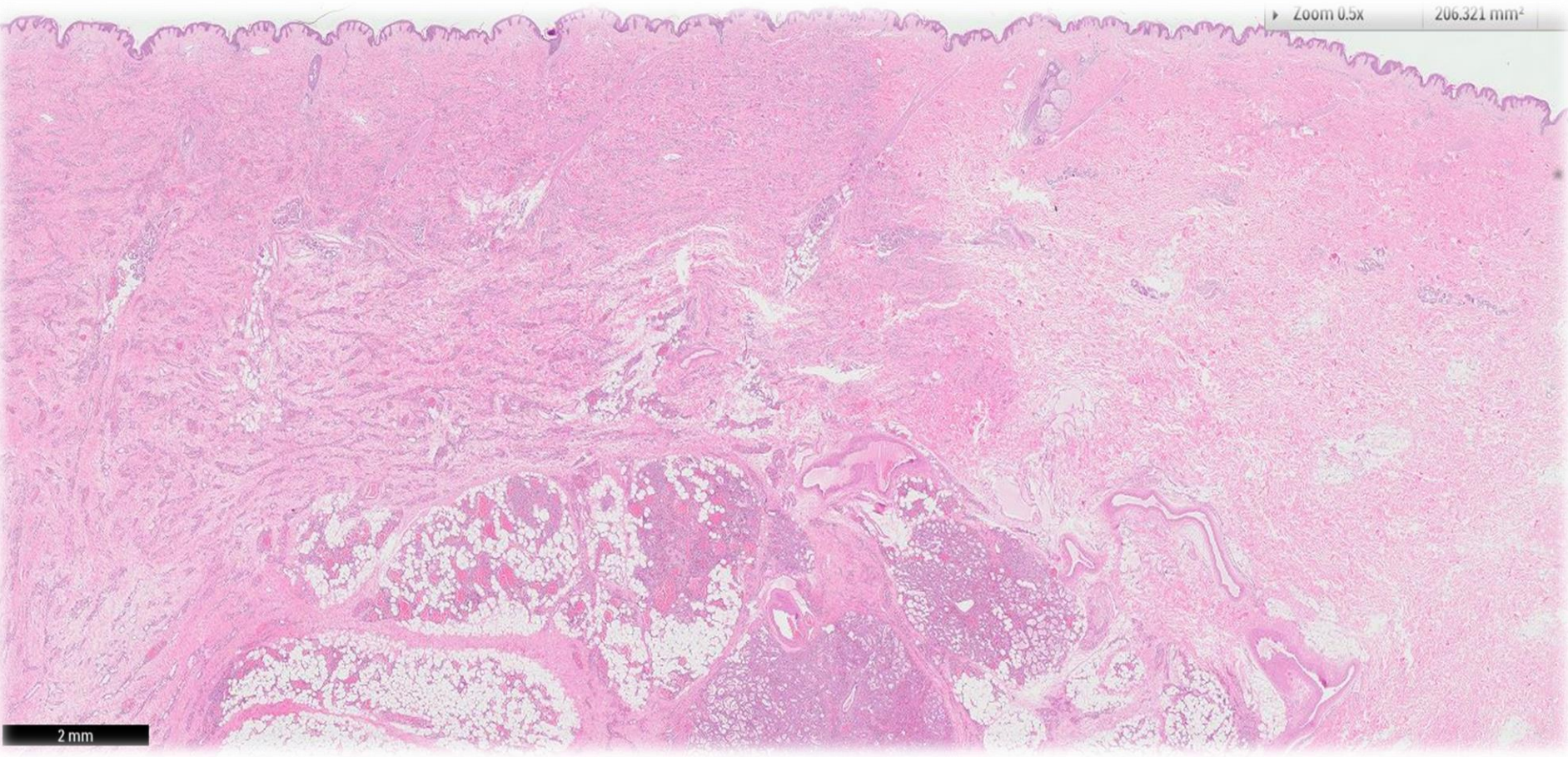




5 mm

Zoom 0.5x

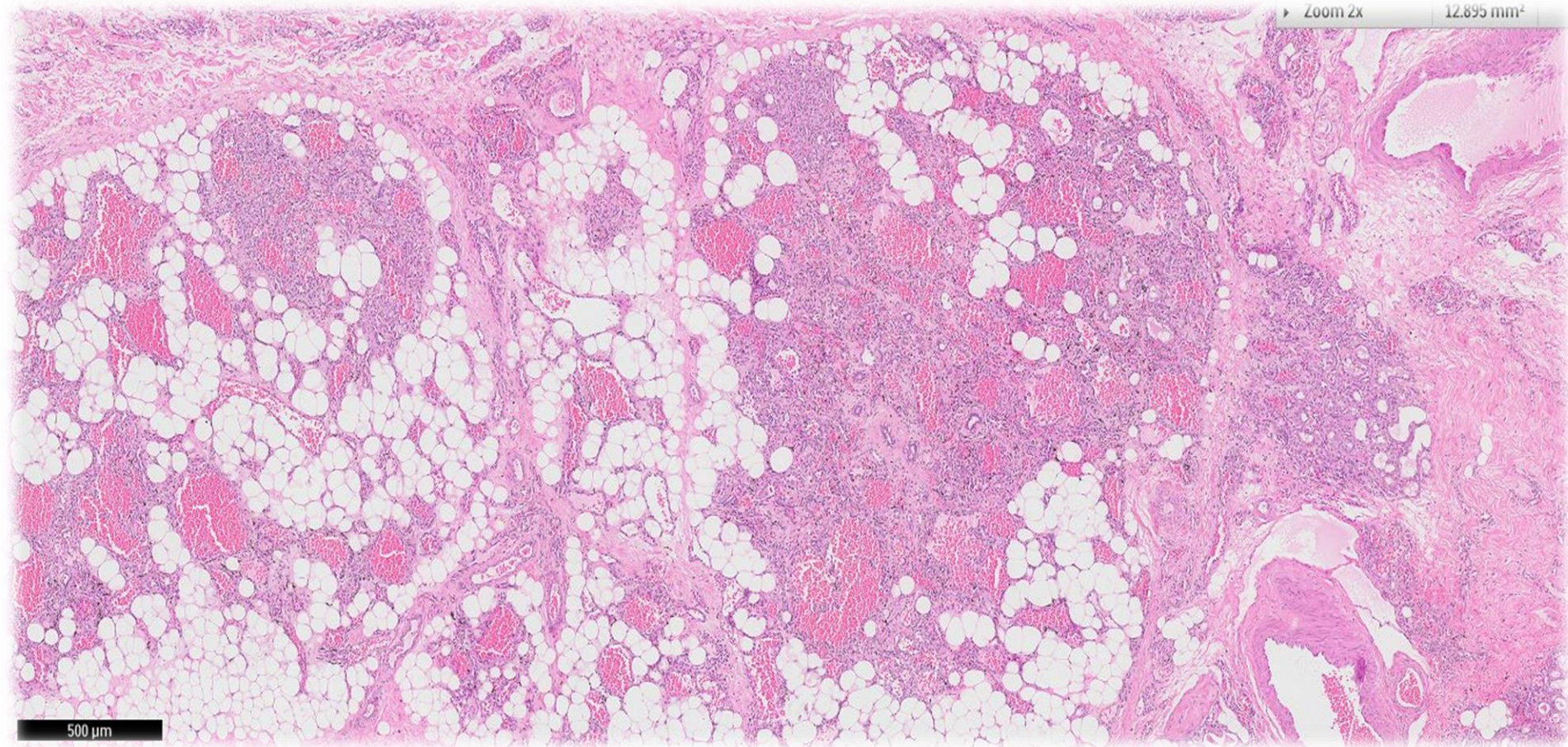
206.321 mm²



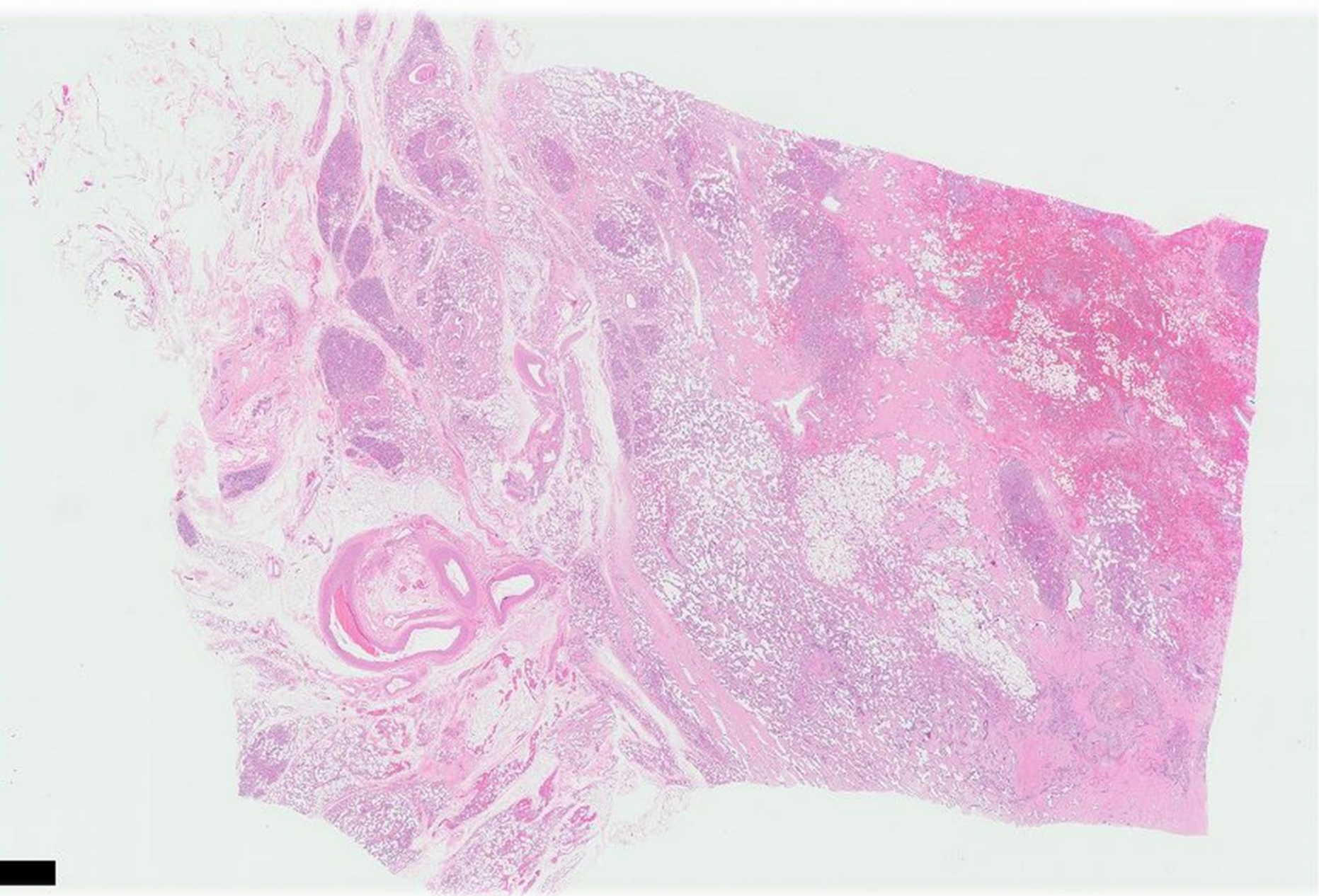
2 mm

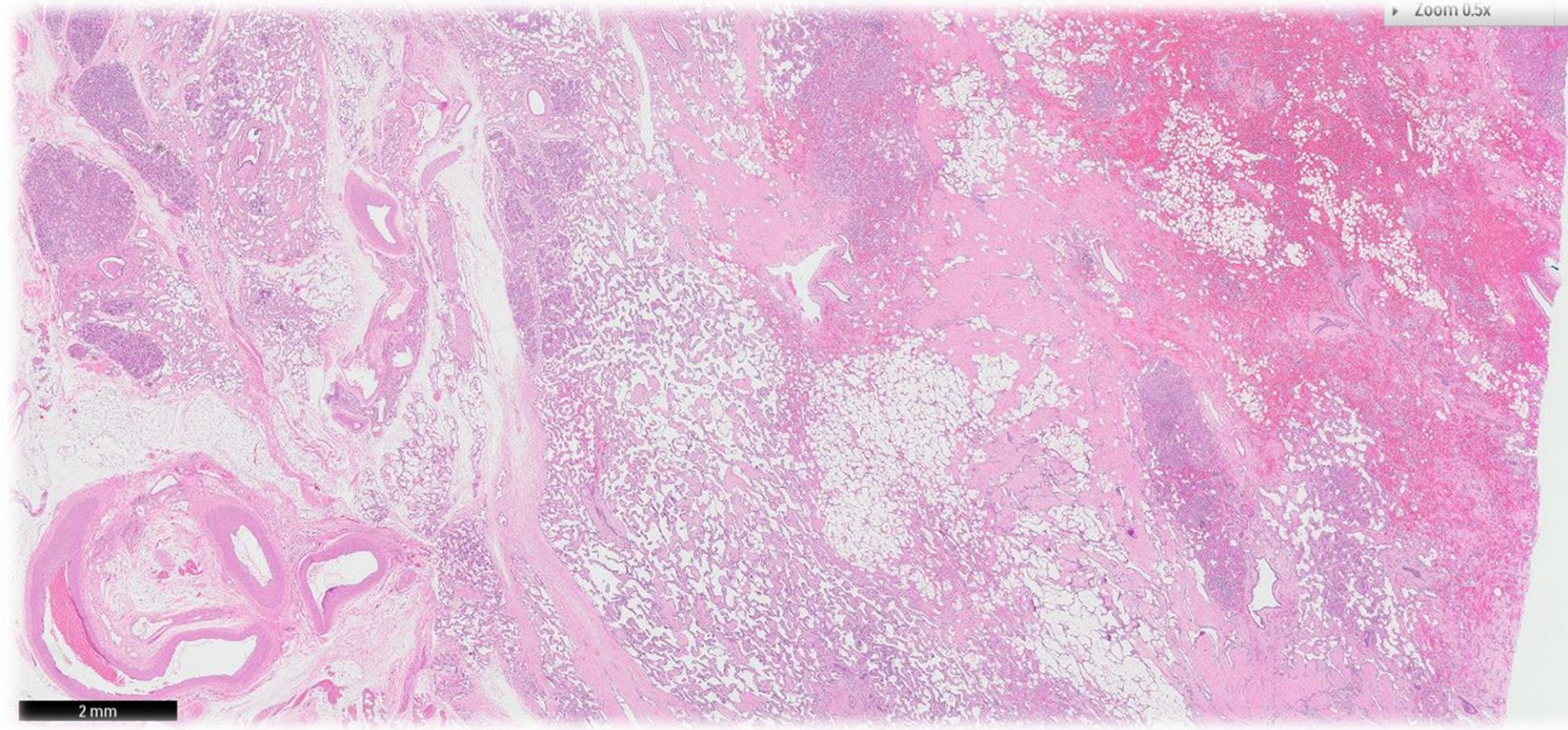
Zoom 2x

12.895 mm²



500 μ m

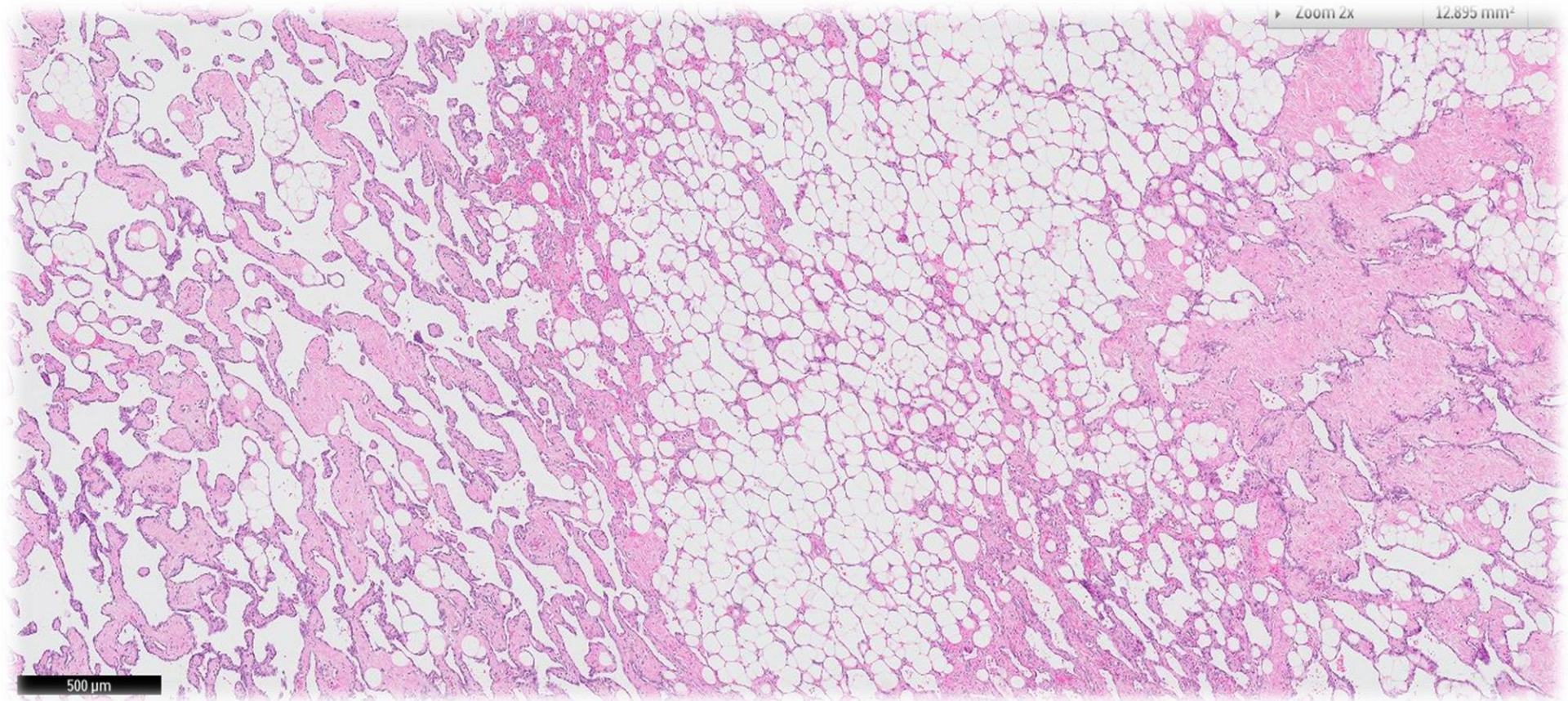




2 mm

Zoom 2x

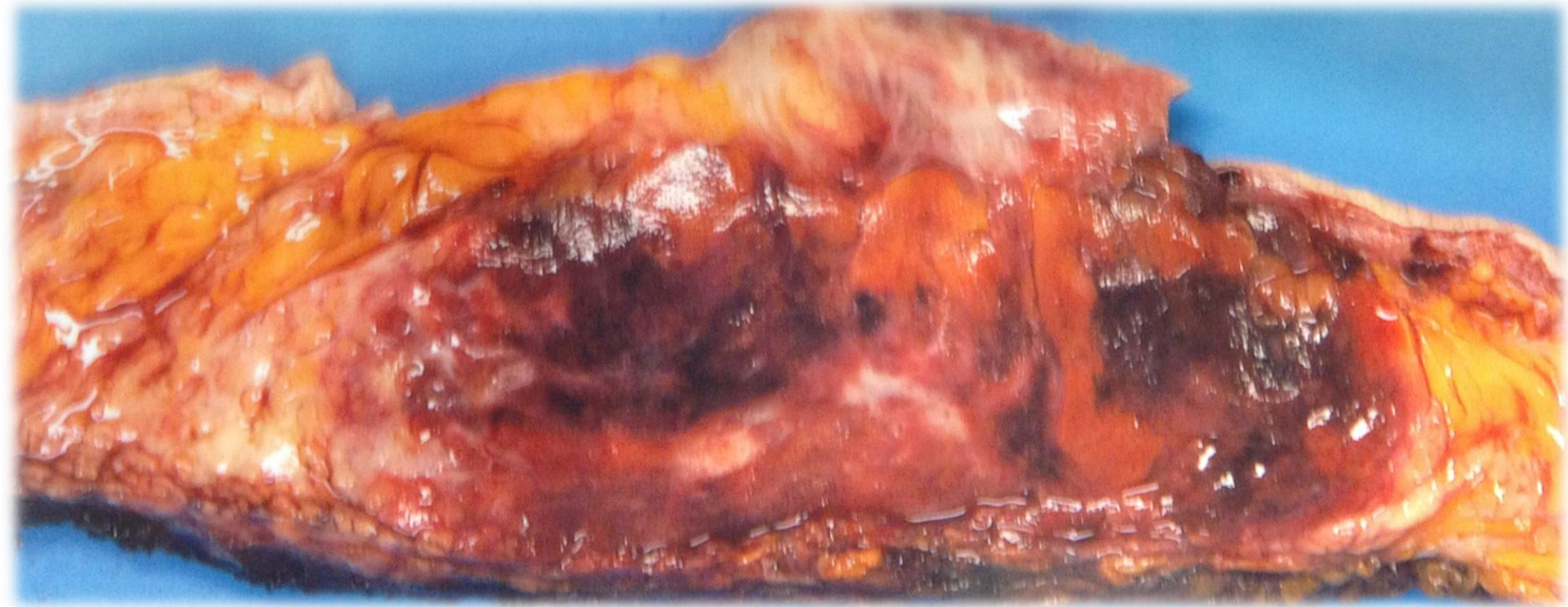
12.895 mm²

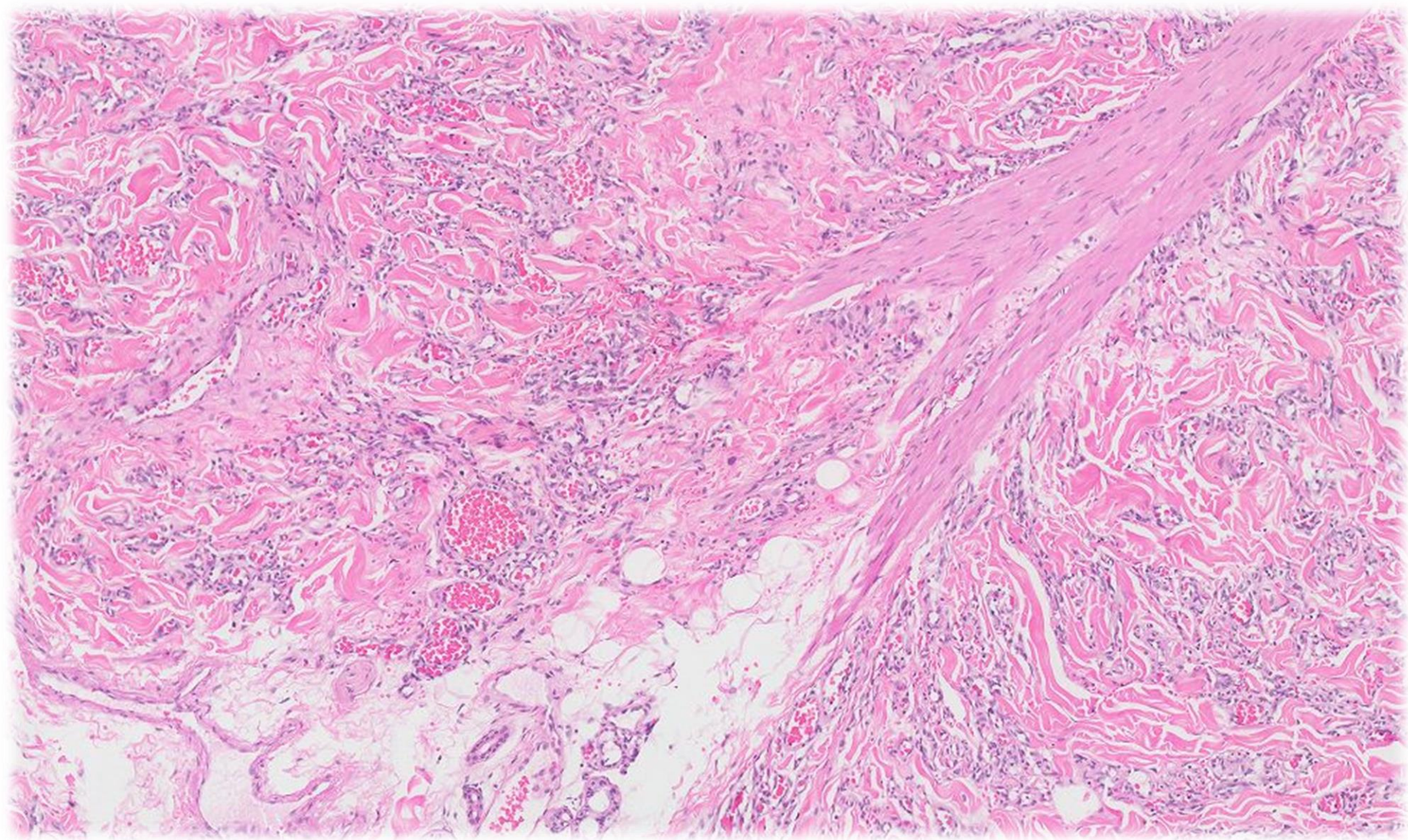


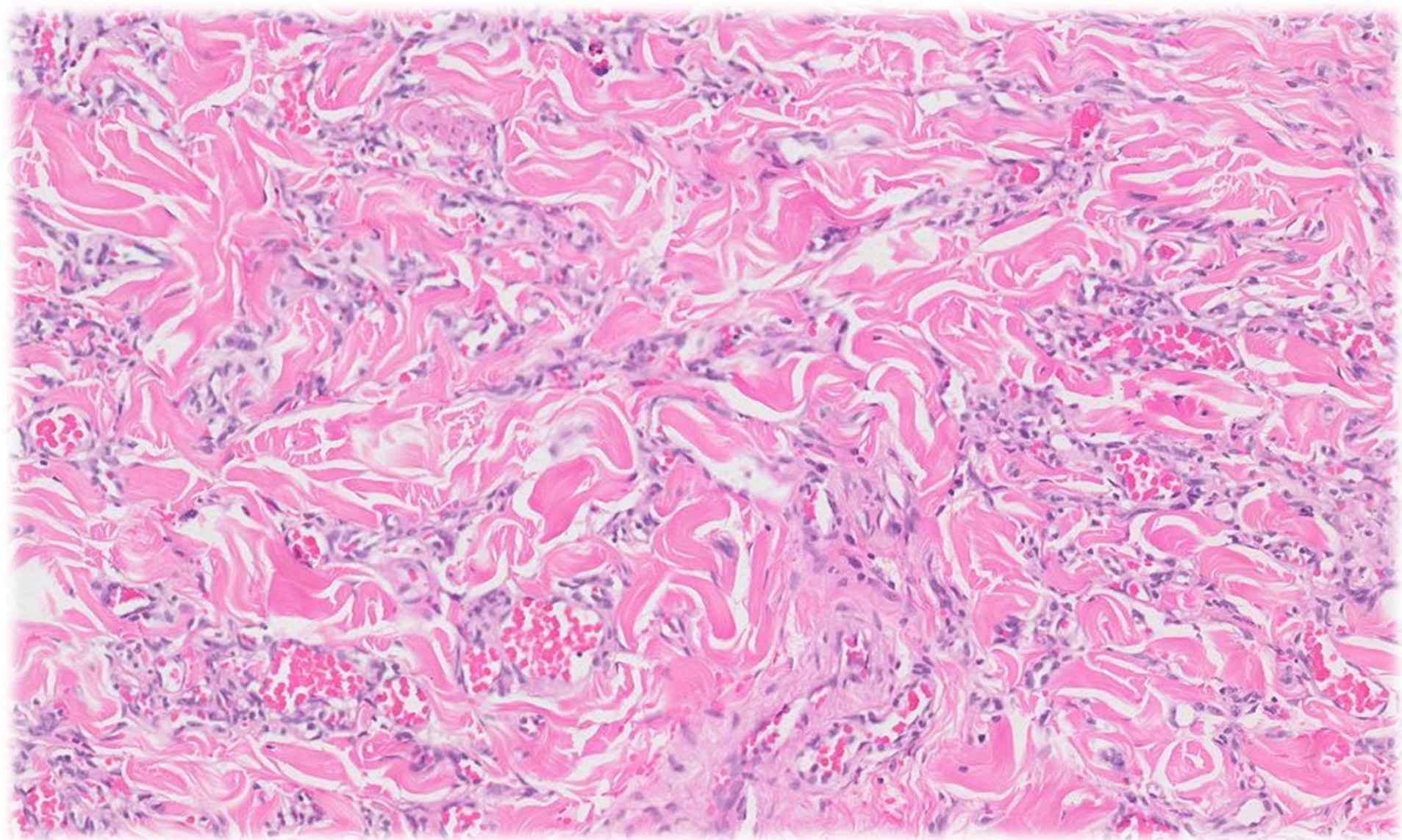
500 μ m

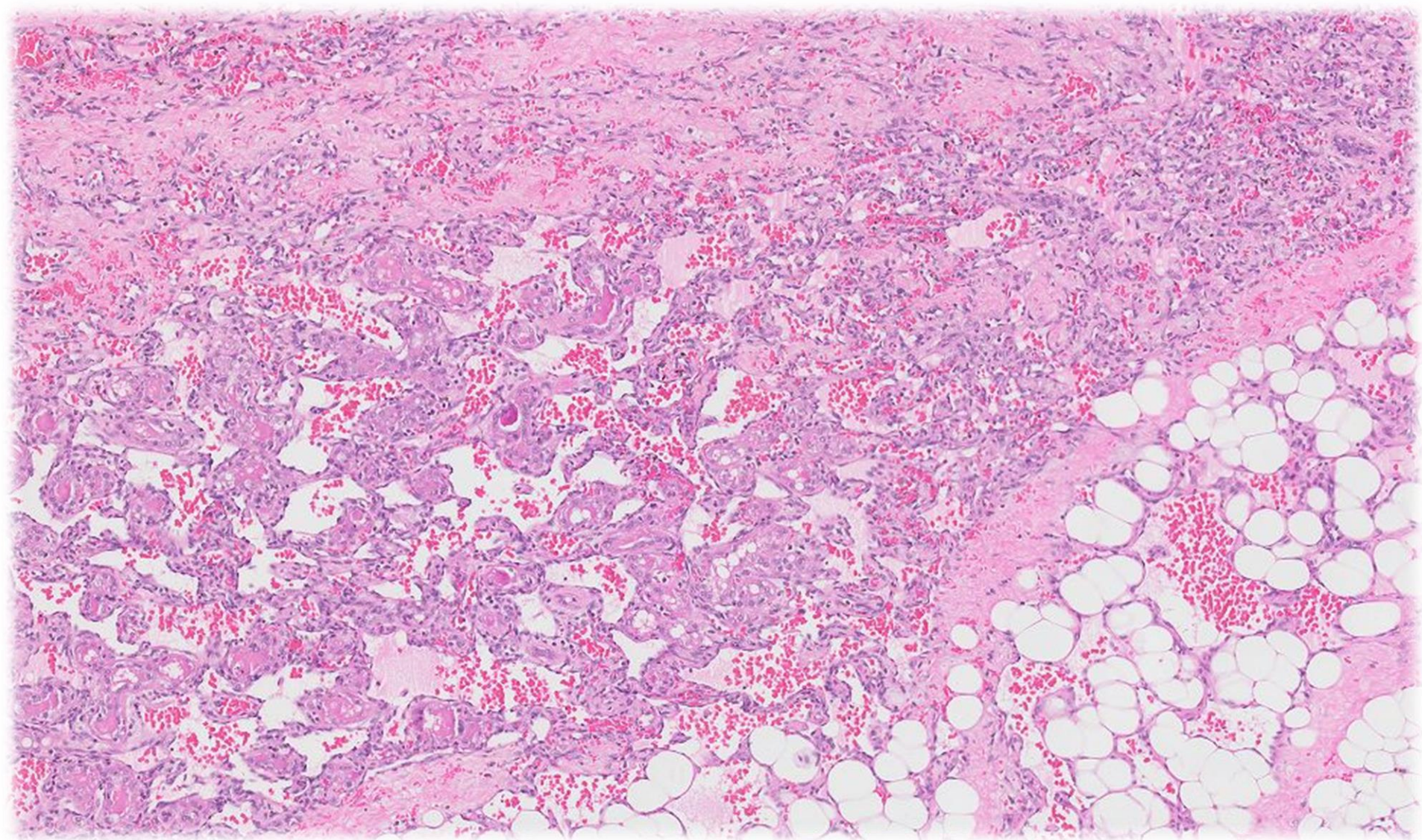
***View of Singapore General Hospital, Ministry of Health,
Duke-NUS Graduate Medical School from Academia***

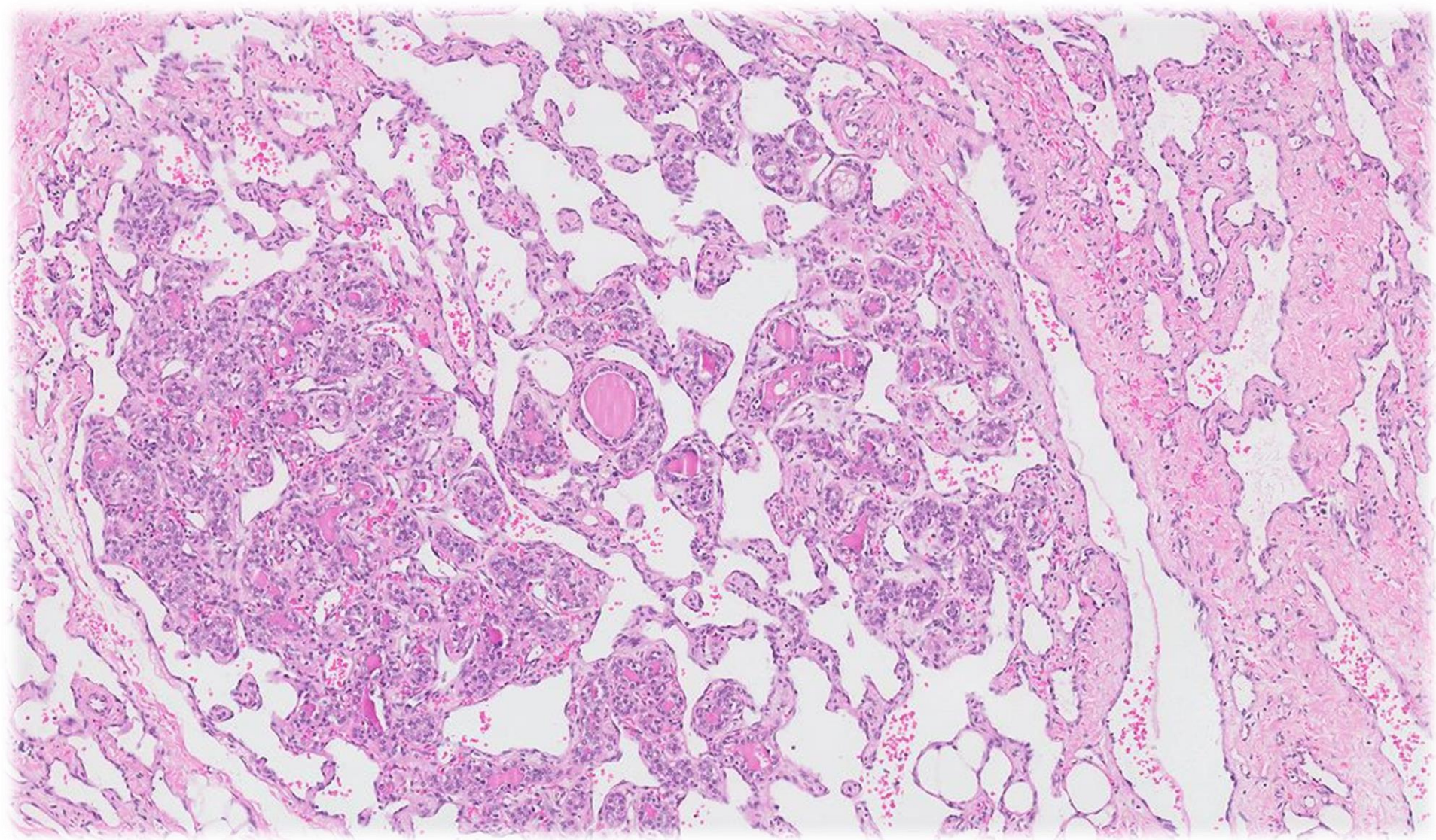


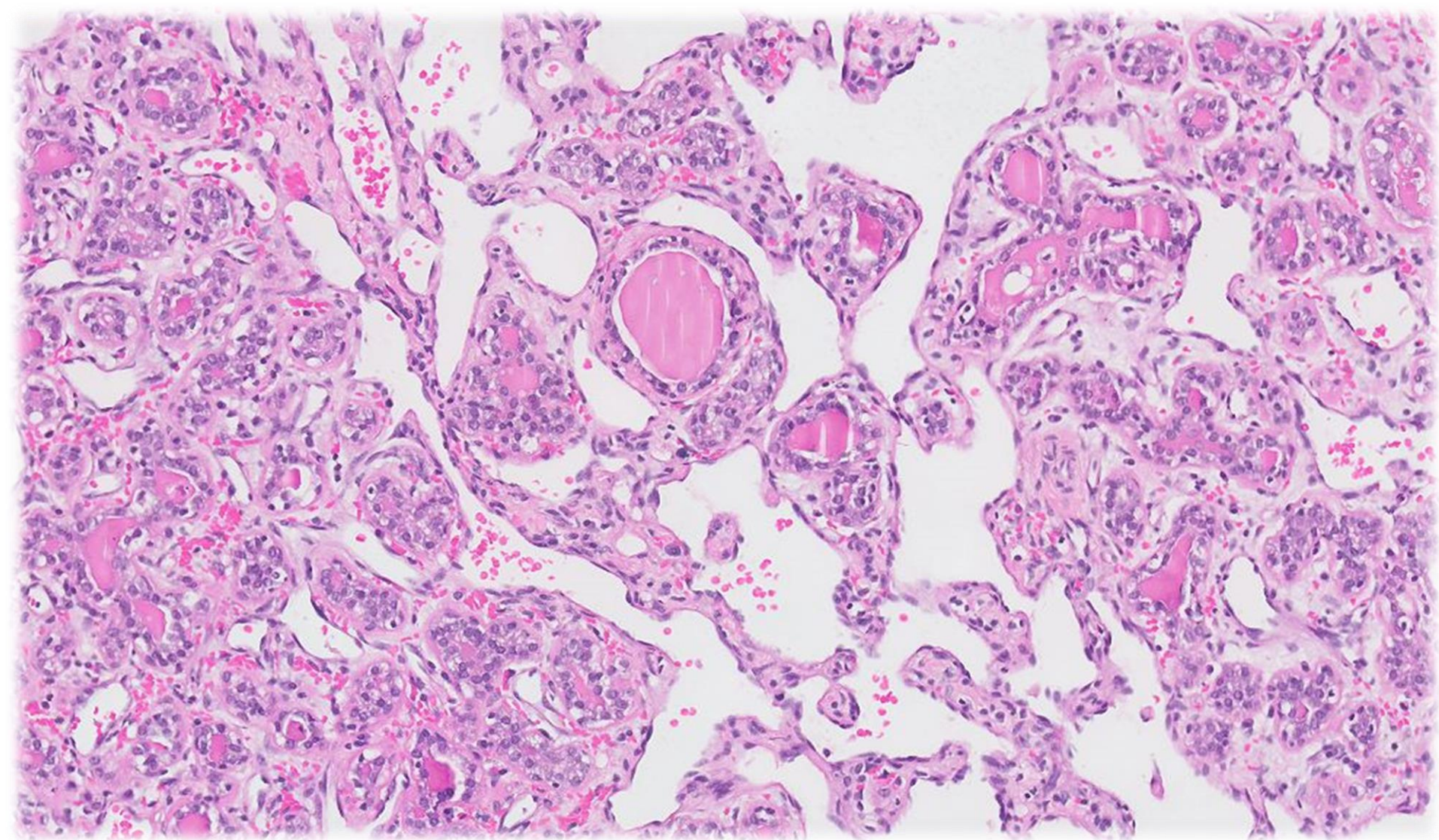


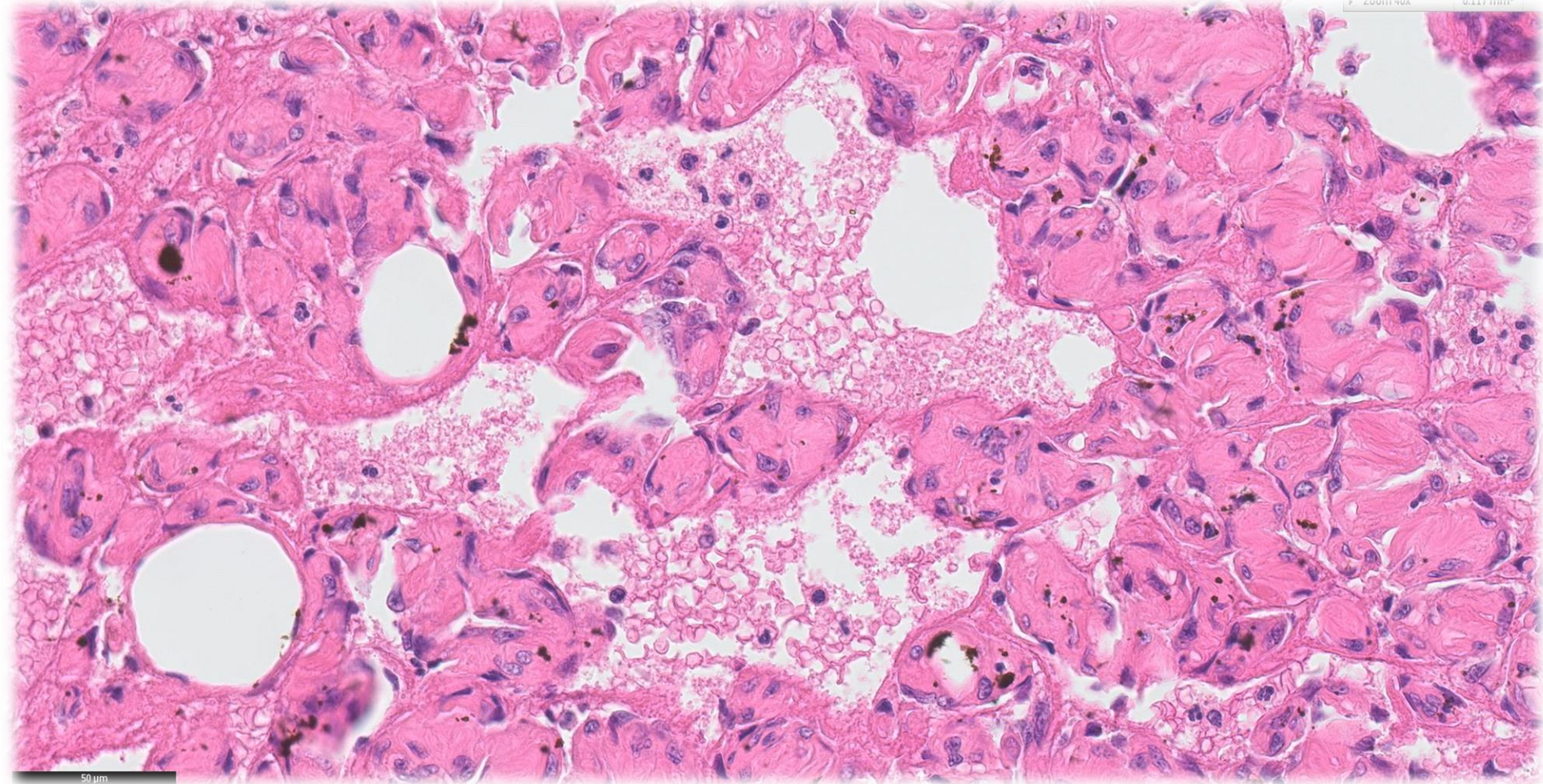




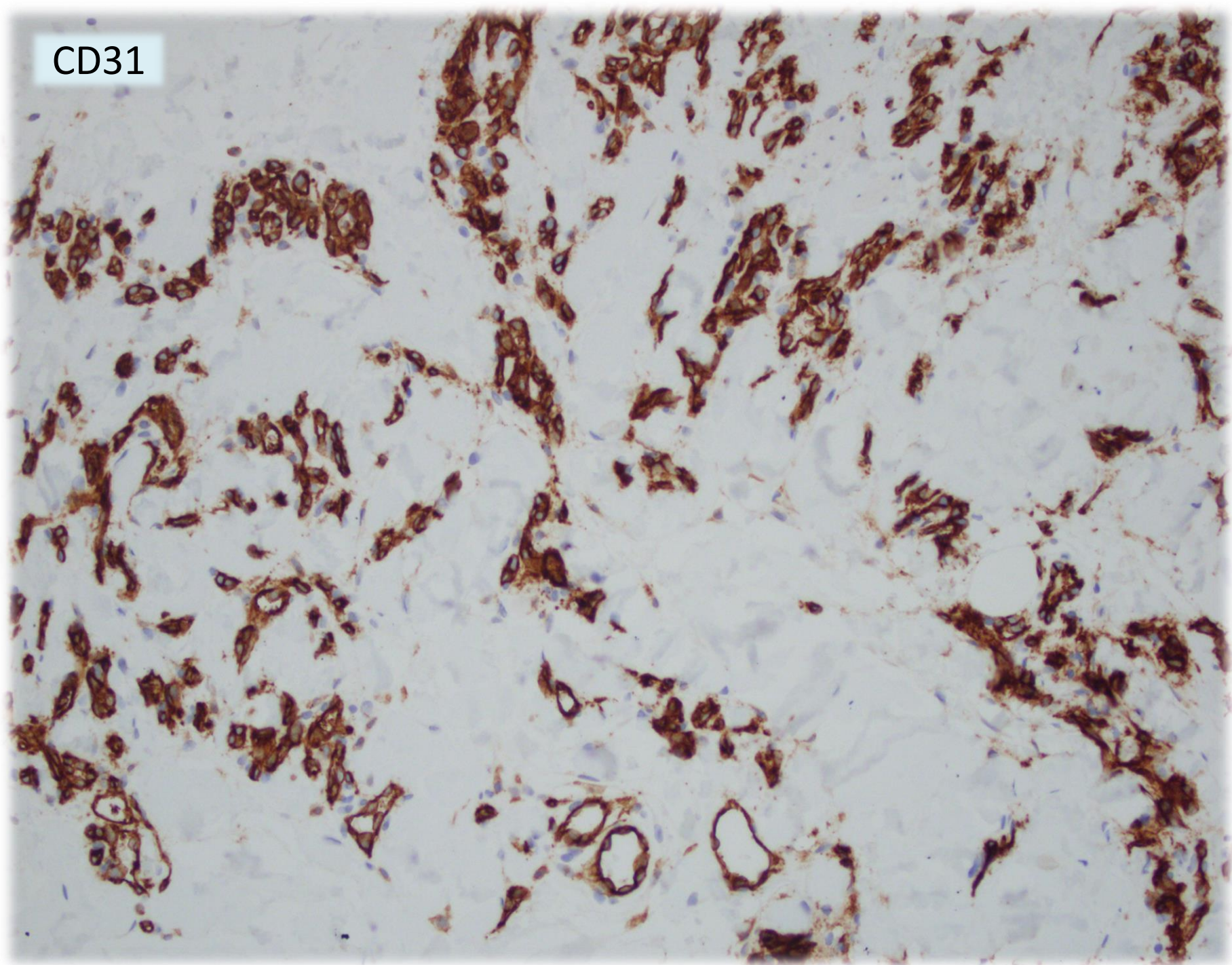




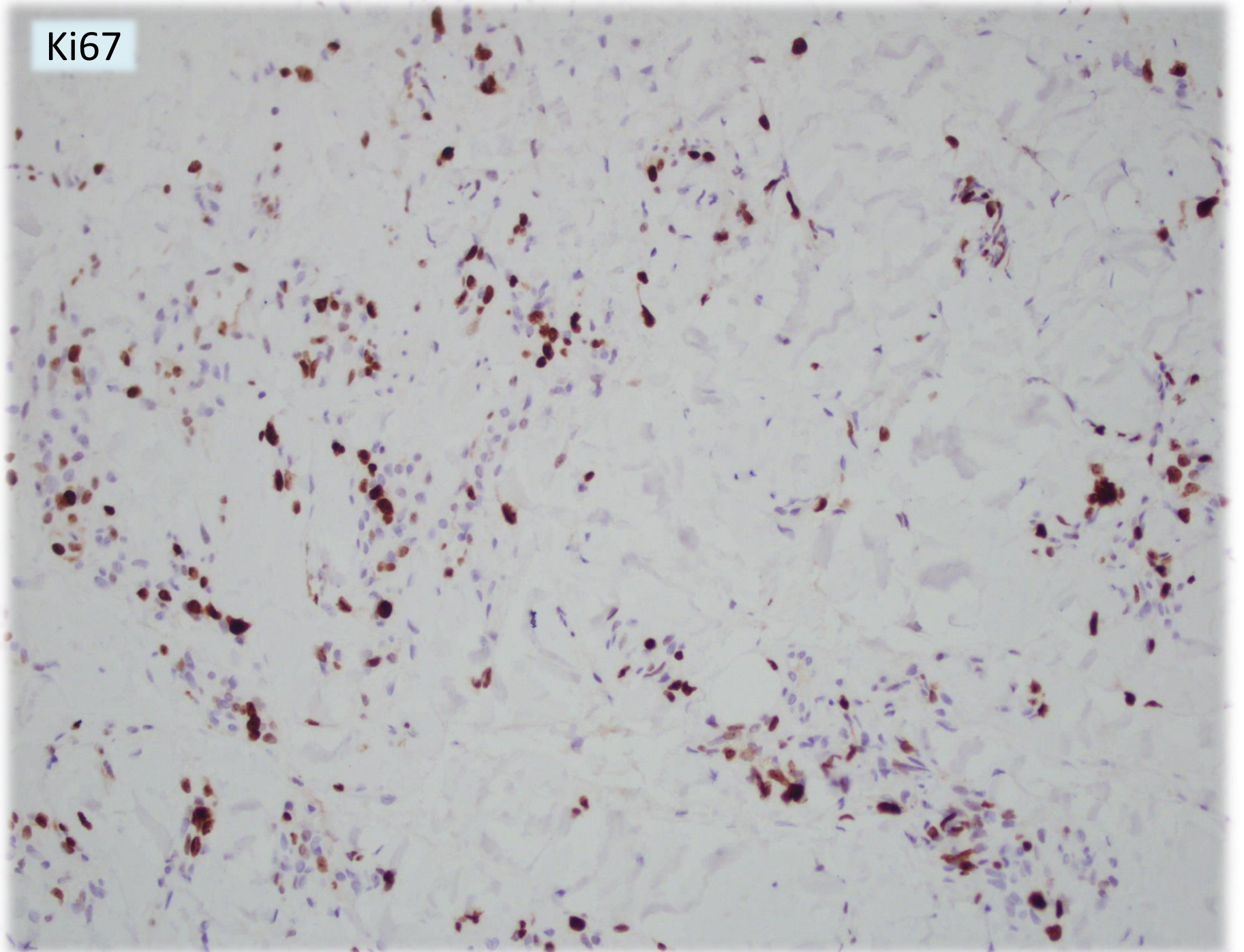




CD31



Ki67



Diagnosis

- Angiosarcoma, 8cm, involving the overlying skin.
- Predominantly low grade features, with focally more solid areas raising possibility of an intermediate grade component.

Angiosarcoma

- Commonest primary sarcoma in the breast, after malignant phyllodes tumour.
- Accounts for 0.05% of all primary breast malignancies.
- Classification:
 - Primary: arises in breast parenchyma.
 - Secondary: develops in the skin, chest wall or breast parenchyma after surgery and postoperative radiation for breast cancer (commonest radiation associated sarcoma).

Angiosarcoma

Primary

- Almost exclusively female.
- Median age 40 years.
- Clinical features:
 - Painless mass.
 - Diffuse breast enlargement.
 - May be bilateral.

Secondary

- 2 clinical settings:
 - Chest wall post-mastectomy and radiotherapy (latent period 7-10 years), older patients (60-80 years).
 - Tumour within the breast post lumpectomy and radiotherapy (latent period 5-6 years), broad age range.
- Usually involves skin, may occur in breast parenchyma.
- Often multifocal.
- Preceding or concurrent atypical vascular lesions.

Angiosarcoma

- Histopathology:
 - Well, intermediate and poorly differentiated.
(based on size of vascular channels, endothelial atypia, mitoses, multilayering)
- Differential diagnosis:
 - PASH, angioliipoma, benign vascular lesions, papillary endothelial hyperplasia, spindle cell carcinoma, other sarcomas.
 - Panel immunohistochemistry.
- Genetics:
 - Activating mutations in tyrosine kinase receptor.
 - Myc amplification in radiation induced angiosarcoma.
- ***Grade is of no prognostic value (AJSP 2008;32:1896-1904).***
- OS < 6 years.

