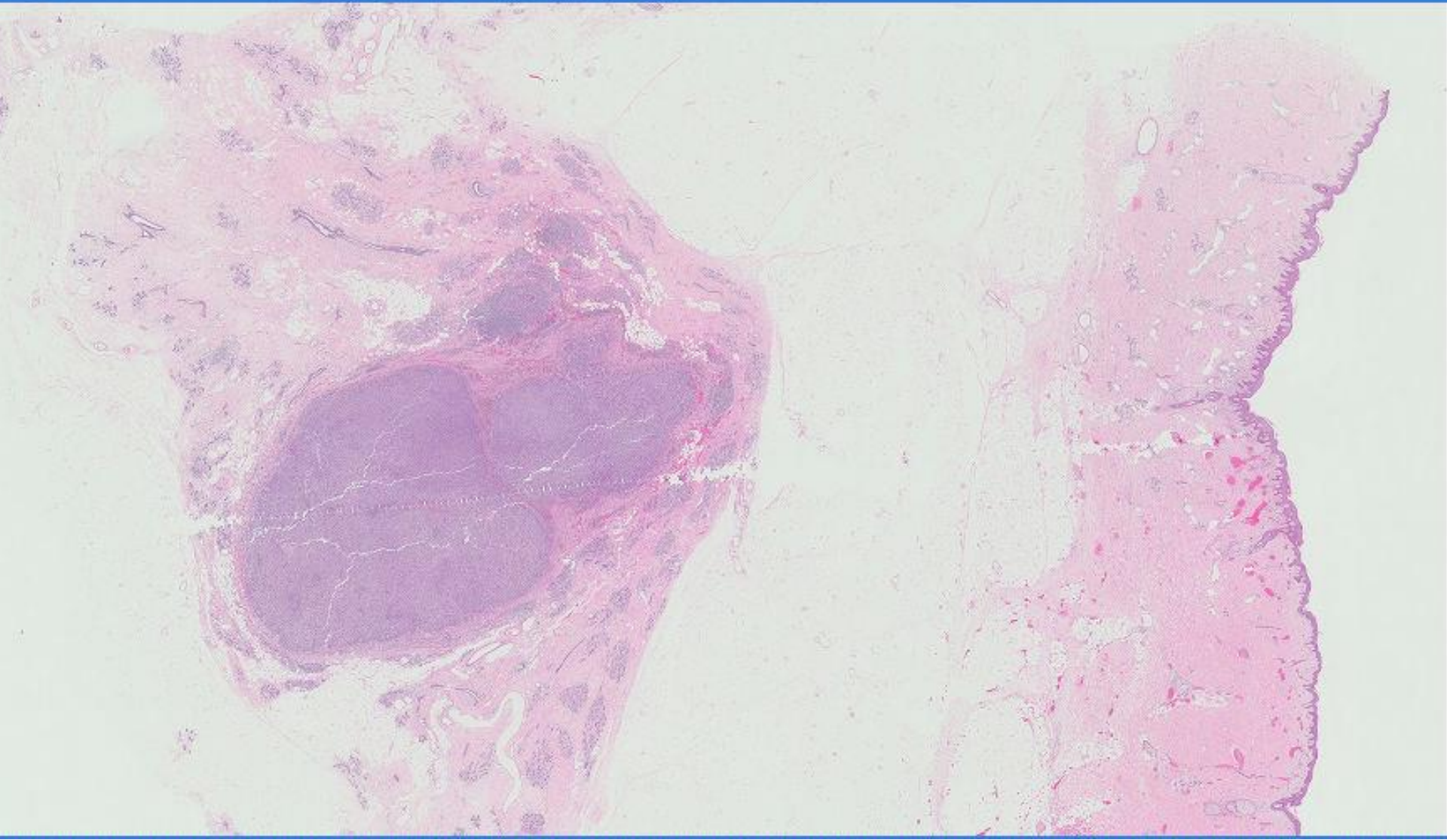
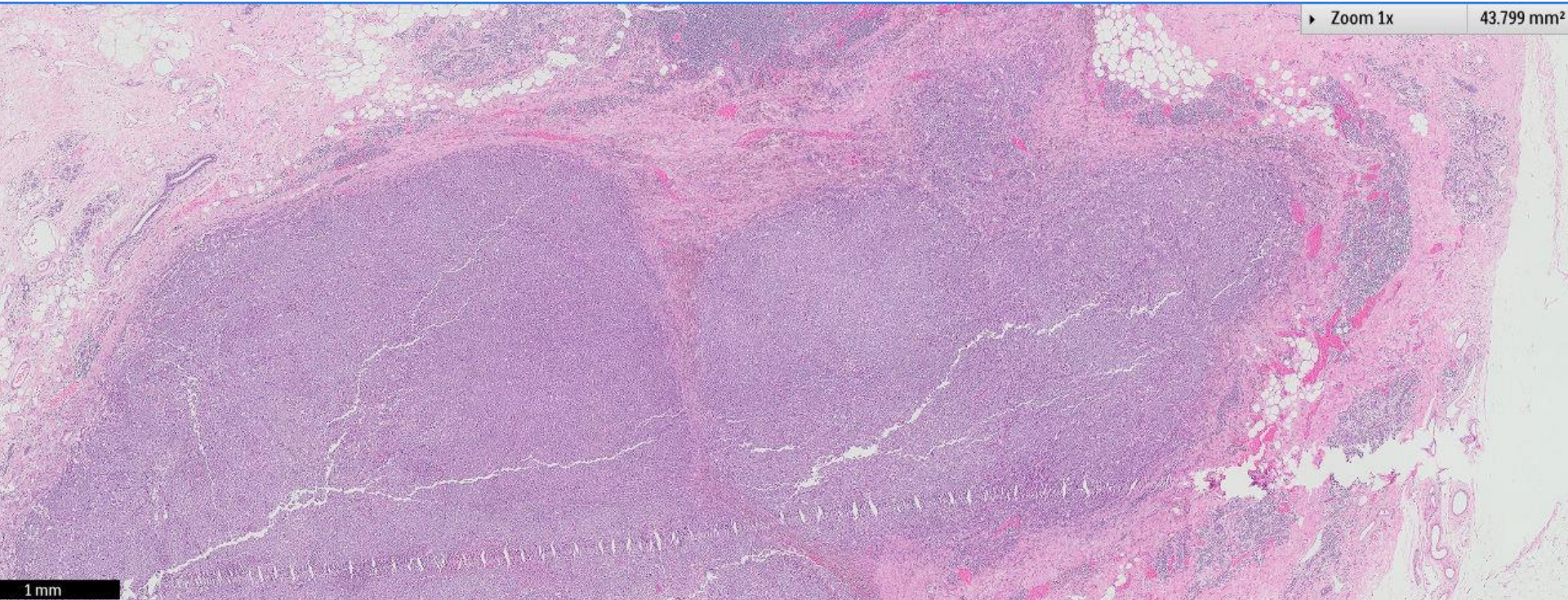


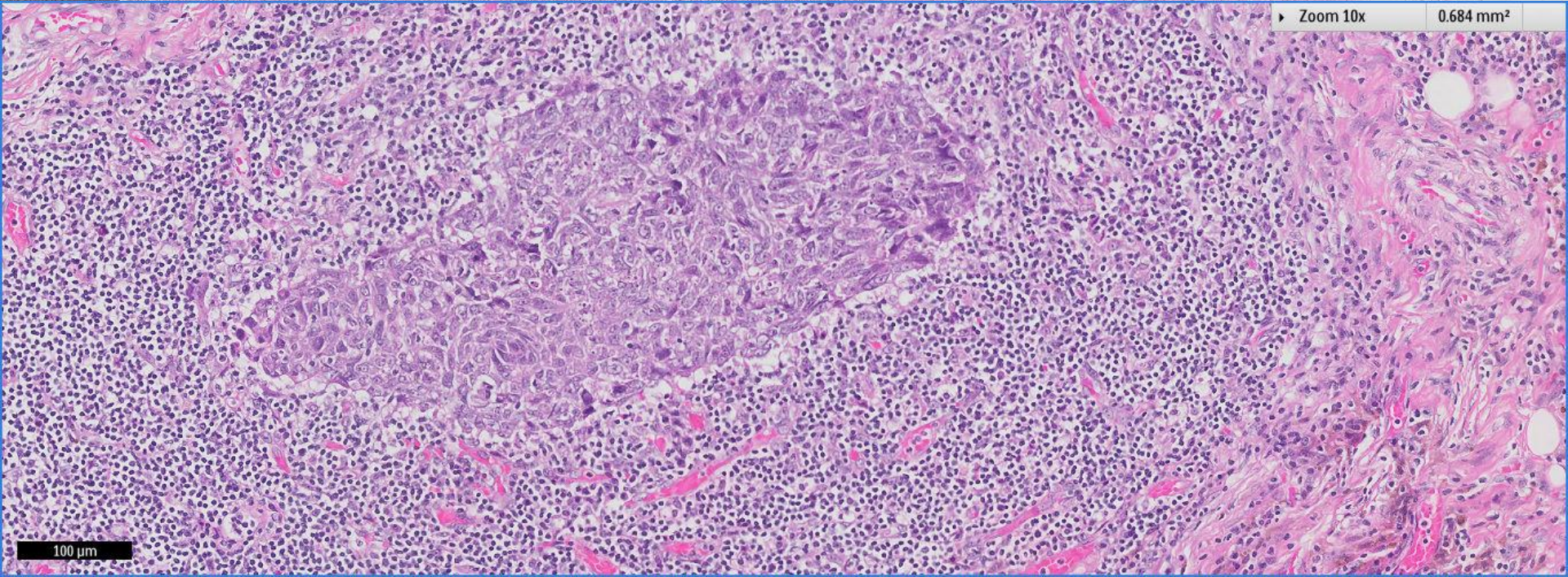
Case 28

33 year old Vietnamese woman
underwent right mastectomy and
sentinel lymph node biopsy for a right
breast tumour.

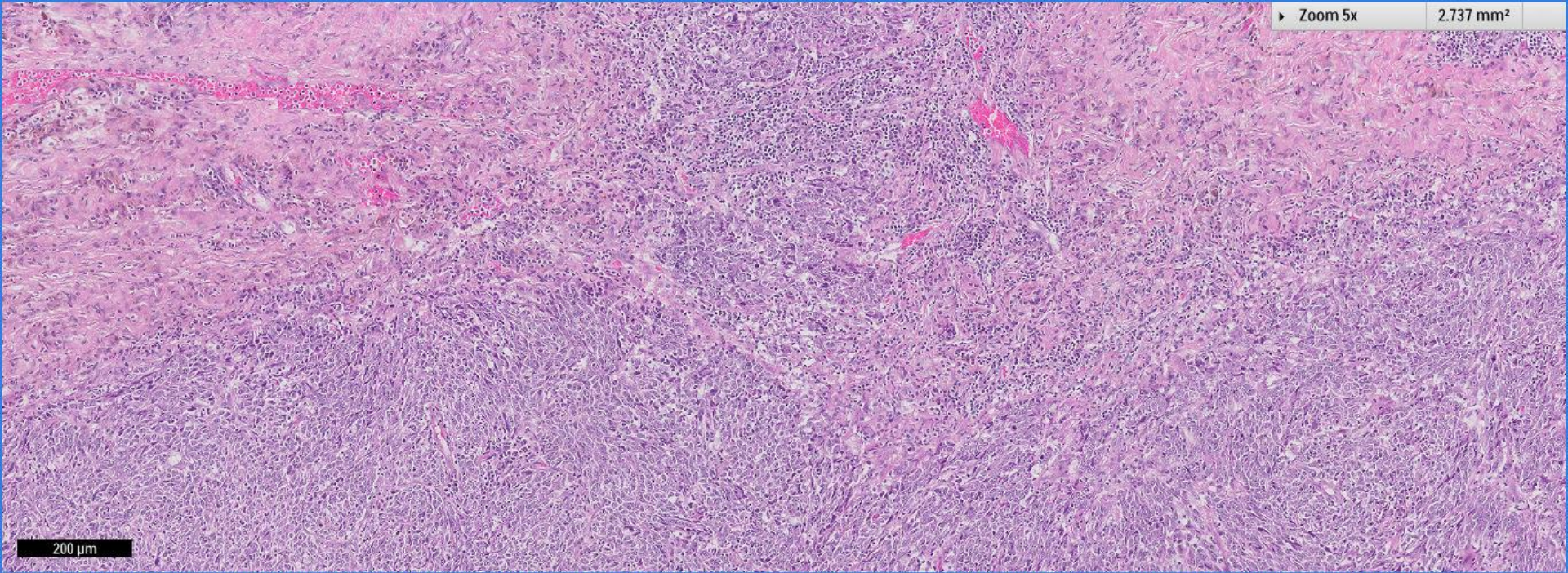




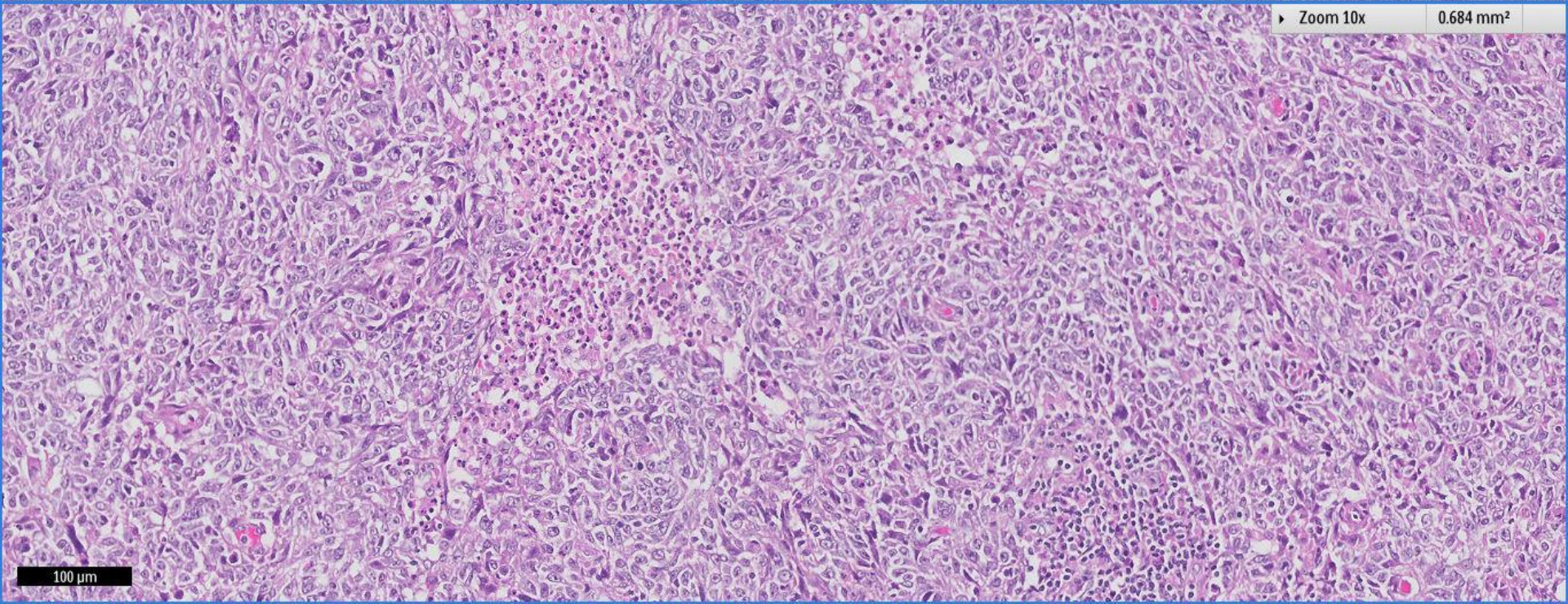
1 mm



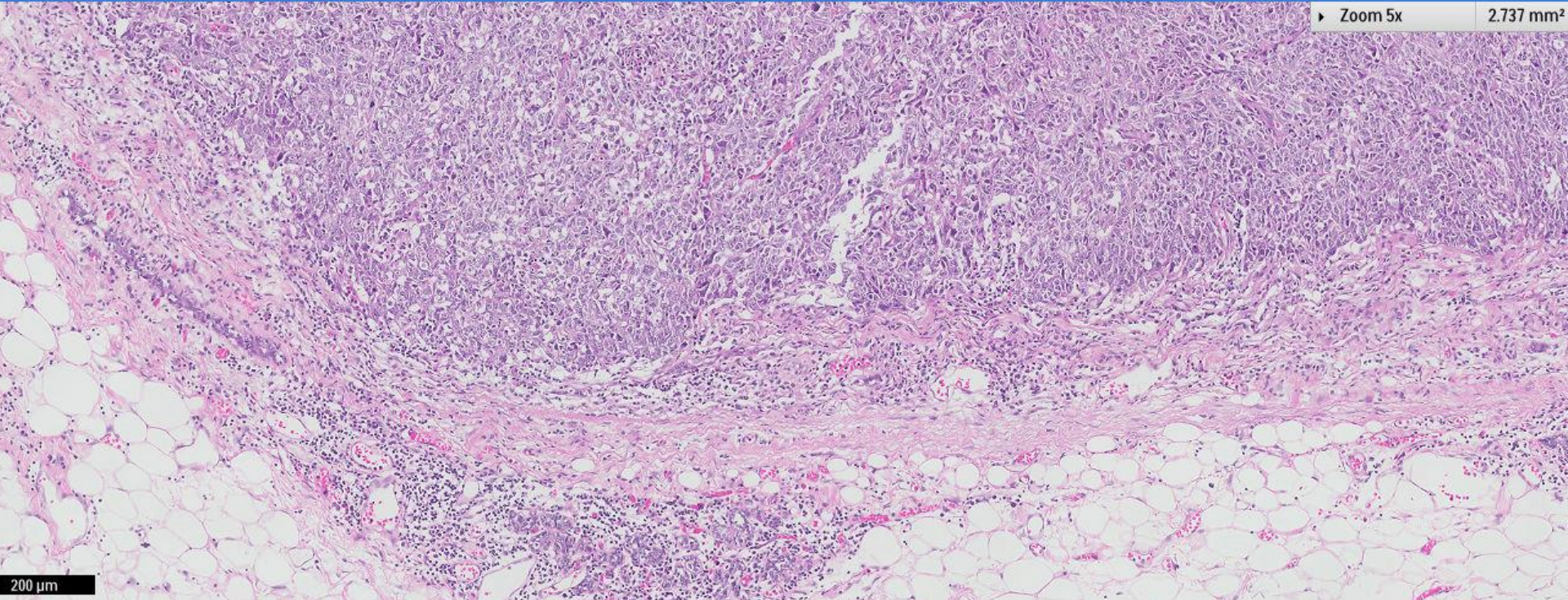
100 μm



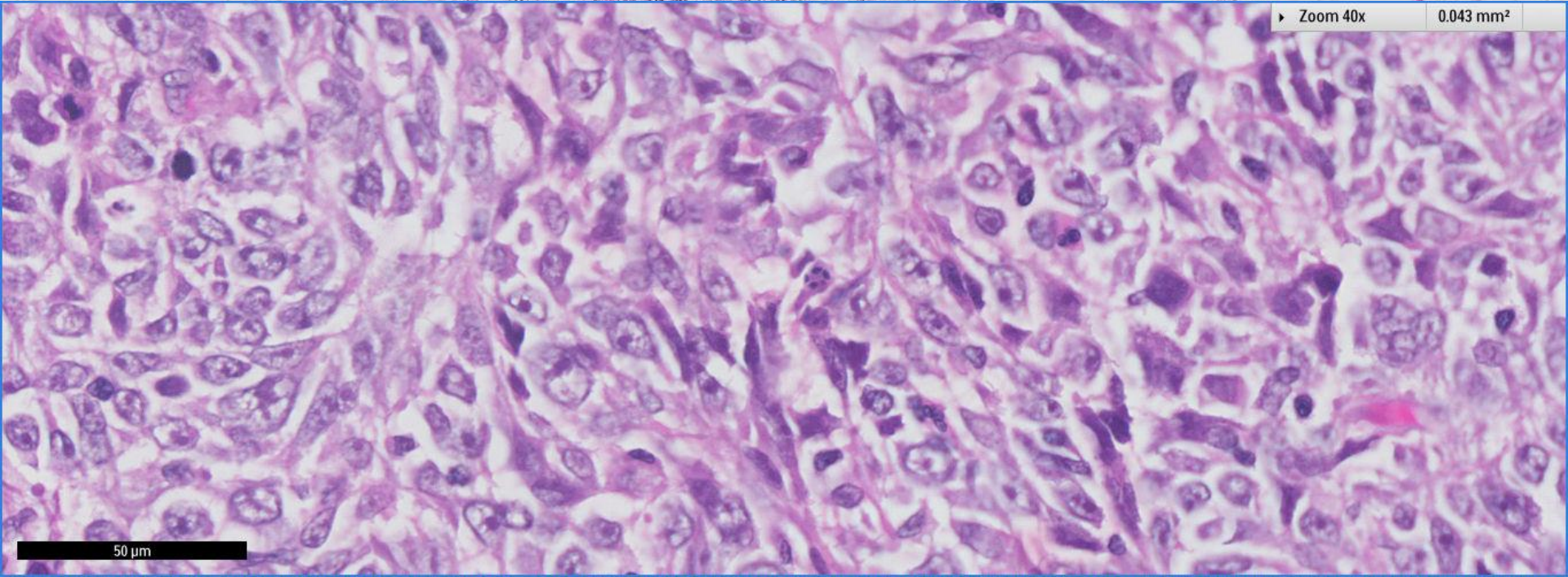
200 μm



100 μm



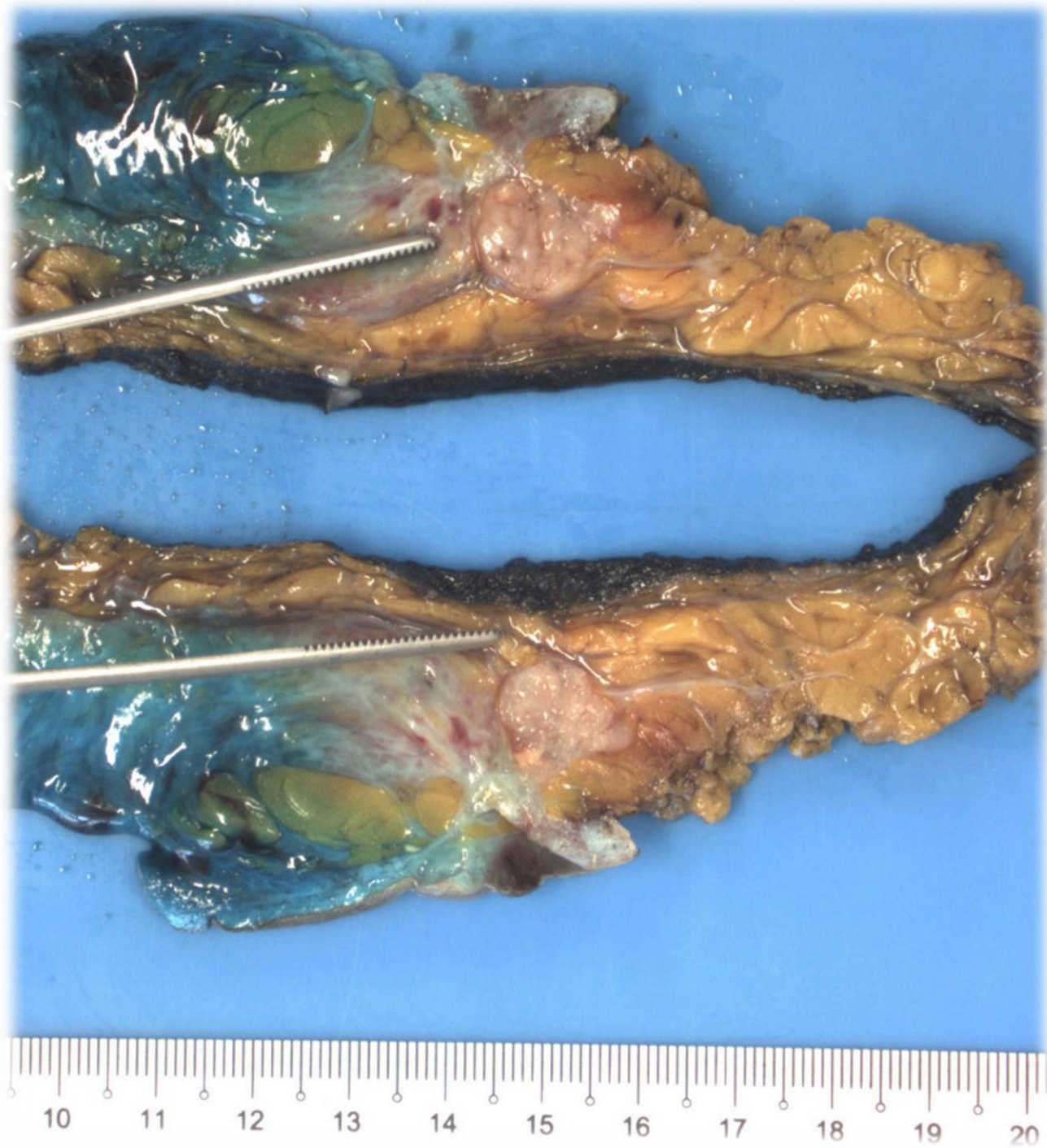
200 μm



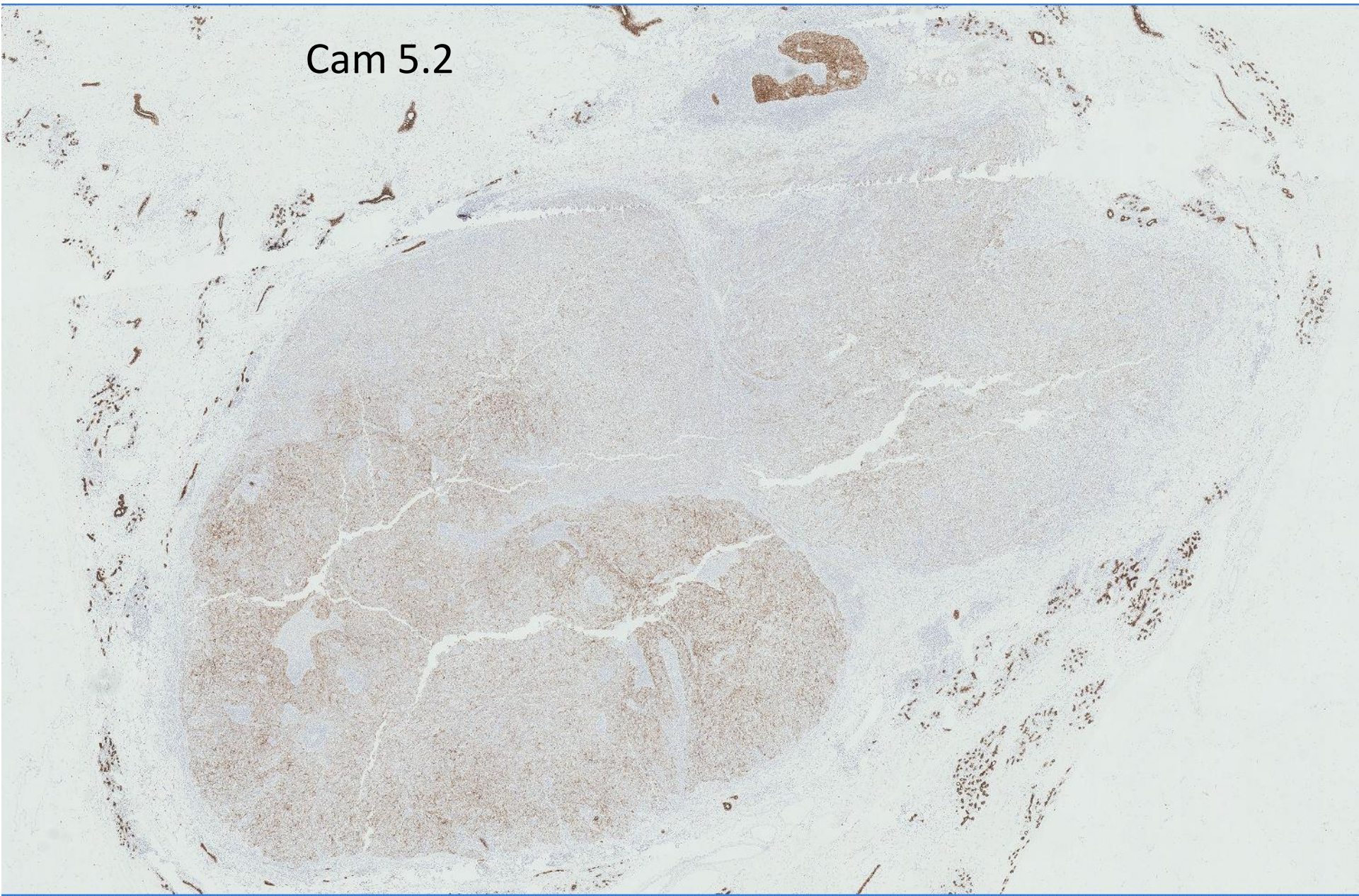
50 μm

Marina Barrage

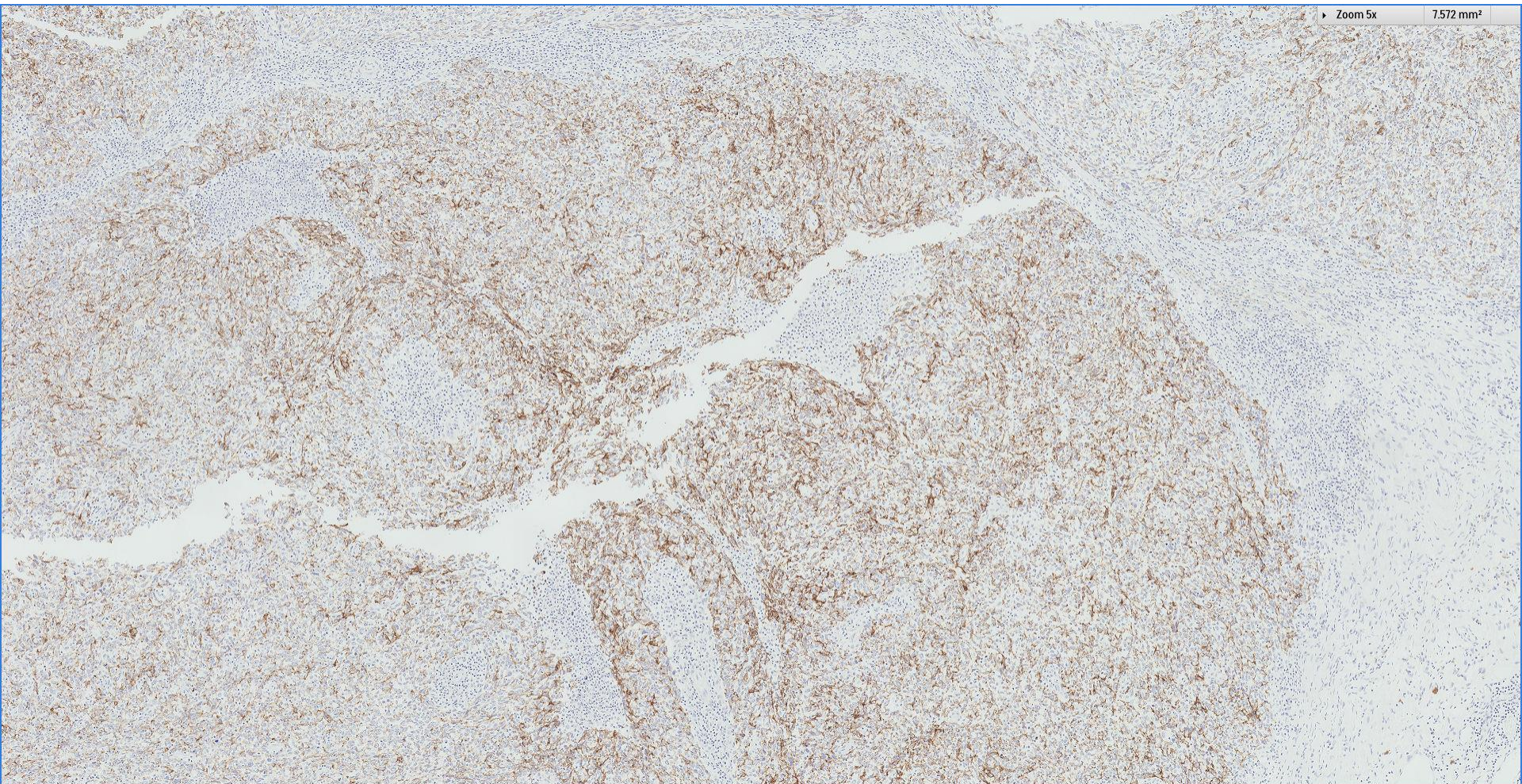




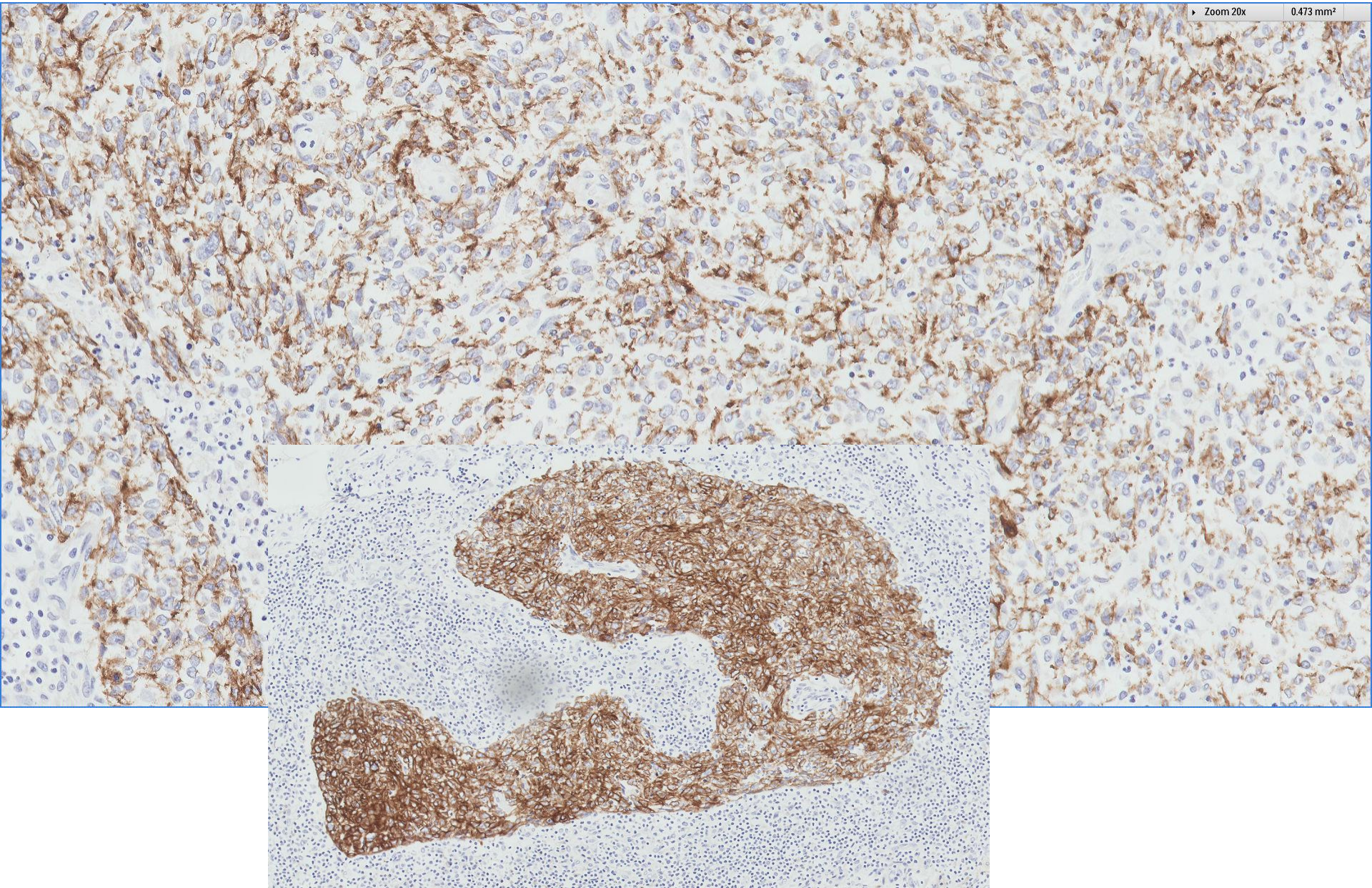
Cam 5.2



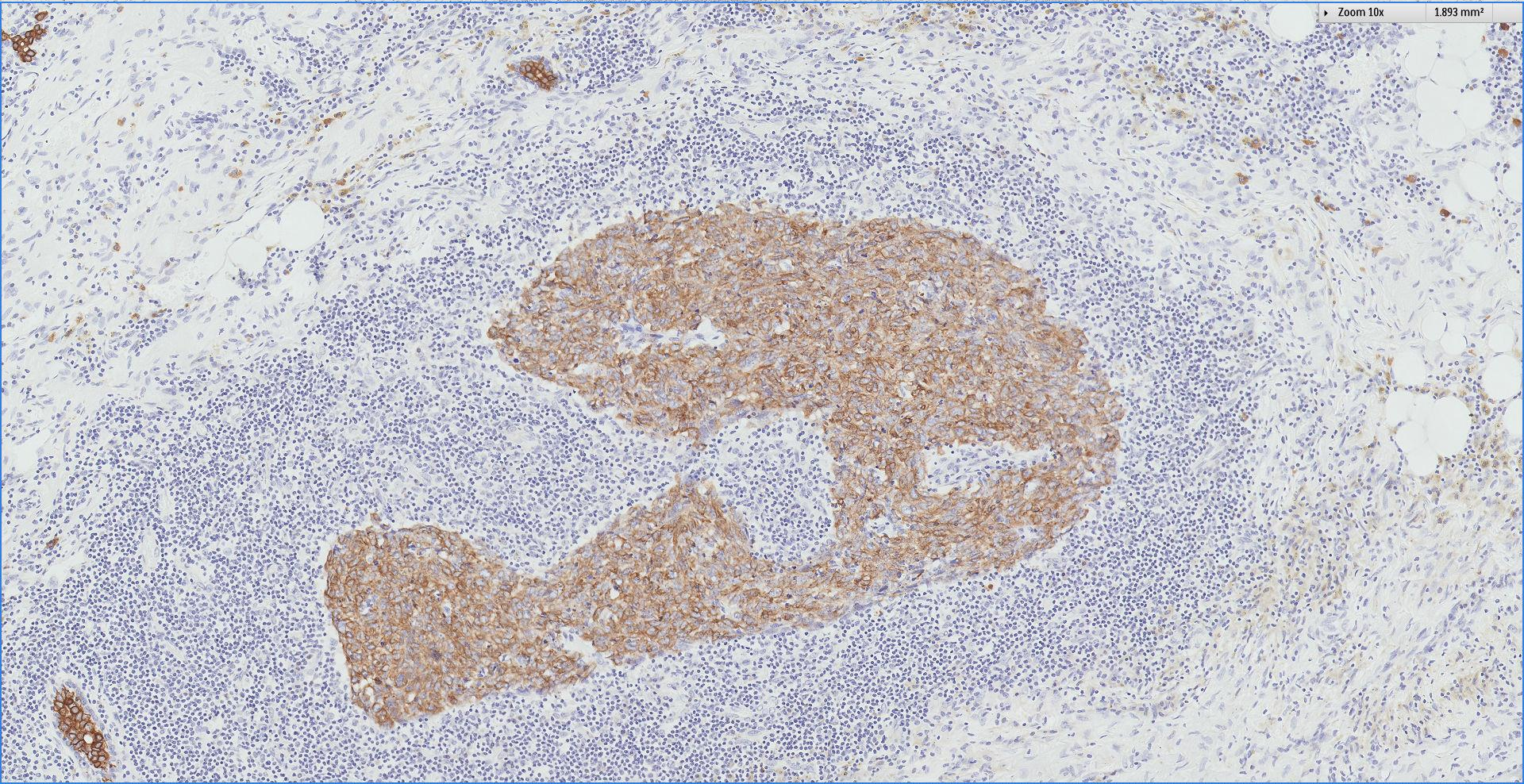
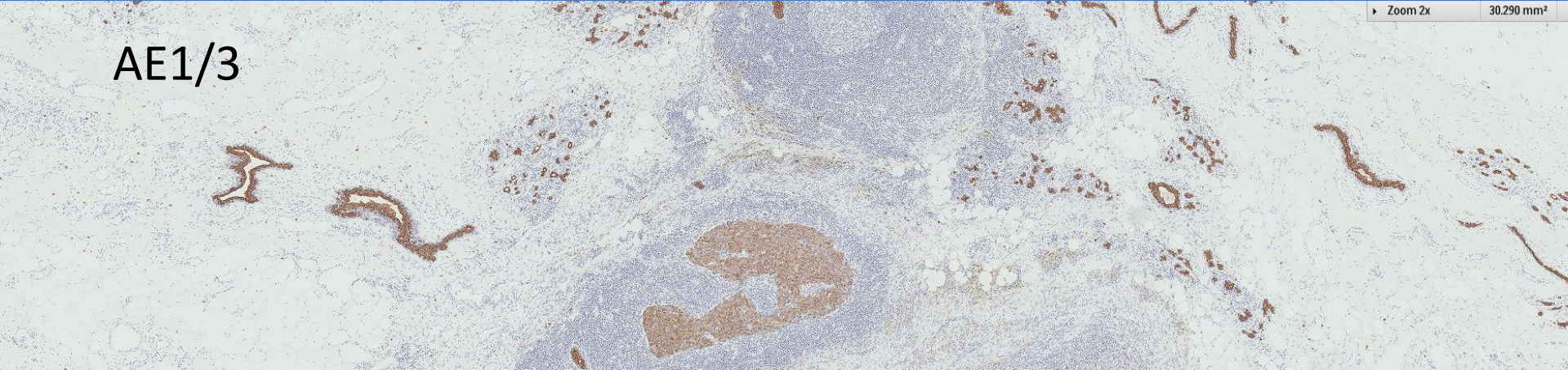
Cam 5.2



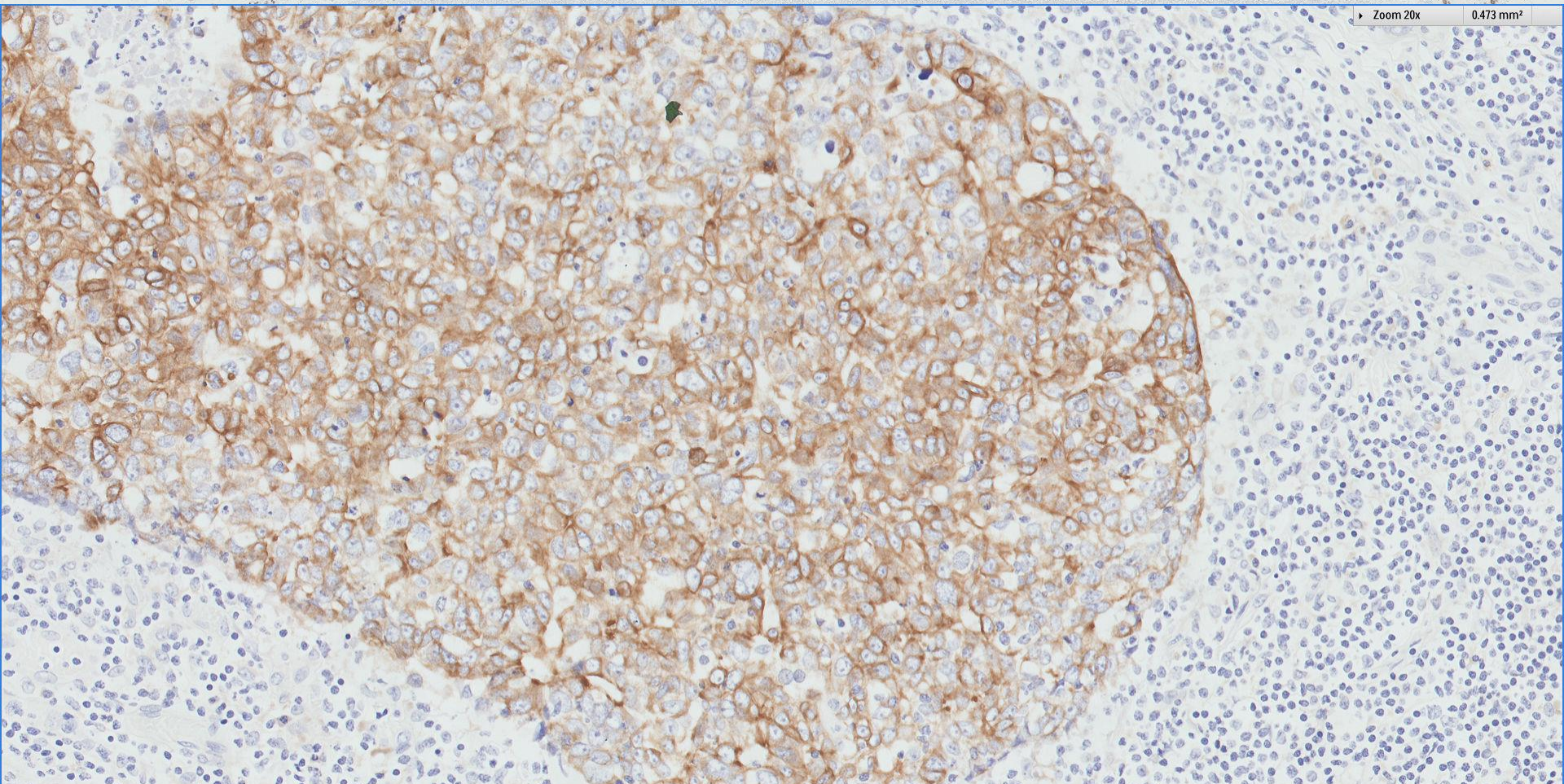
Cam 5.2



AE1/3



MNF116



Diagnosis

Right breast, mastectomy and sentinel lymph nodes ~

Metaplastic carcinoma, 14mm, grade 3.

ER negative, PR negative, cerbB2 negative.

Benign sentinel lymph nodes.



Singapore
General Hospital

SingHealth

Division of Pathology

since
1821
195th Anniversary


SingHealth **DukeNUS**
ACADEMIC MEDICAL CENTRE
PATHOLOGY

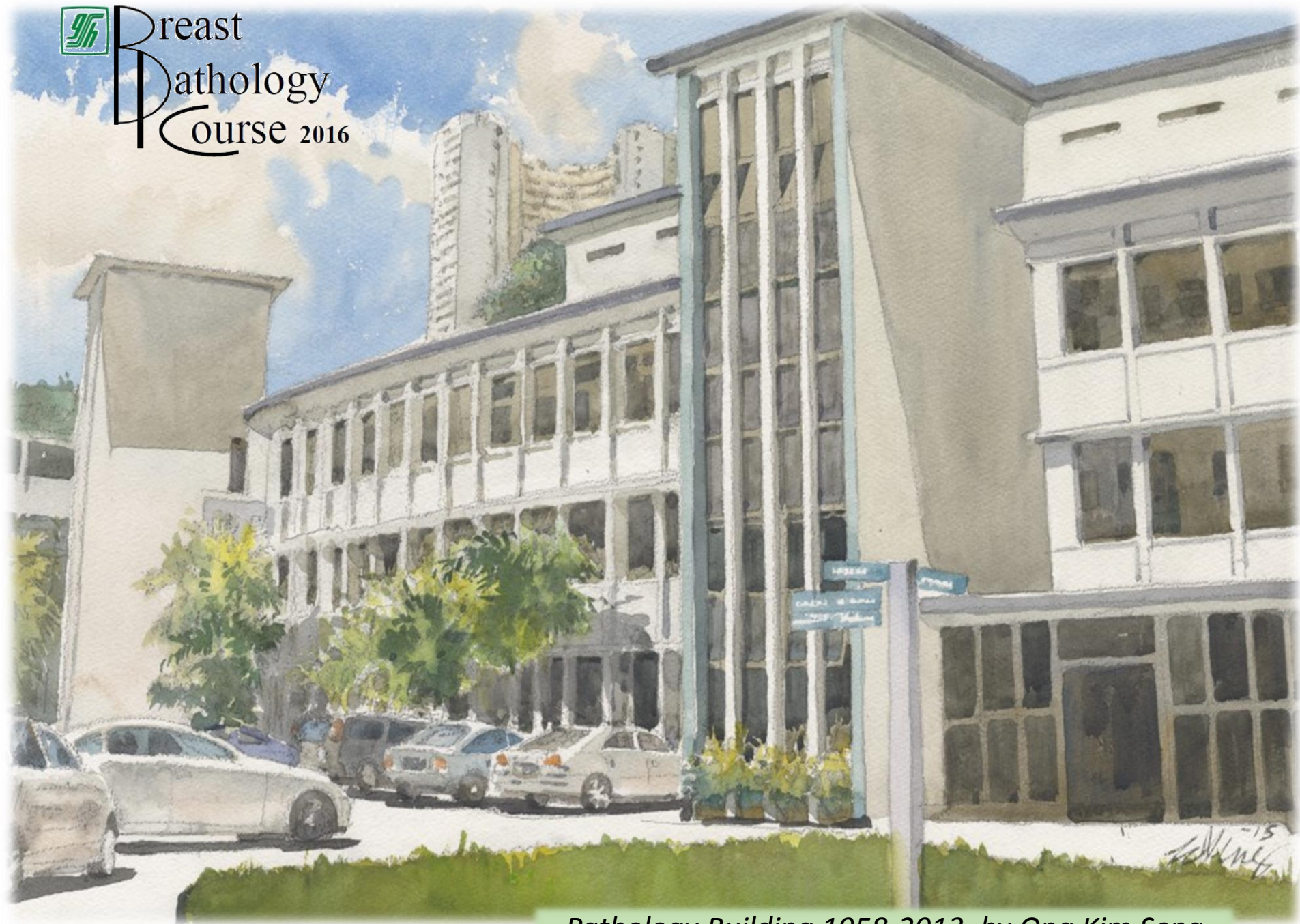


Table 11.1 Comparison of clinicopathological features of key spindle cell lesions of the breast

	Nodular fasciitis	Fibrous scar	Fibromatosis	Fibromatosis-like metaplastic carcinoma	Spindle cell metaplastic carcinoma	Phyllodes tumour	Sarcoma
Clinical information	Rapid growth Tissue plane usually subcutis or chest wall rather than breast parenchyma	Prior instrumentation or tissue injury	Rare association with breast implants	Clinicoradiologically similar to breast carcinoma, may be radiologically circumscribed	Symptomatic or radiologically detected breast mass	Usually large lump, may have history of recent rapid growth	Symptomatic or radiologically detected breast mass. May have past diagnosis of sarcoma if metastatic in origin
Histological pattern	“Feathery” tissue culture-like appearance with red cell extravasation and chronic inflammation	Depending on duration between tissue injury and biopsy, changes range from reactive granulation to collagenous fibrosis. Haemosiderin deposits may be present	Intersecting fascicles of spindle cells with wavy nuclei, minimal atypia, and scant mitoses	Intersecting fascicles of spindle cells with modest nuclear atypia and low mitotic activity Squamous and epithelioid foci may be present May be associated with papilloma, complex sclerosing lesion	Spindle cells with nuclear pleomorphism and mitoses. Squamous foci, DCIS may be present	Spindle cells with variable nuclear atypia The presence of stromal fronds with accompanying stromal hypercellularity is characteristic	Spindle cell morphology with wide-ranging appearances depending on the lineage
Keratins	Negative	Negative	Negative	Positive	Positive (a wide antibody panel may be needed)	Negative, but may sometimes show focal positivity	Mostly negative but can be focally positive
Beta-catenin	Negative	Negative	Positive	May be positive	May be positive	Negative, but aberrant expression is reported	May be positive in fibrosarcoma
CD34	Negative	Negative	Negative	Negative	Negative	Often positive, inverse correlation with grade	Negative

DCIS ductal carcinoma in situ

 Breast
Pathology
Course 2016



Pathology Building 1958-2013, by Ong Kim Seng