

Case 26

60 year old Chinese woman underwent excision of a right breast lump at the 2 to 3 o'clock position, after a core biopsy revealed an intraductal papillary lesion with florid usual ductal hyperplasia.

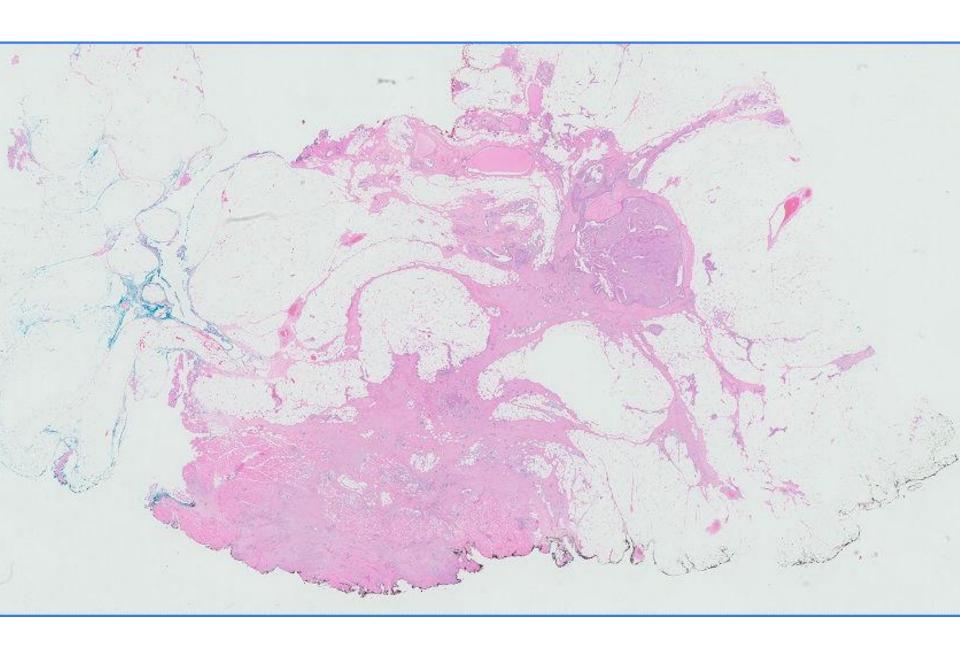
(Case contributed by Dr May Ying Leong, KKH)

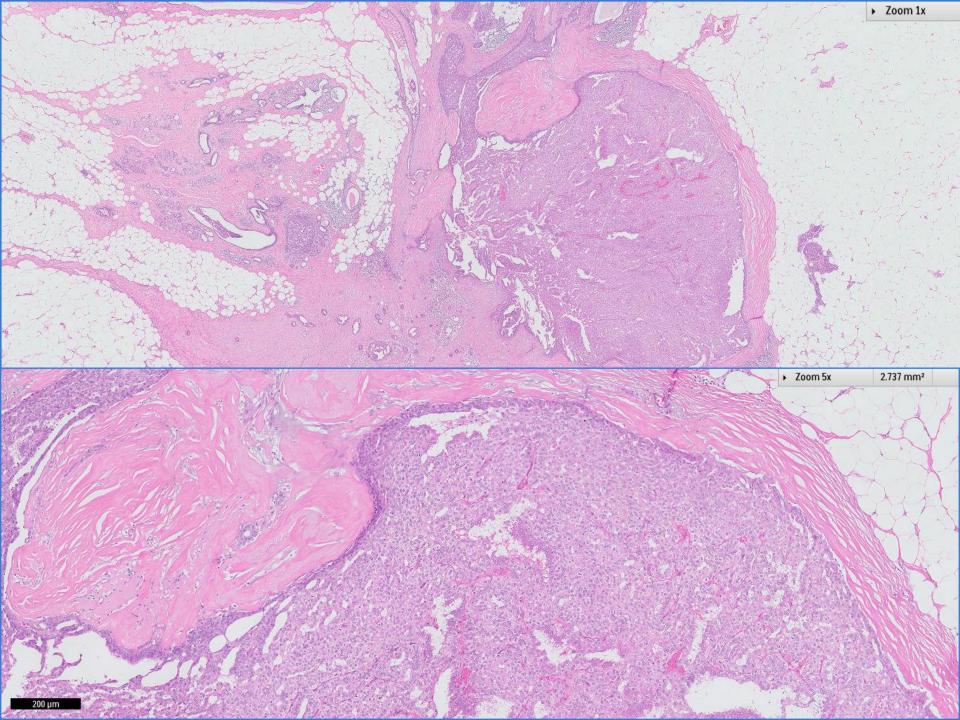


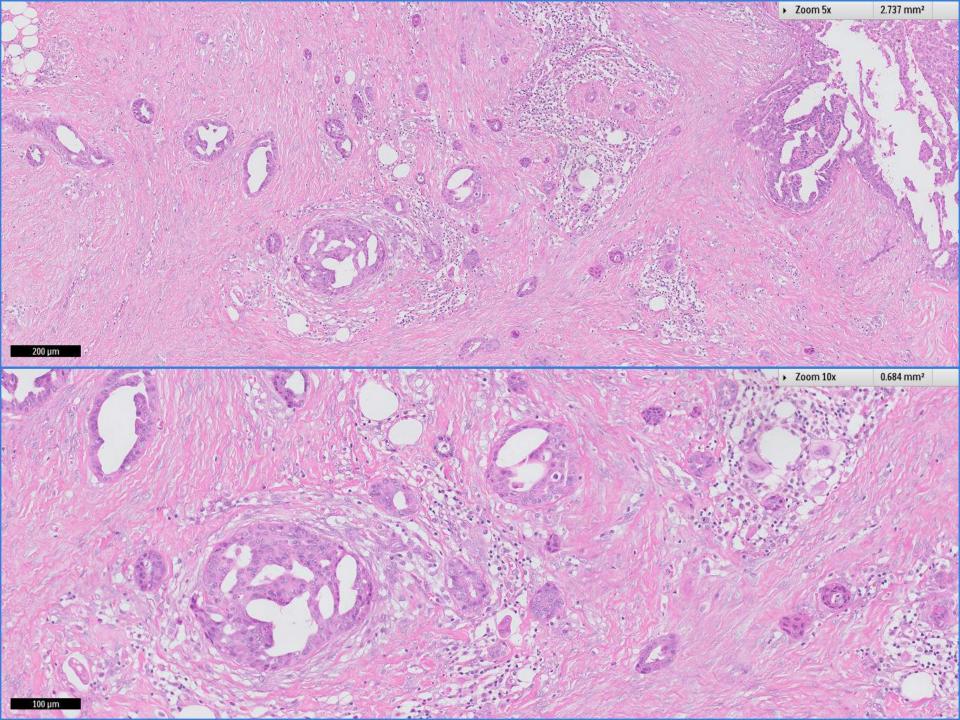


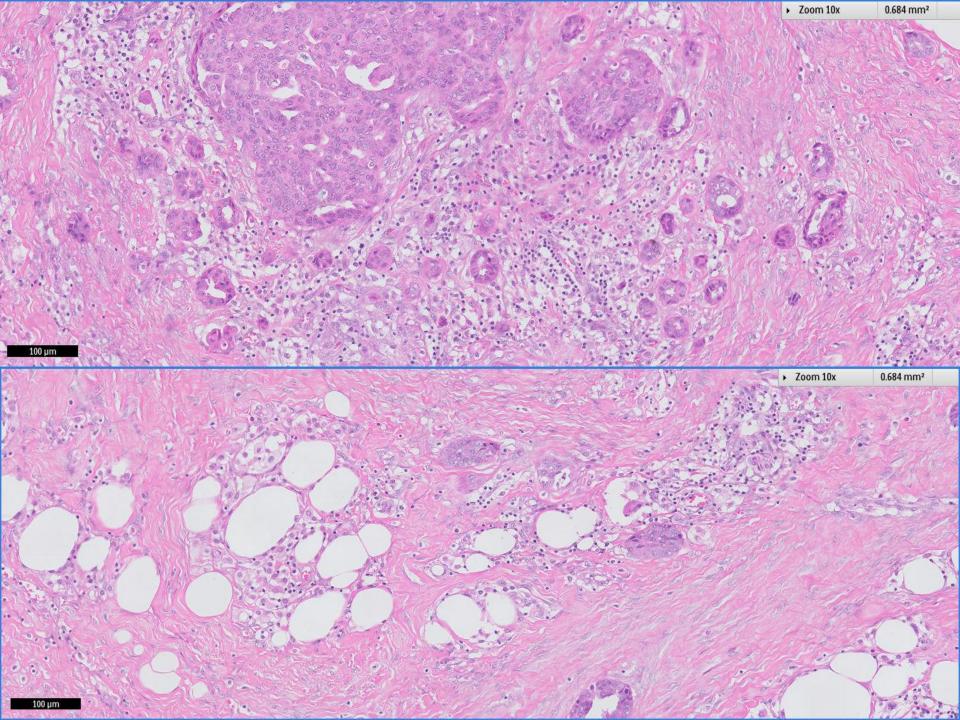






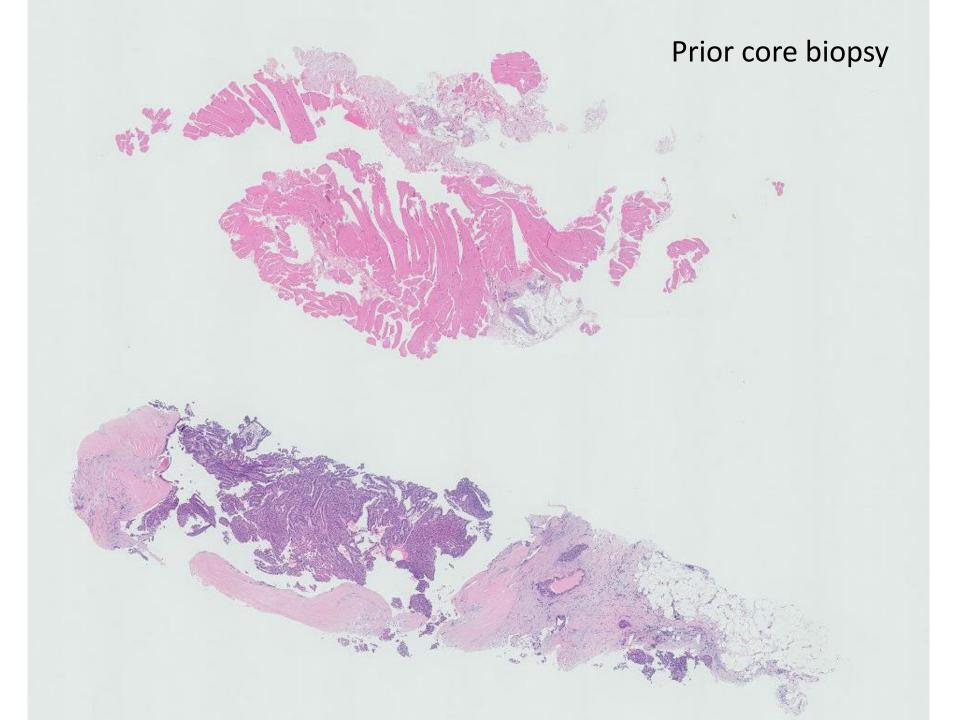




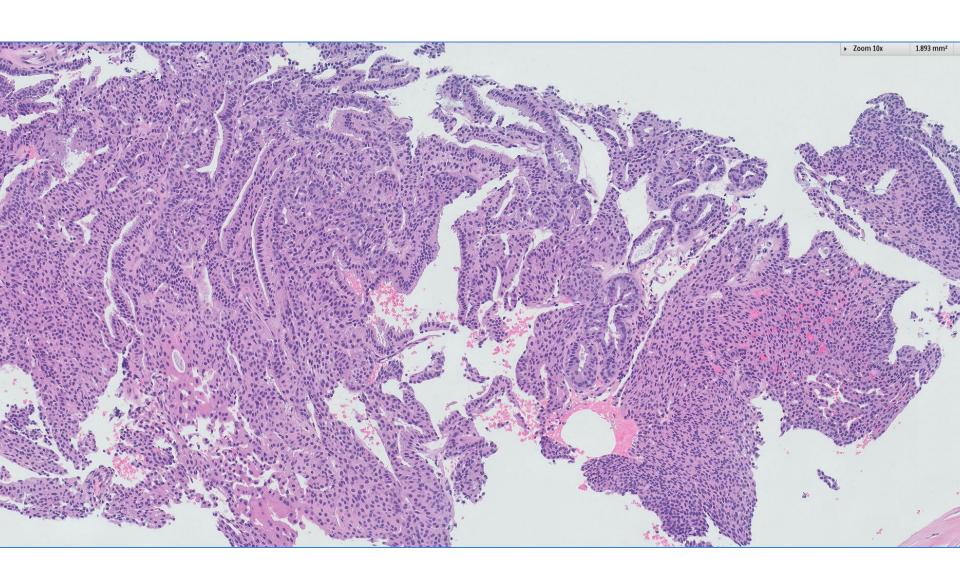


National Day Celebration Singapore 9th August 2016

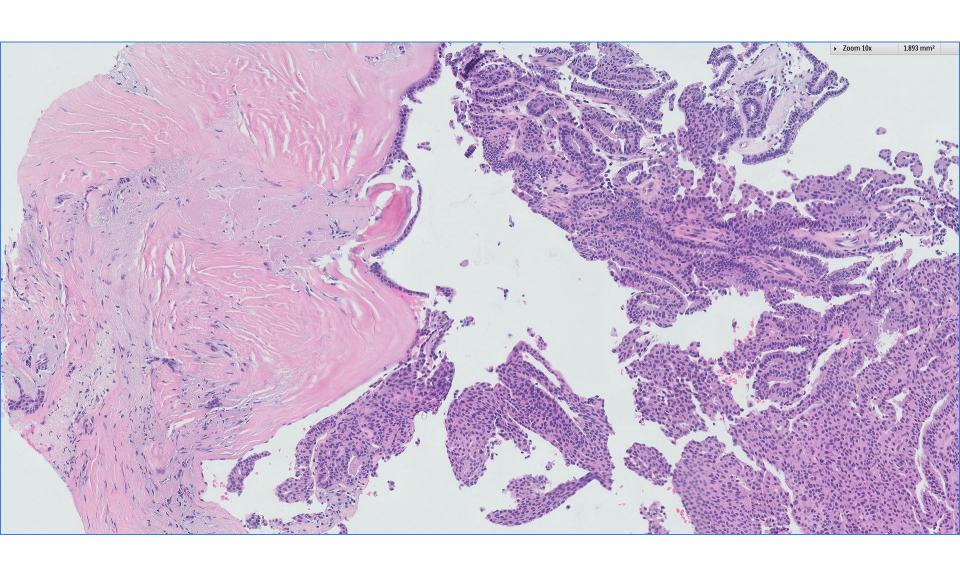


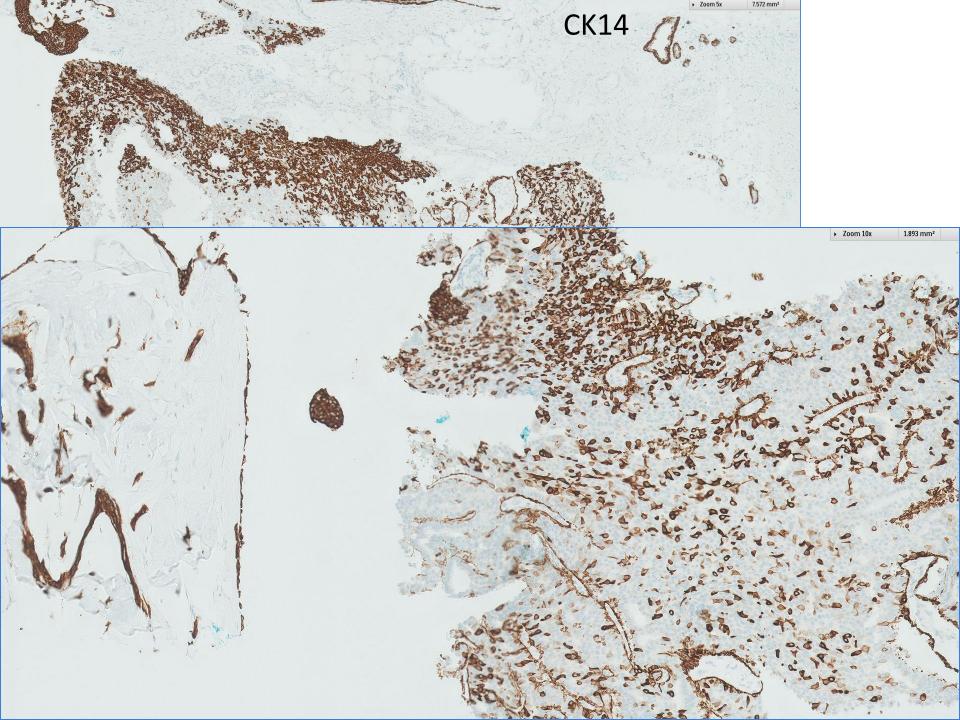


Prior core biopsy

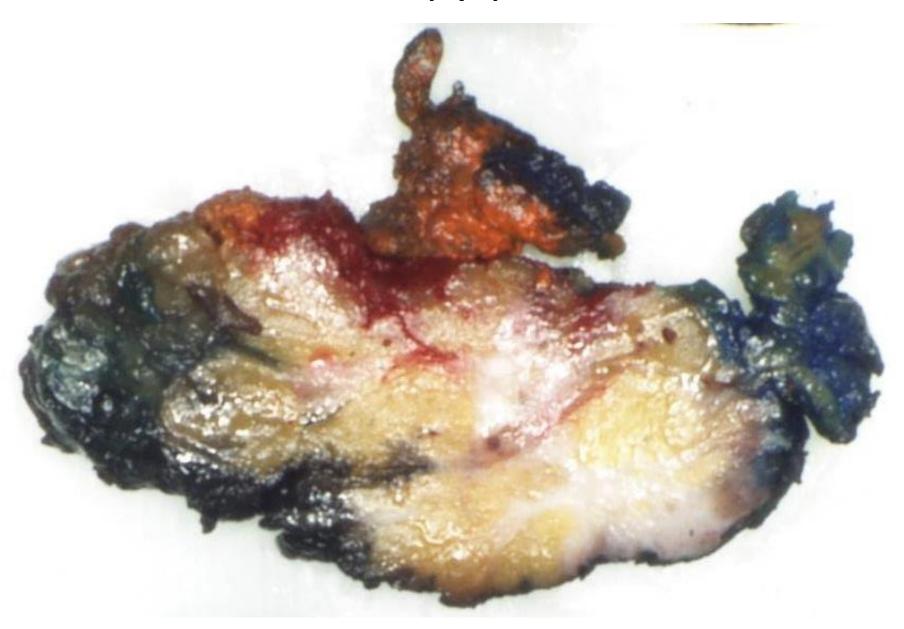


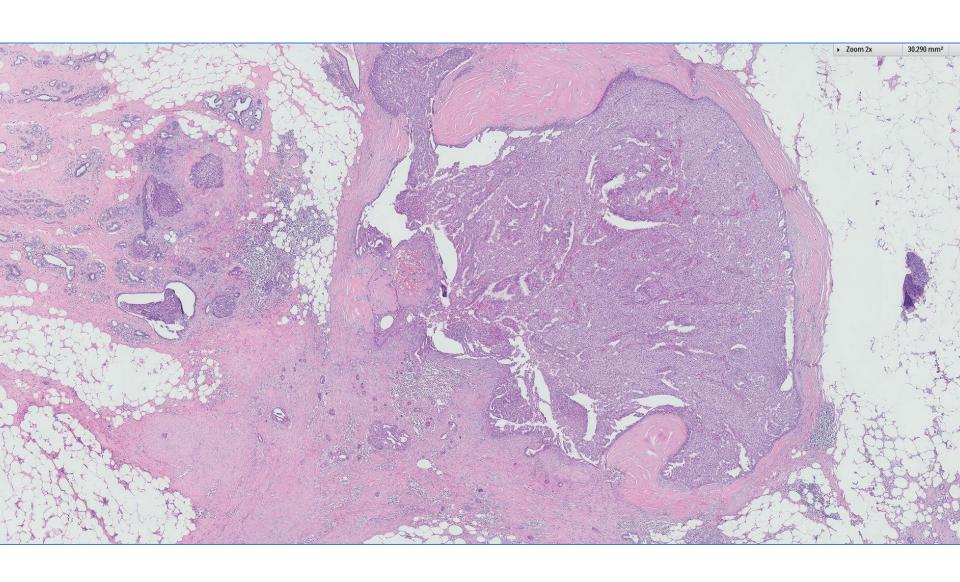
Prior core biopsy

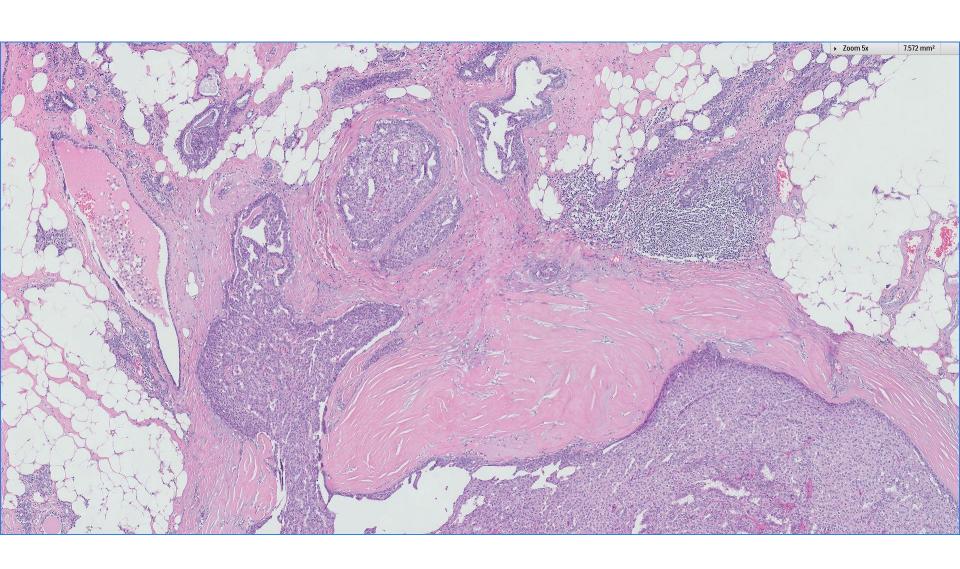


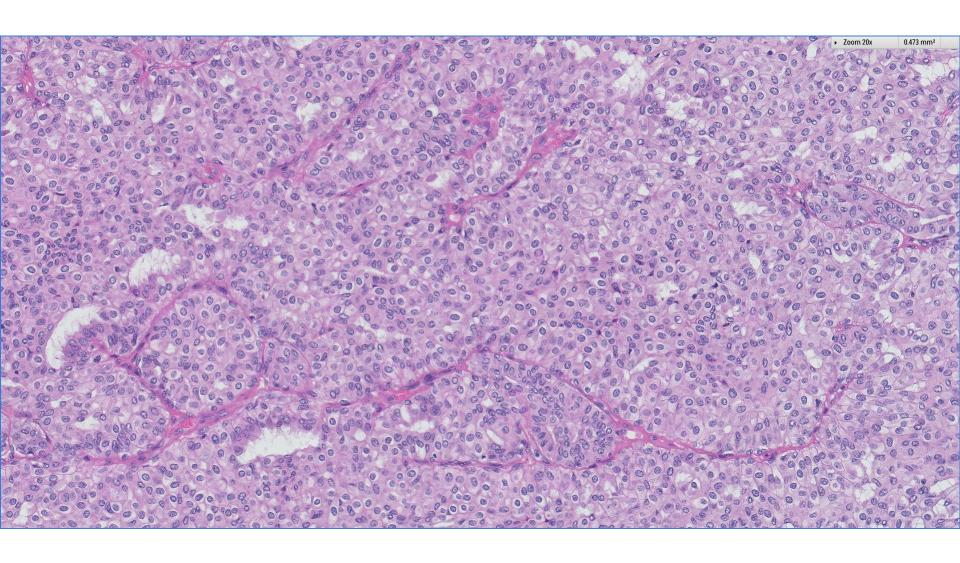


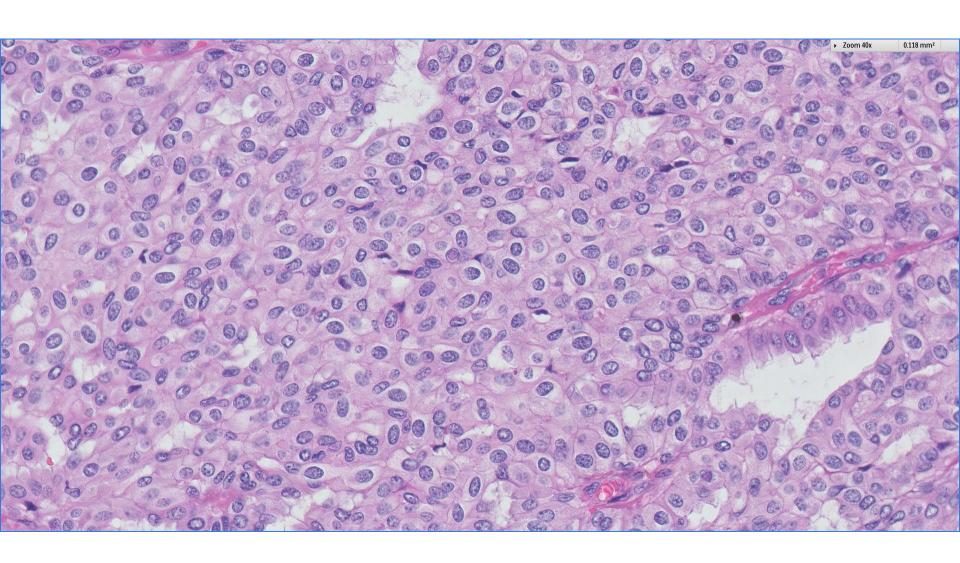
Excision biopsy specimen

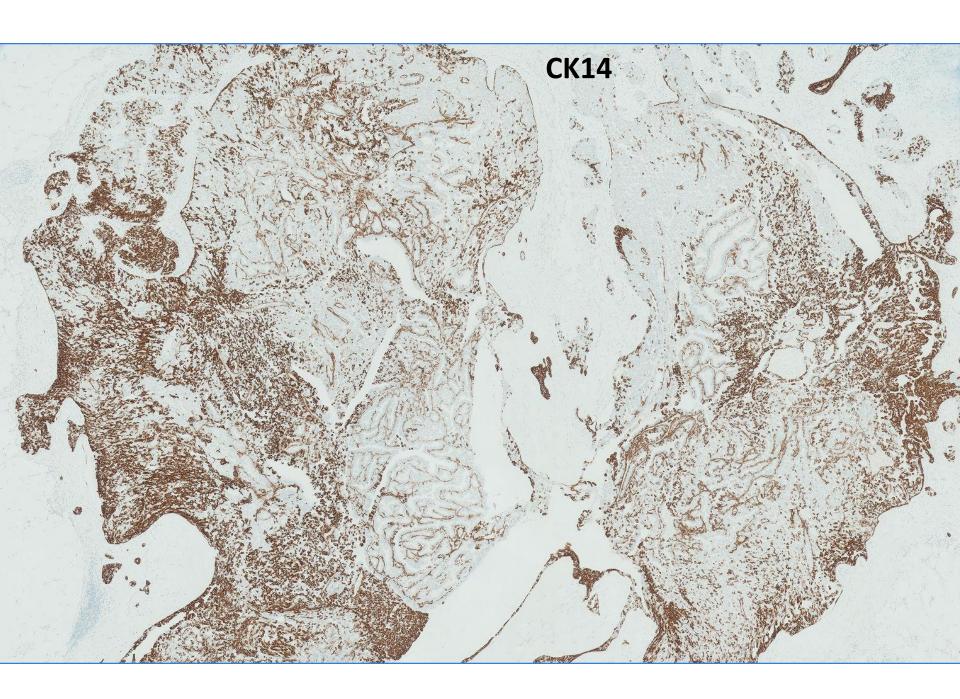




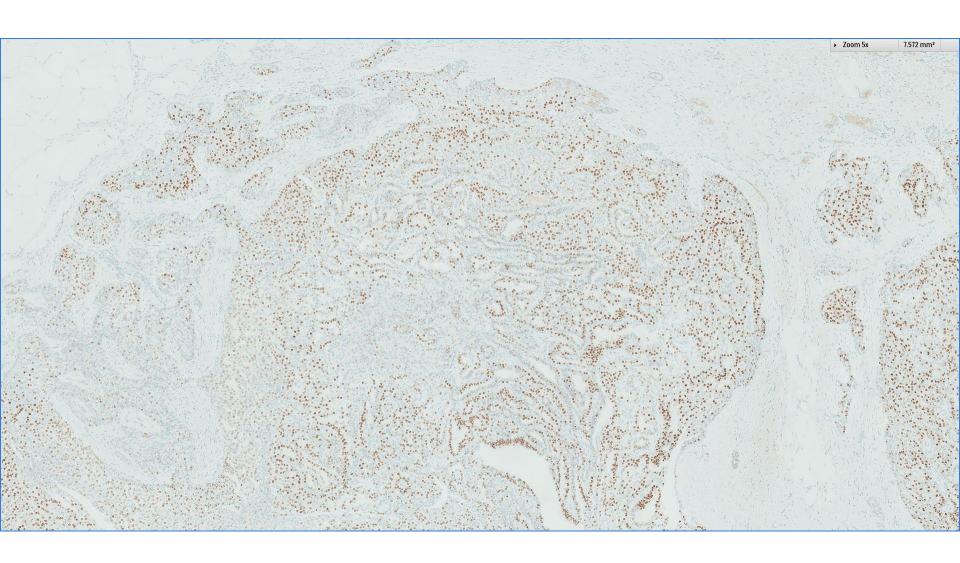


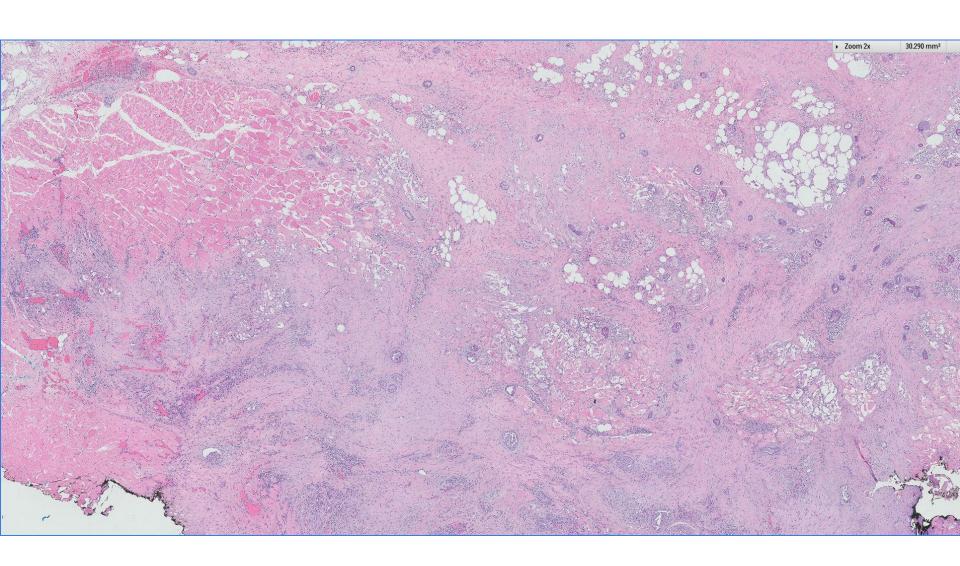


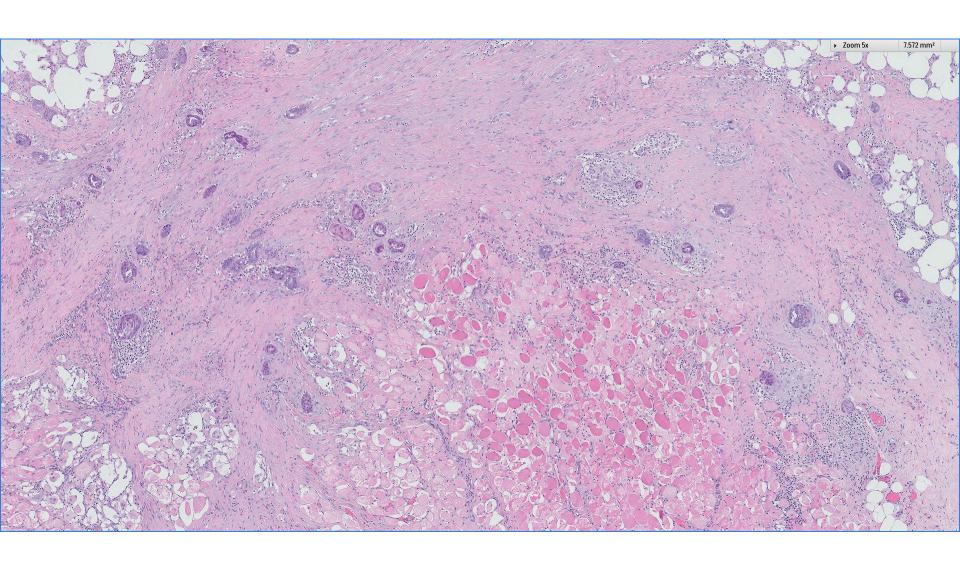


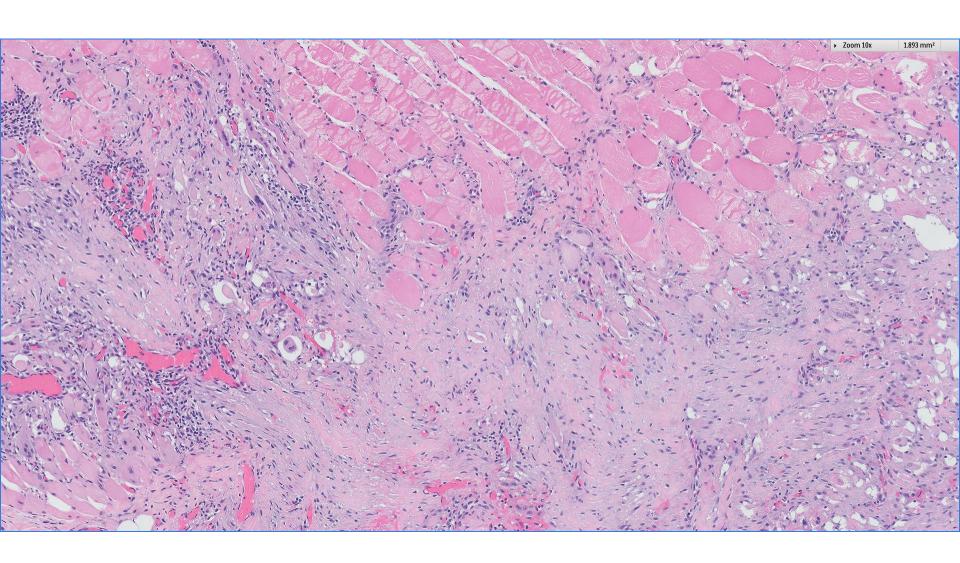


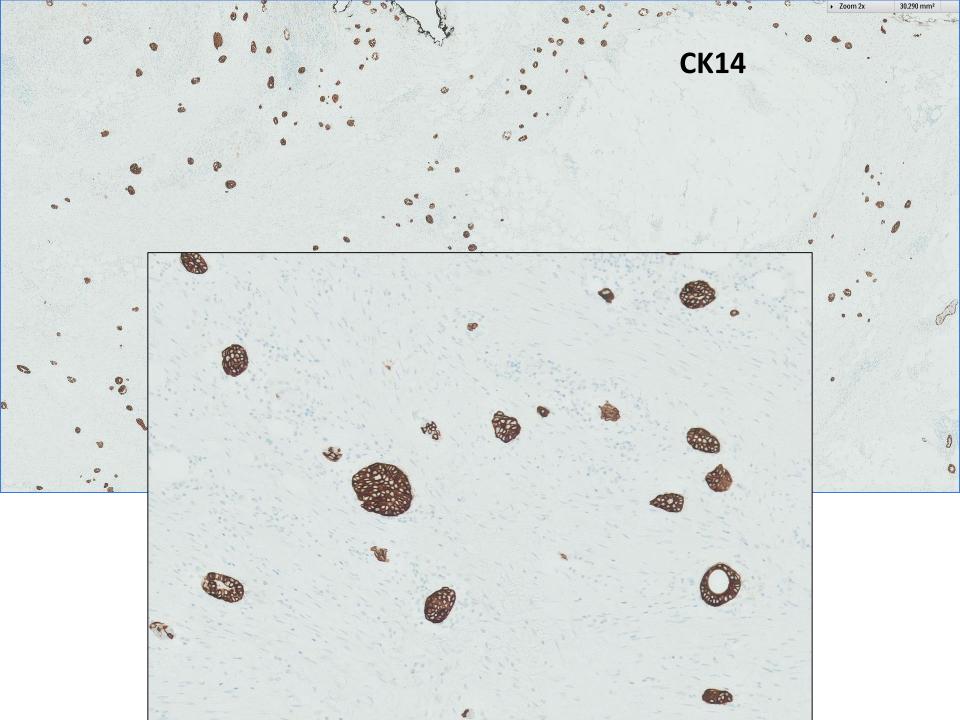
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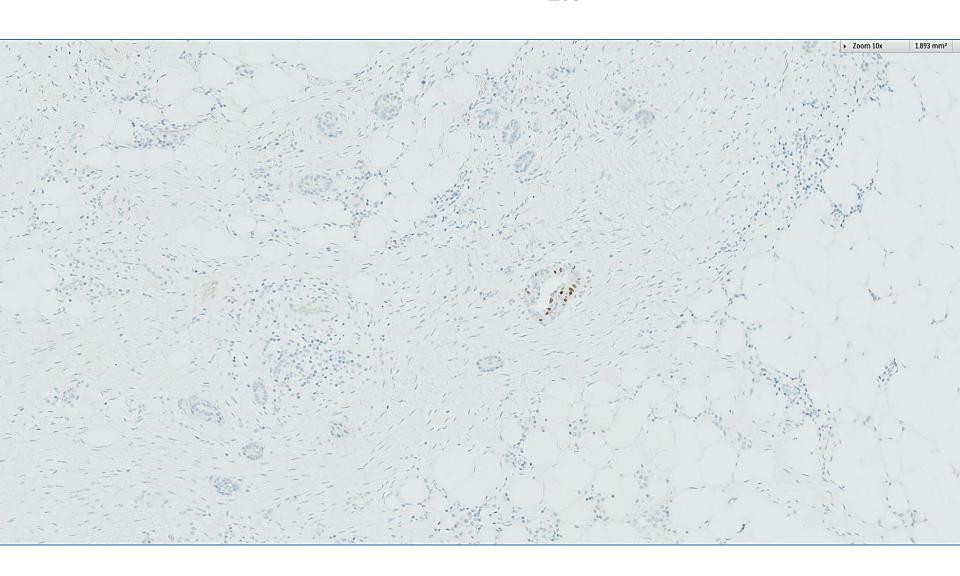


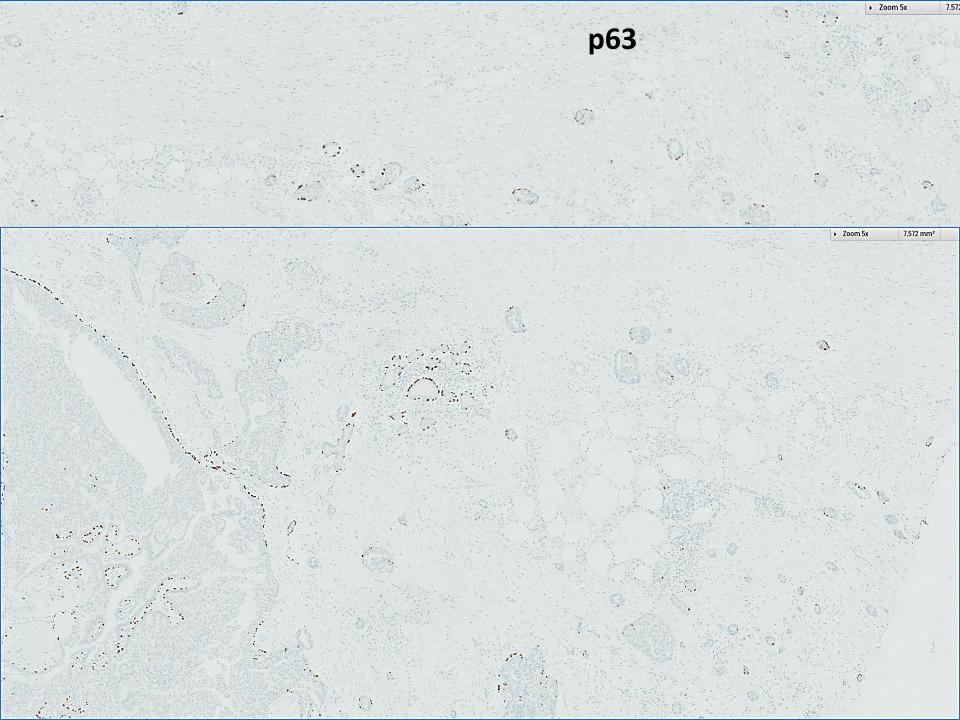






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Diagnosis

Right breast lump, 2 to 3 o'clock, excision biopsy ~

Intraductal papilloma with florid usual ductal hyperplasia and marked epithelial displacement phenomenon









 Epithelial displacement phenomenon may be seen in papillomas with prior instrumentation, mimicking invasive cancer.

Nagi et al. Arch Pathol Lab Med. 2005;129(11):1465-9.

- Displaced epithelial nests are mostly limited to granulation or fibrotic zones of the biopsy tract.
- Immunohistochemistry may be helpful in confirming myoepithelial cuffing.









Histological feature	Entrapped epithelium in sclerosis	Dislocated epithelium post biopsy	Invasive carcinoma
Shape of glands & epithelial clusters	Irregular with patent lumens	Small rounded solid epithelial nests	Irregular trabeculae & nests
Location of epithelial islands	Central portion or immediate periphery of IP	Usually at the periphery of IP, within biopsy tract	Usually at periphery invading into surrounding fat
Stroma	Fibrosclerotic	Granulation, reactive fibroblastic	Desmoplastic
Inflammatory cells	Absent or inconspicuous	Chronic and acute inflammation	Variable
Haemosiderophages	Absent	Present	Usually absent
Basement membrane sheath	Present	Absent	Absent
Myoepithelial cells	Preserved	May or may not be preserved	Absent

IP: Intraductal papilloma

