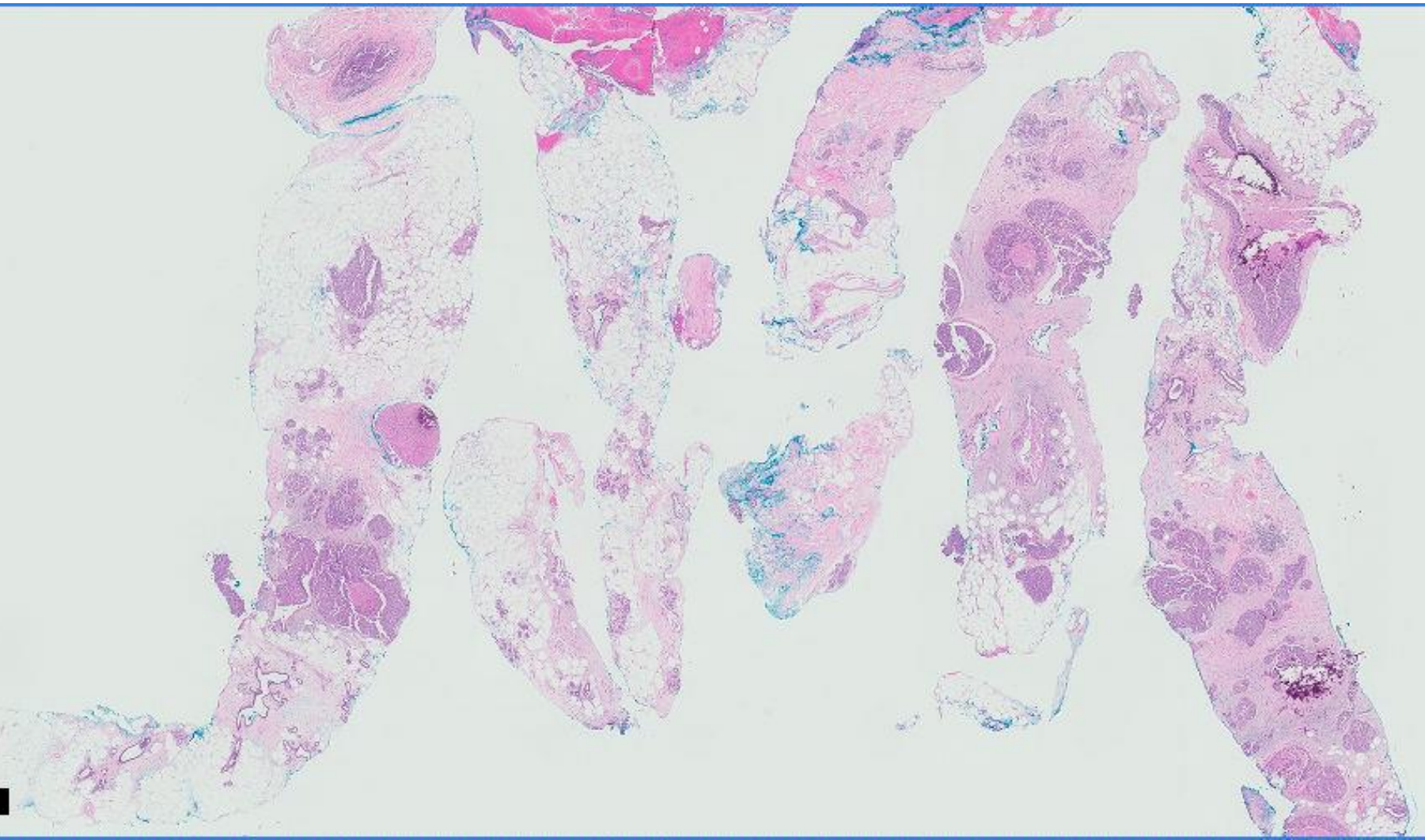
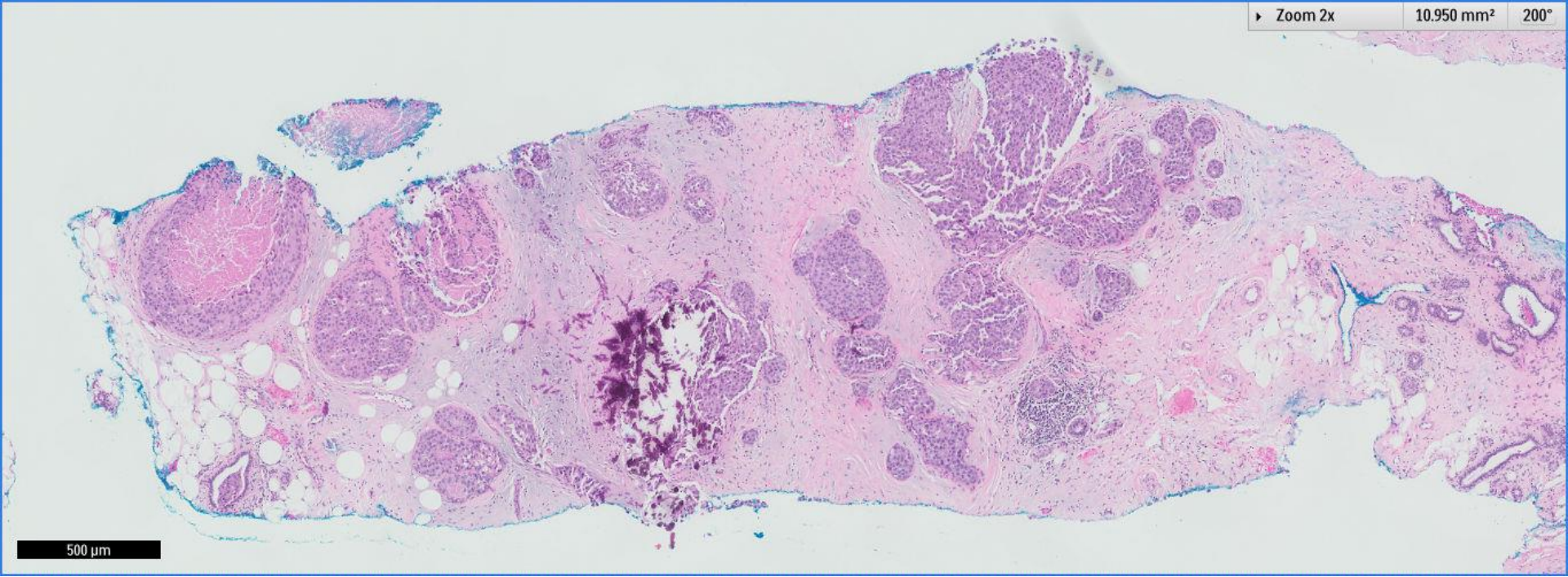
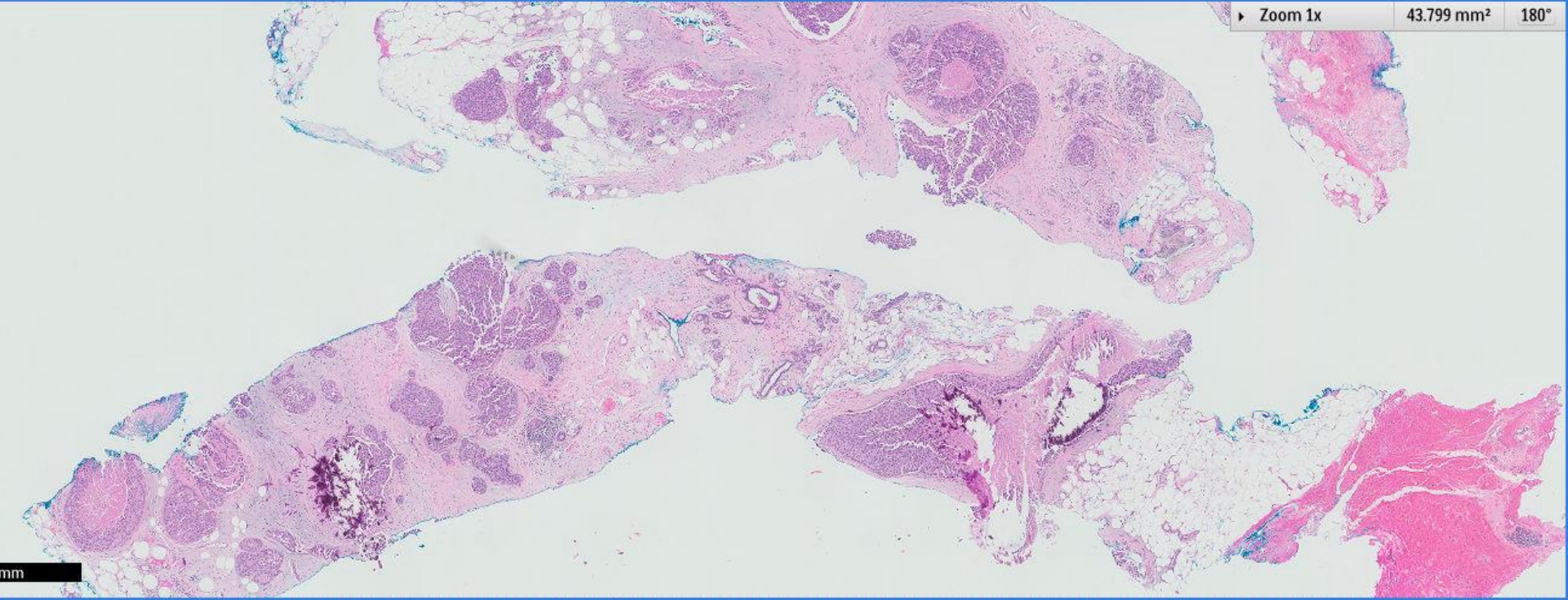


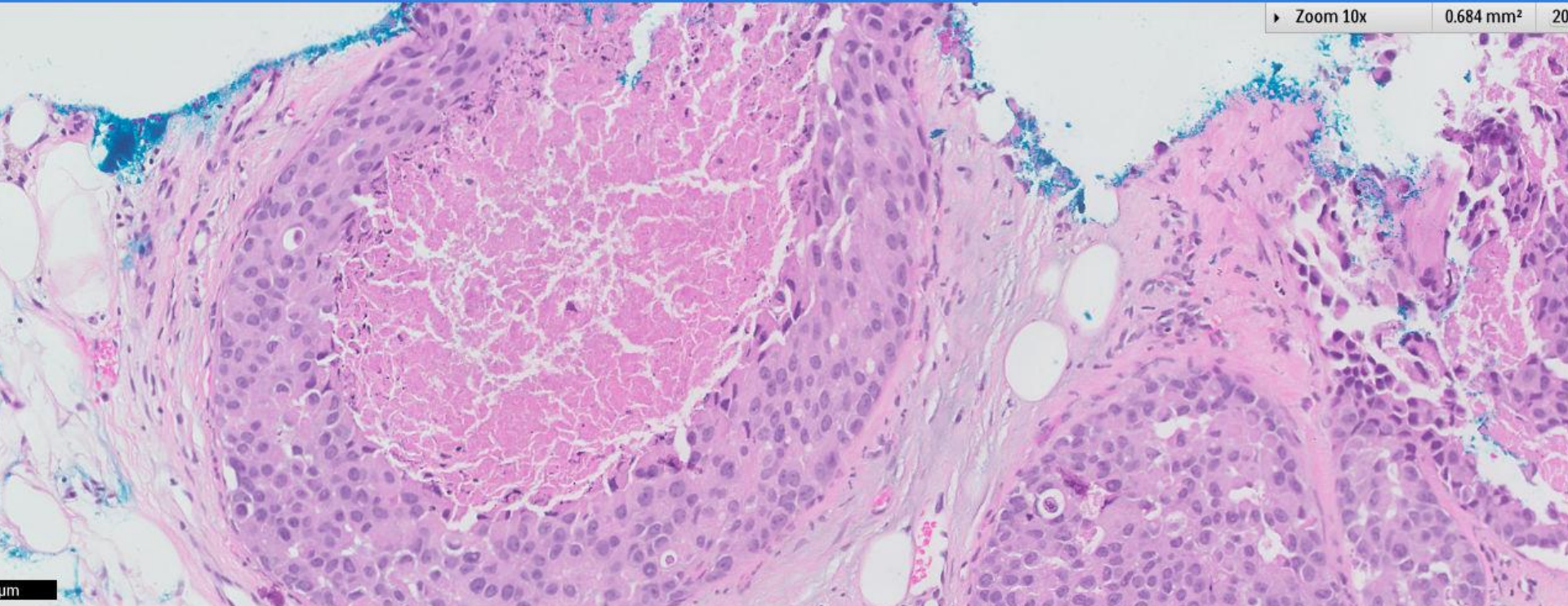
Case 30

60 year old Indian woman was found to have an echogenic mass with calcifications in the right breast on screening mammography.

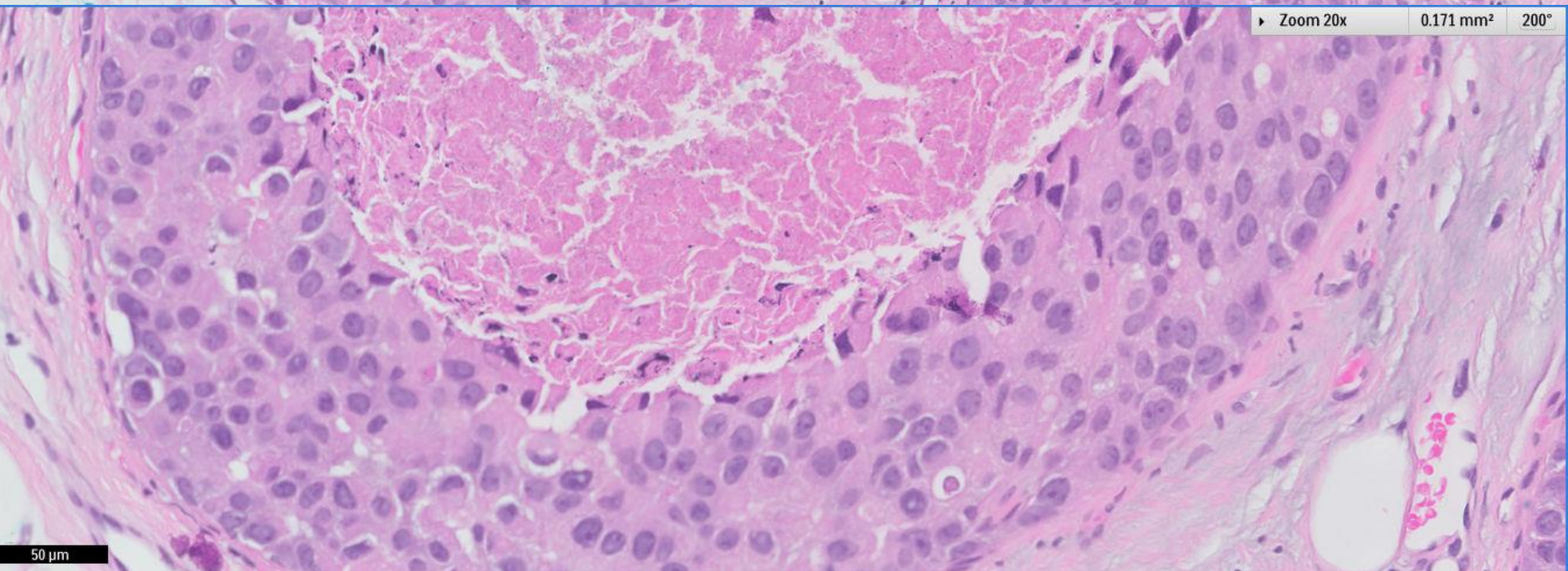
Ultrasound guided trucut biopsy performed.



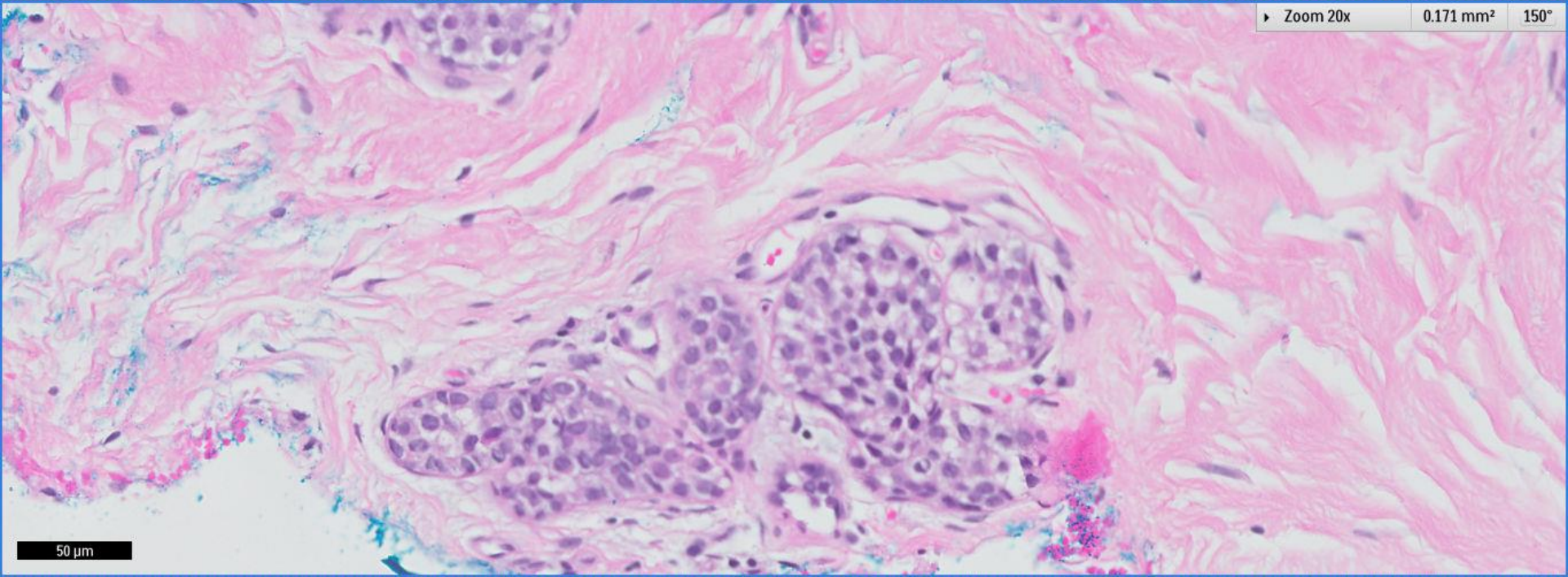
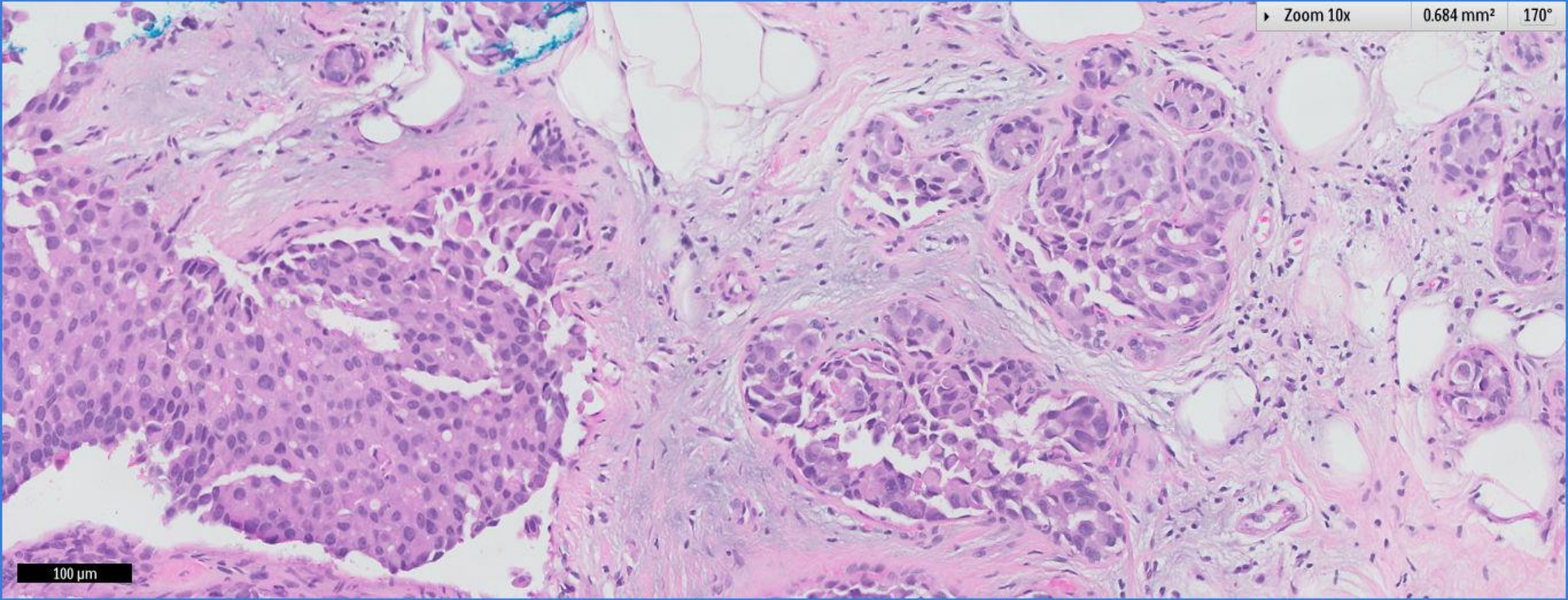


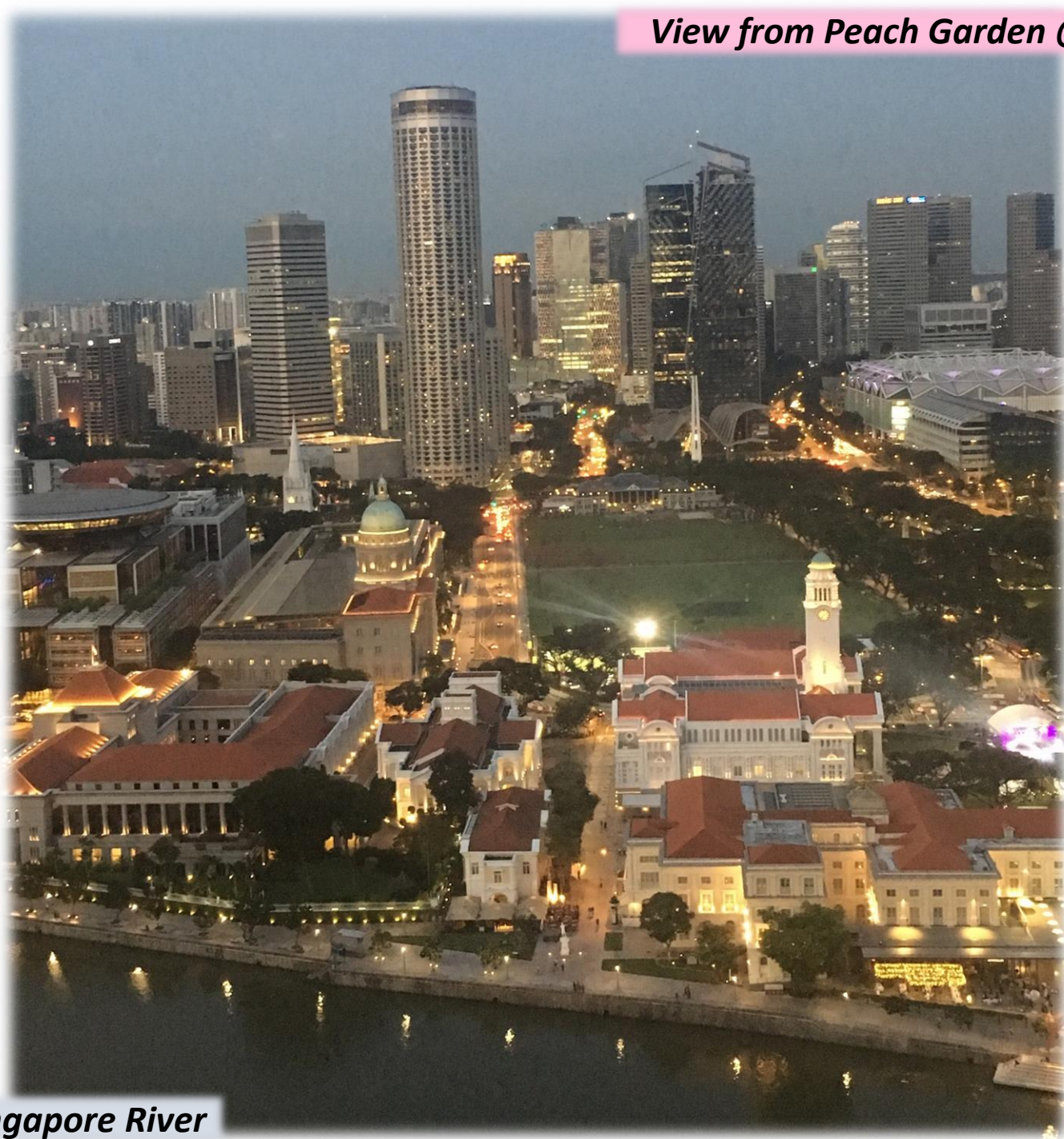


um



50 μm





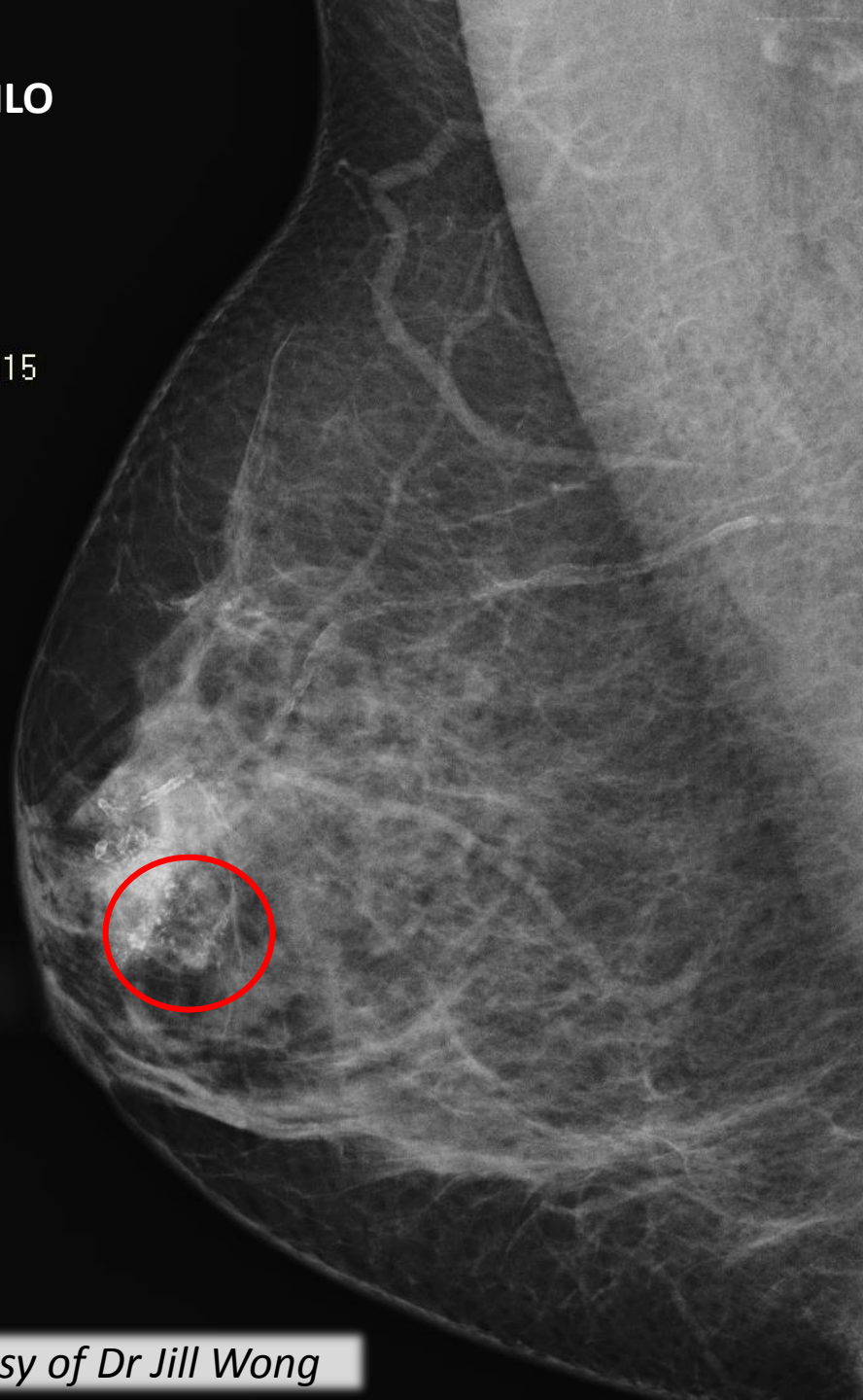
MLO

2012



MLO

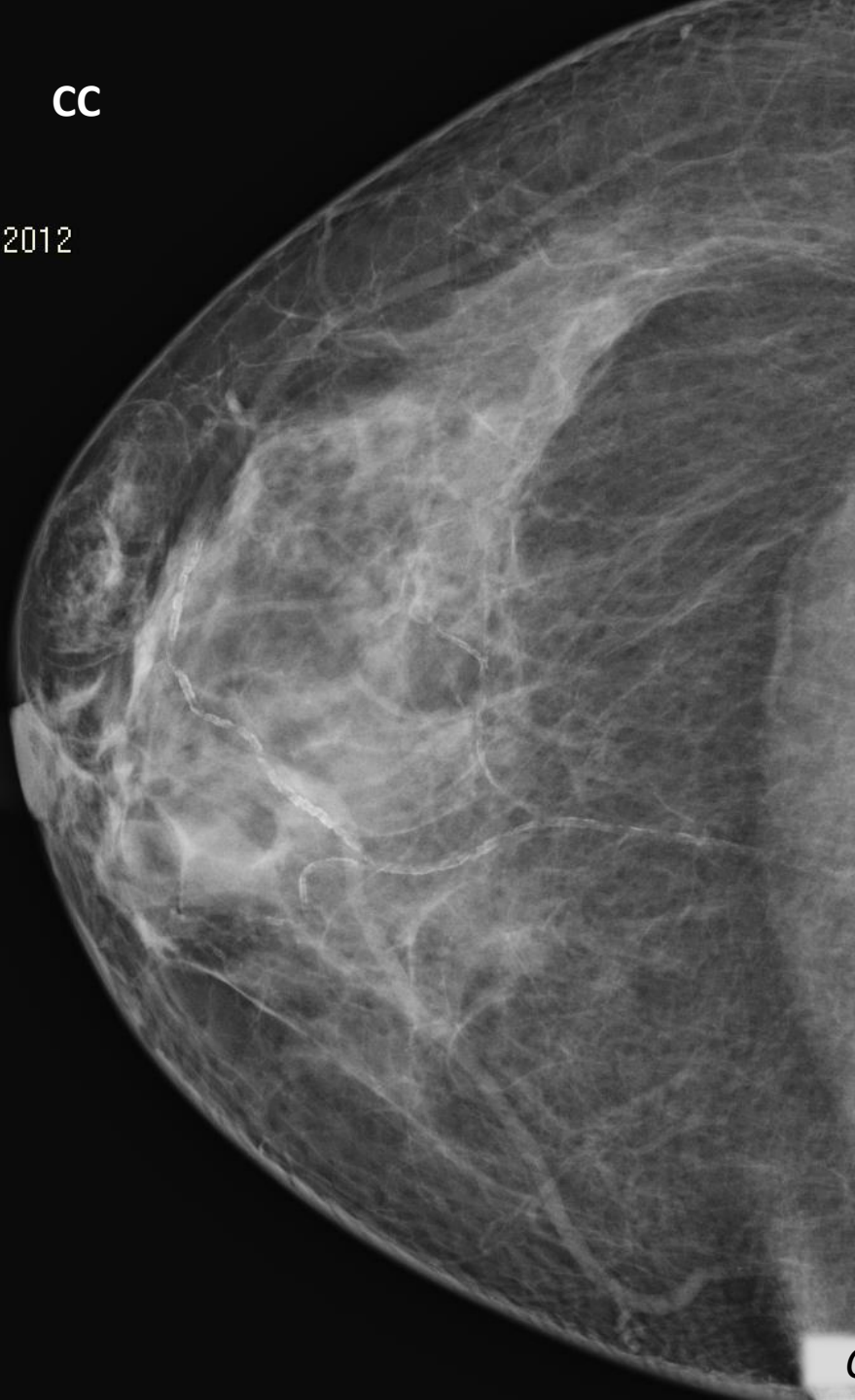
2015



Courtesy of Dr Jill Wong

CC

2012



CC

2015



Courtesy of Dr Jill Wong



MAG X1.8

Courtesy of Dr Jill Wong

FR 45Hz
RS

F/60

M2

2D
56%
C 64
P Med
Gen

P

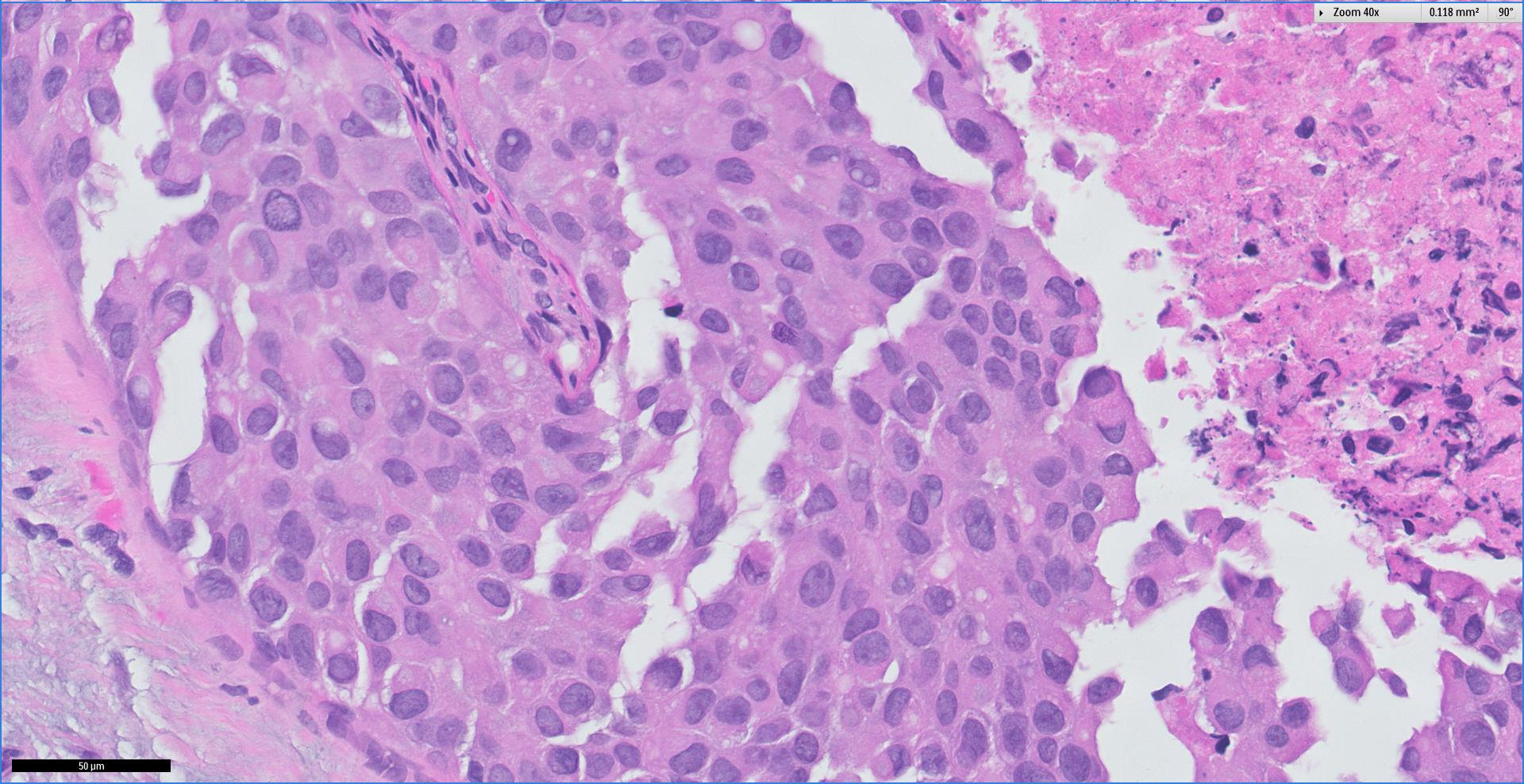
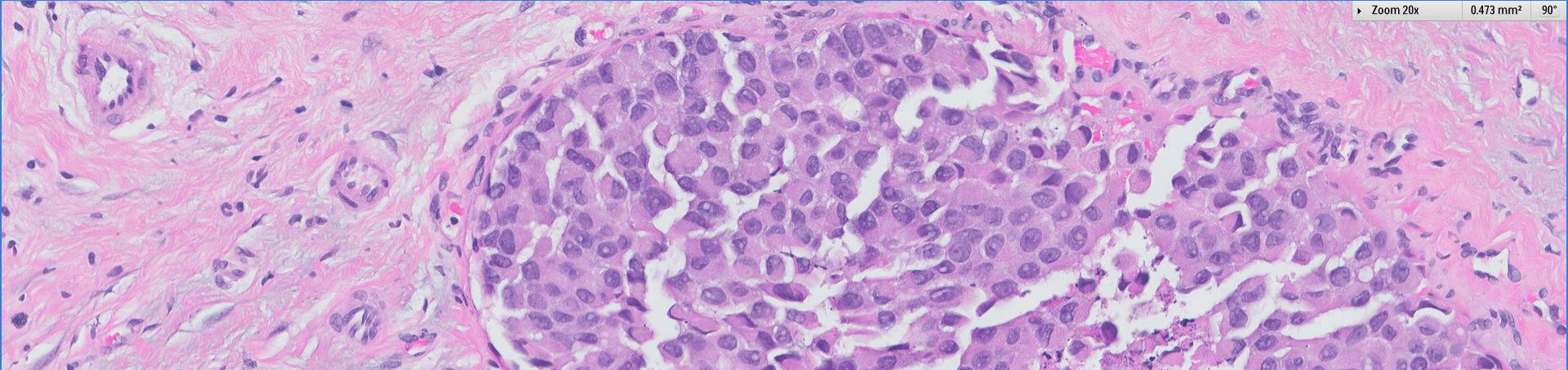


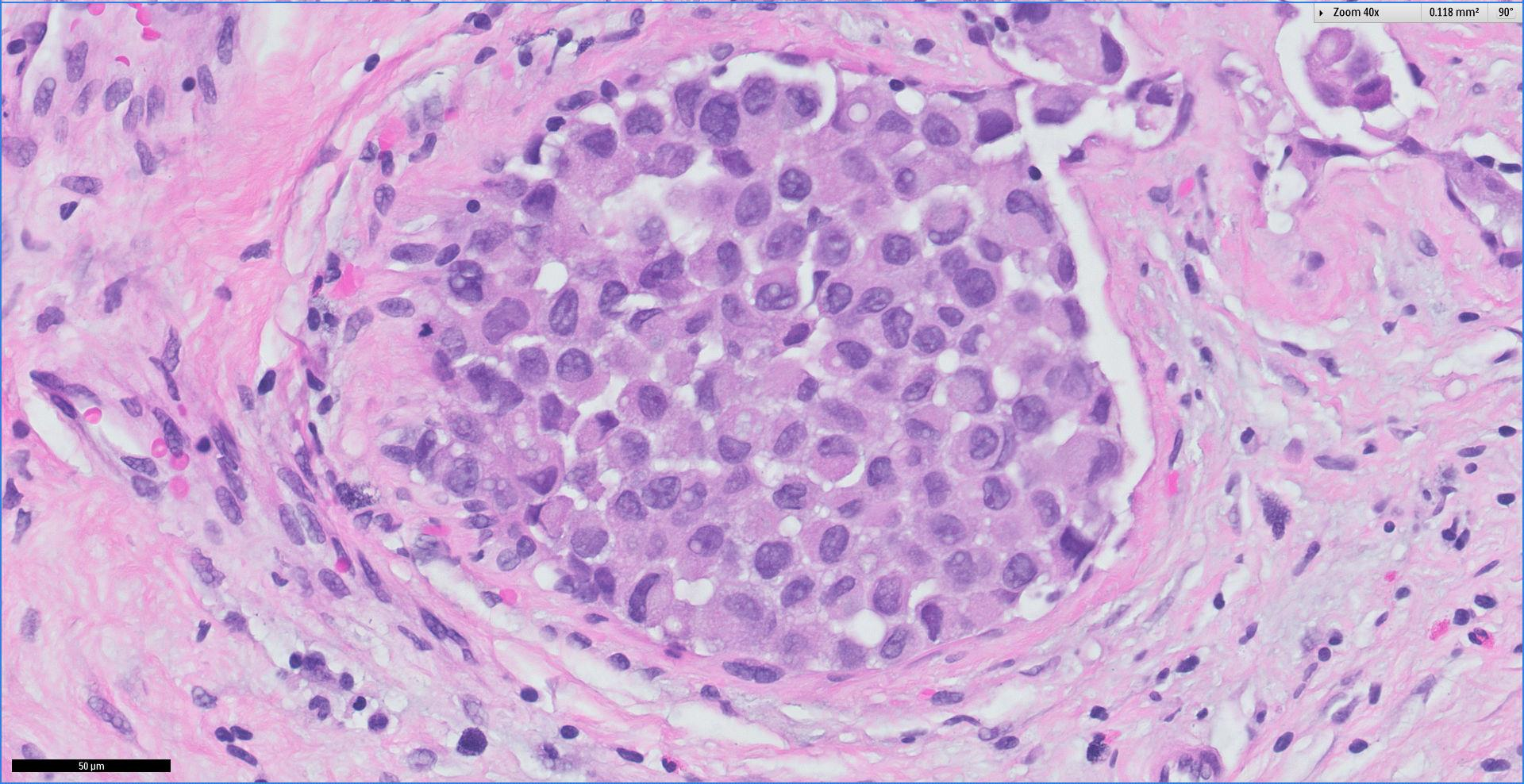
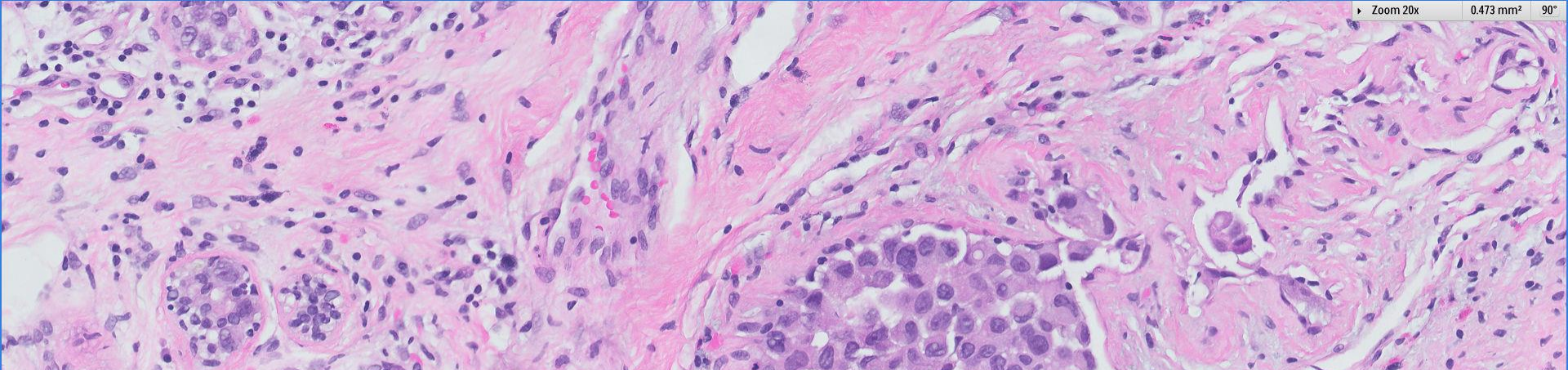
3.5

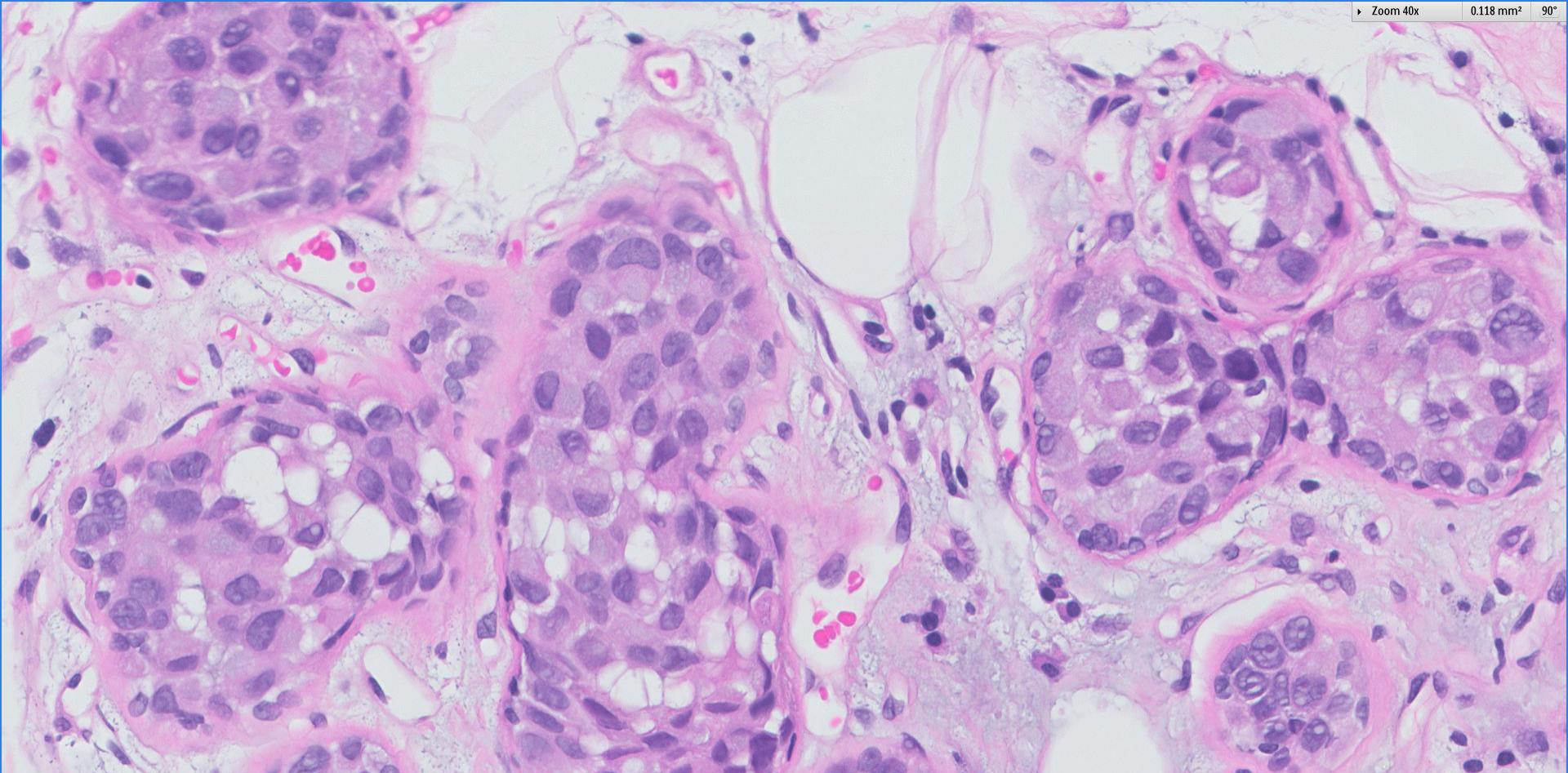
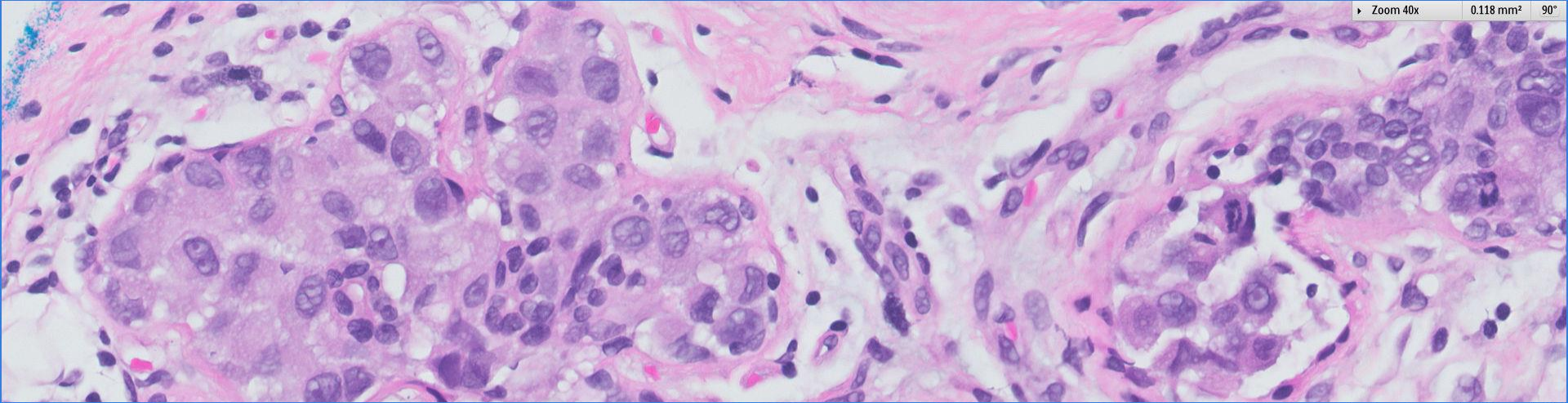
9:00 1CM FRN
PALP LUMP
Right



Courtesy of Dr Jill Wong



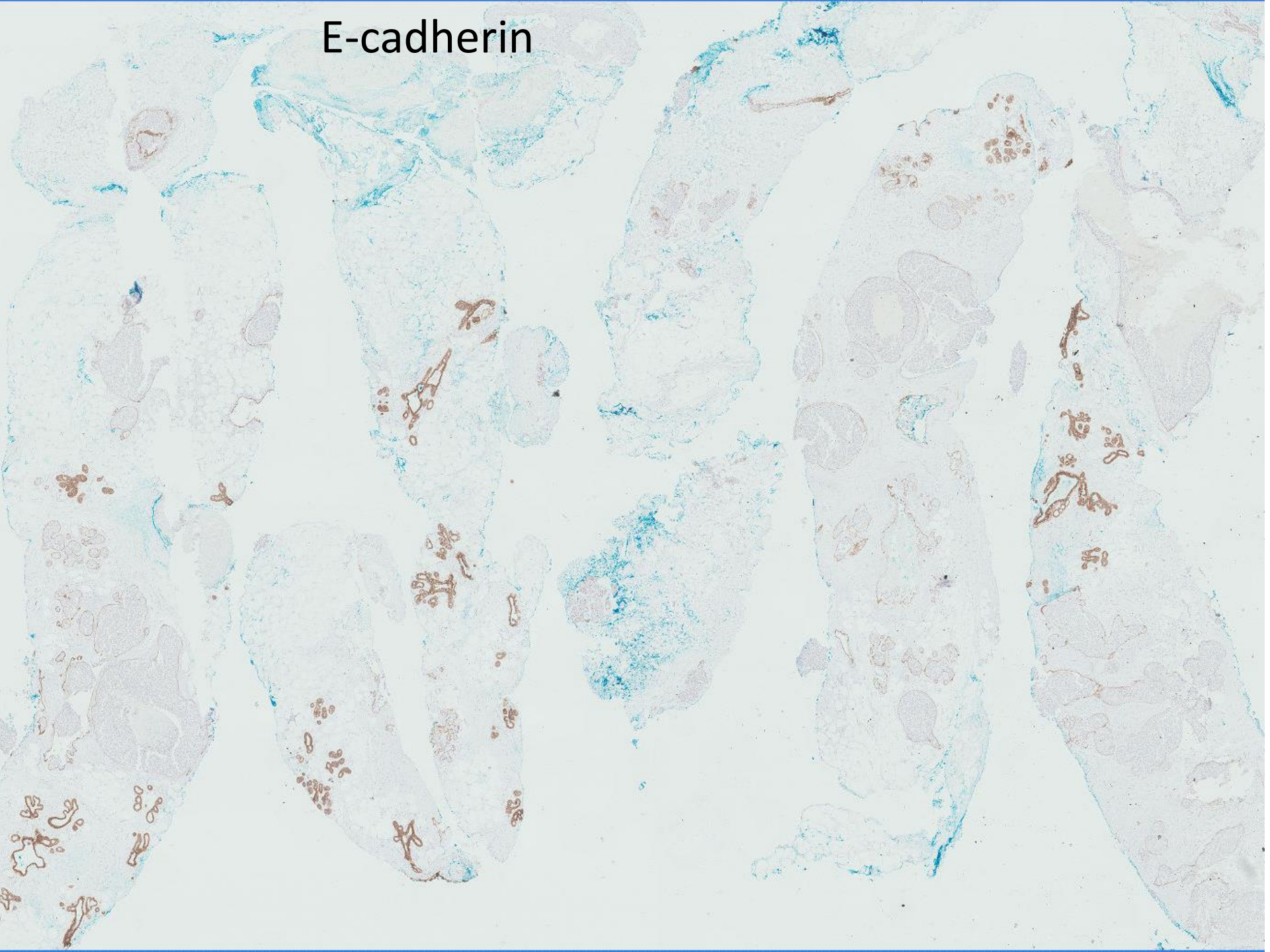




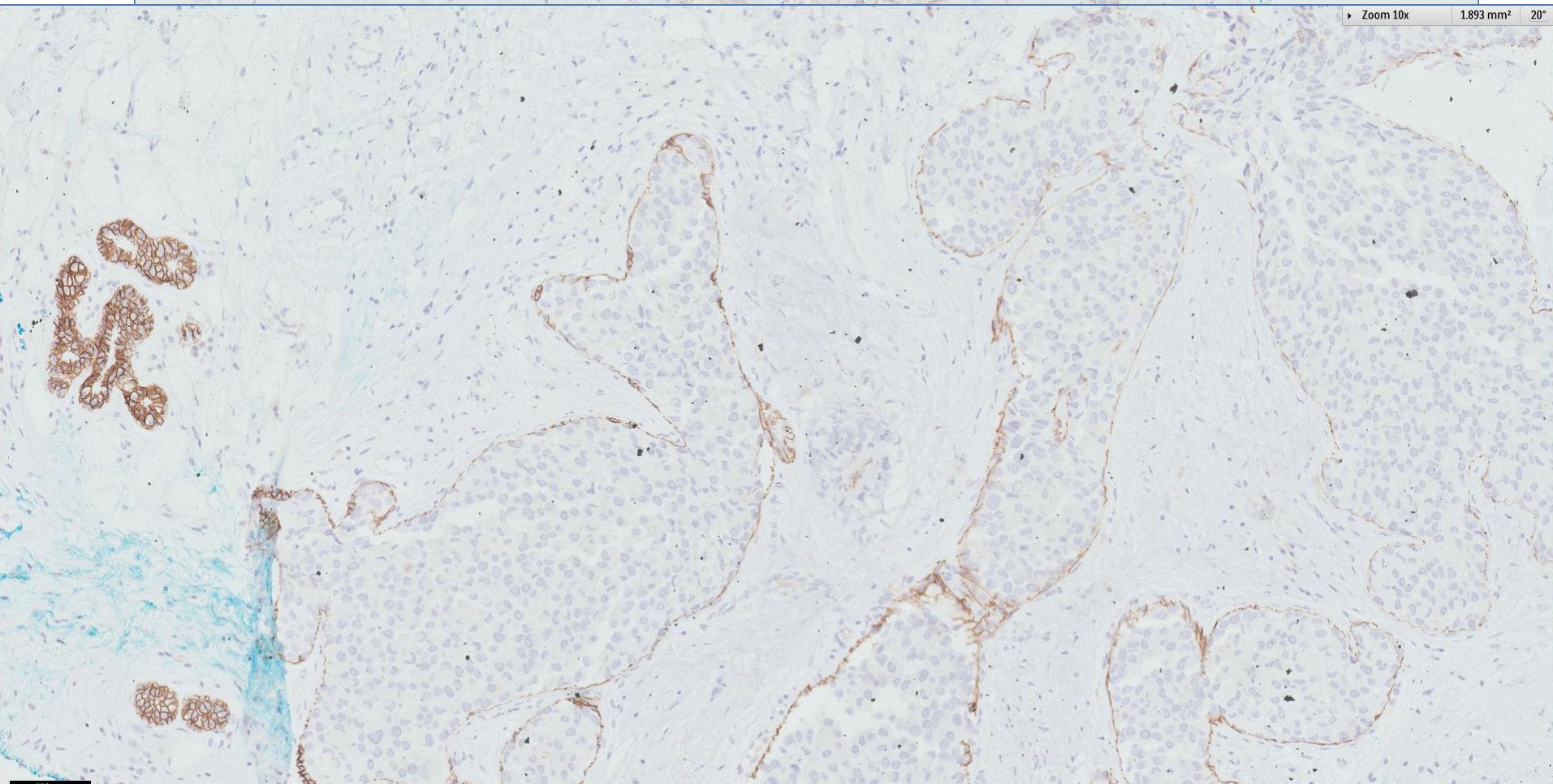
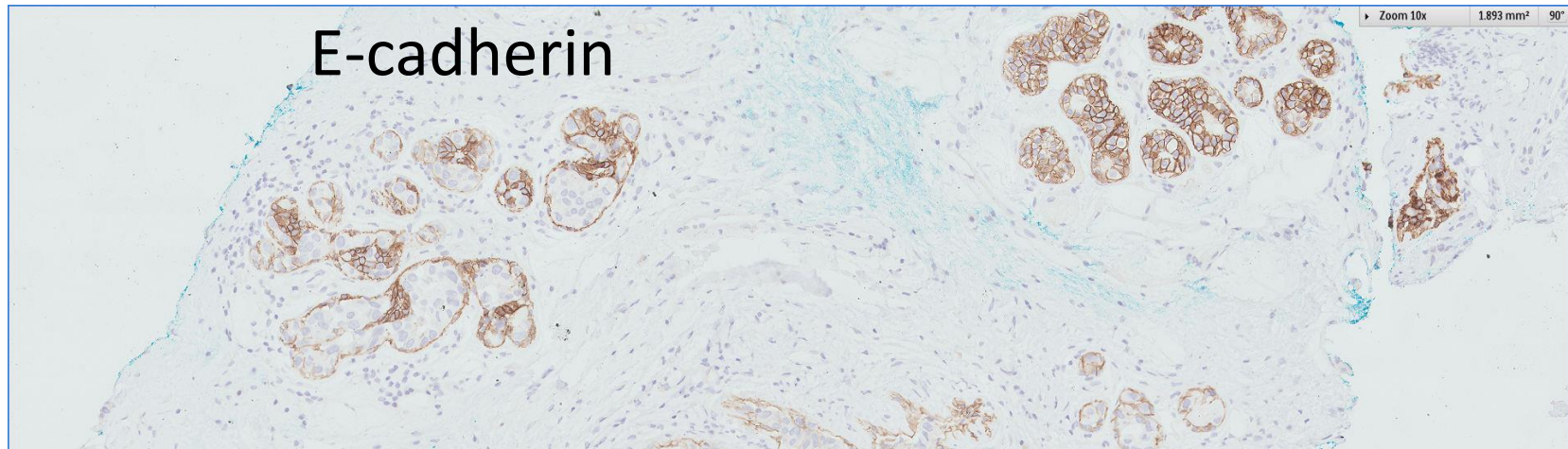
Differential diagnosis

- High nuclear grade DCIS
- Pleomorphic LCIS
- Invasive carcinoma

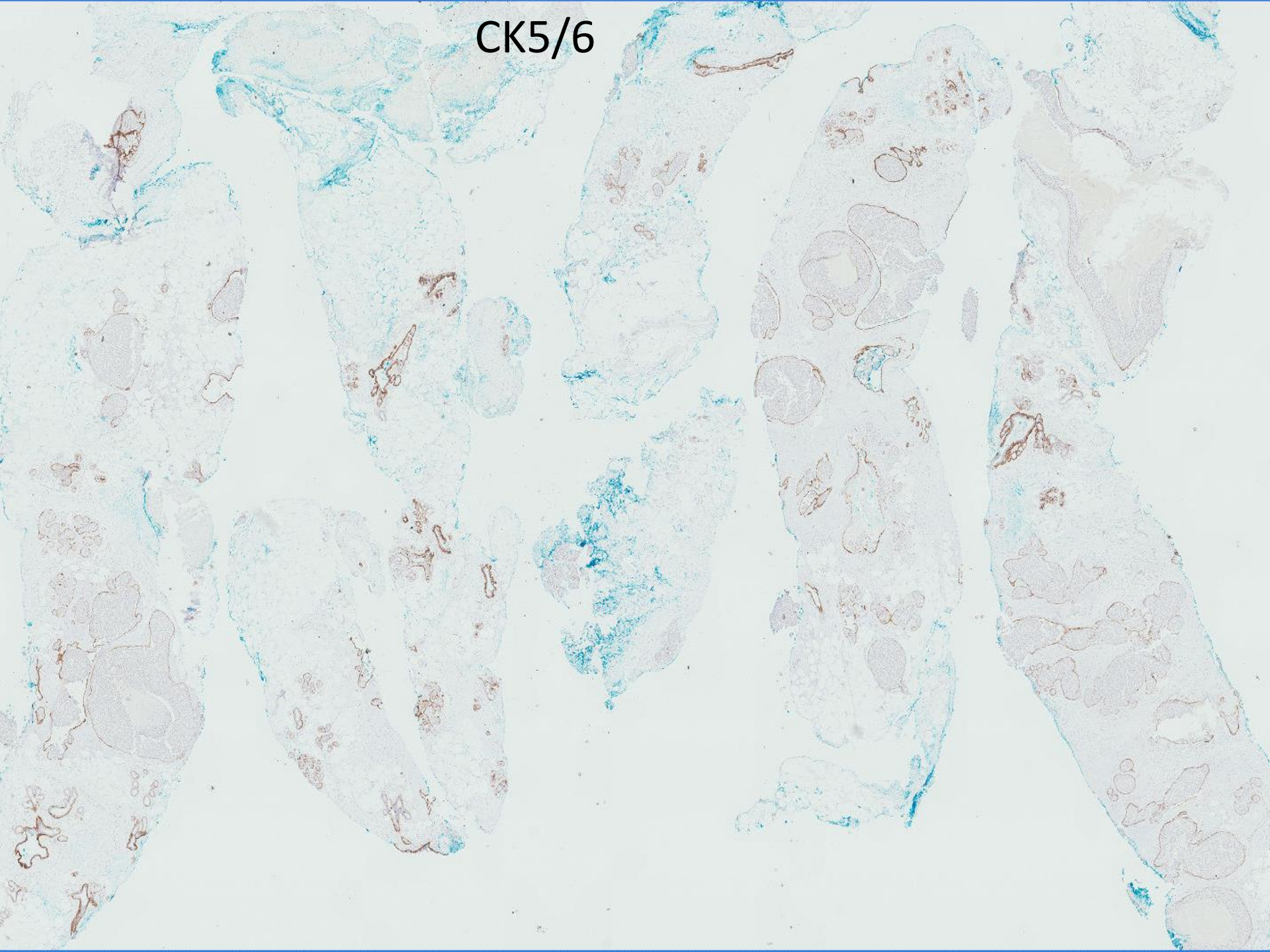
E-cadherin



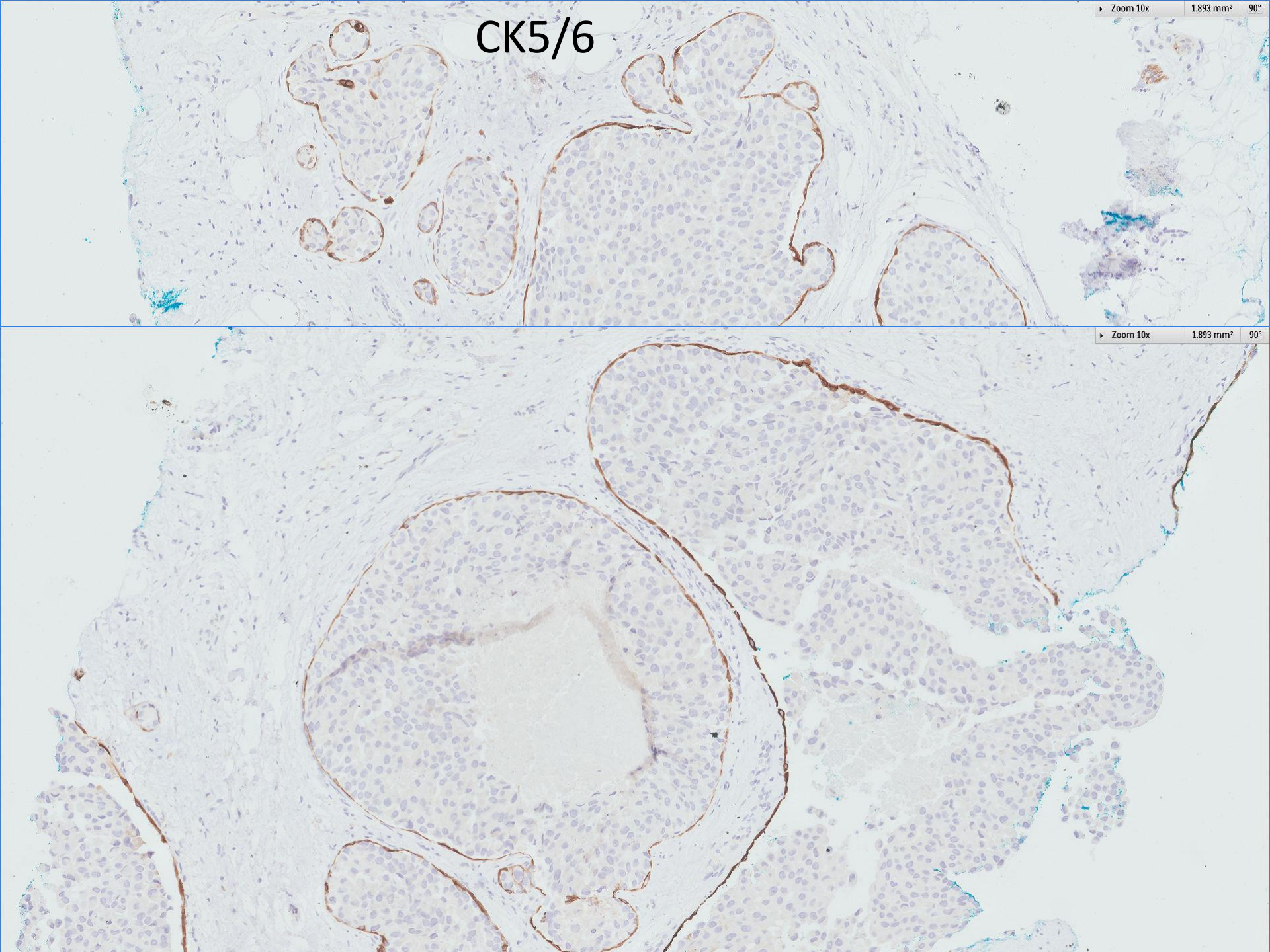
E-cadherin



CK5/6



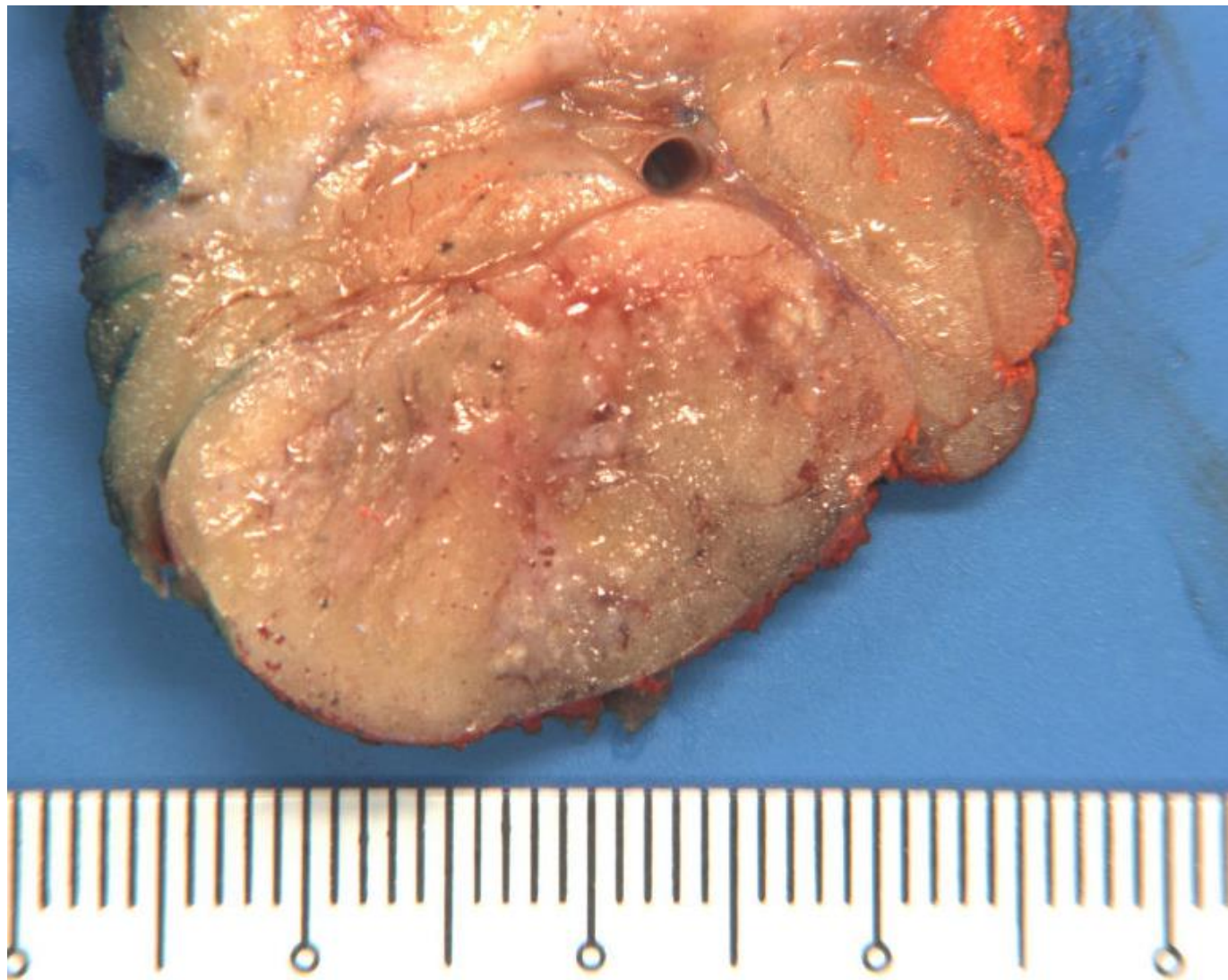
CK5/6



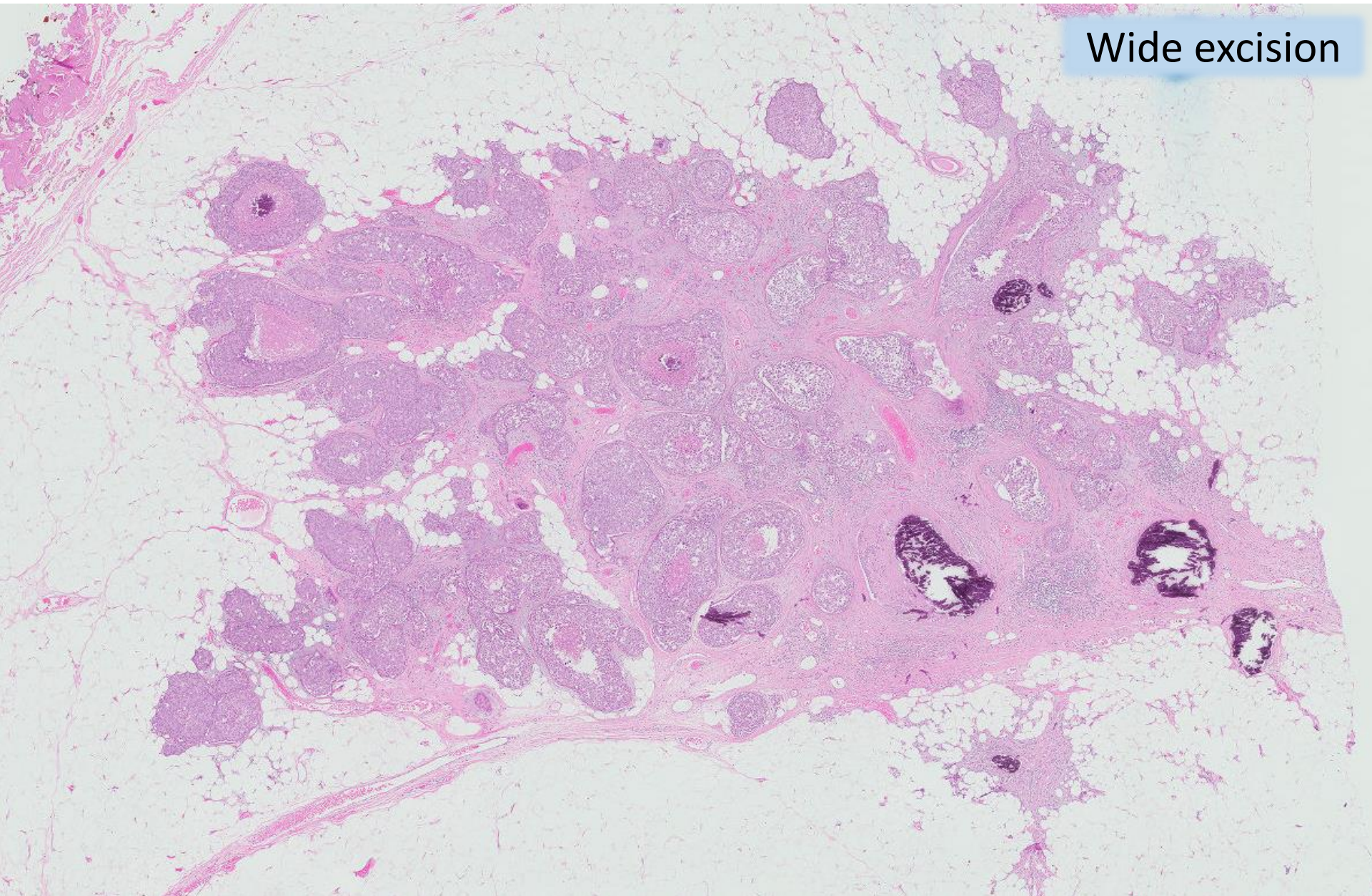
Diagnosis

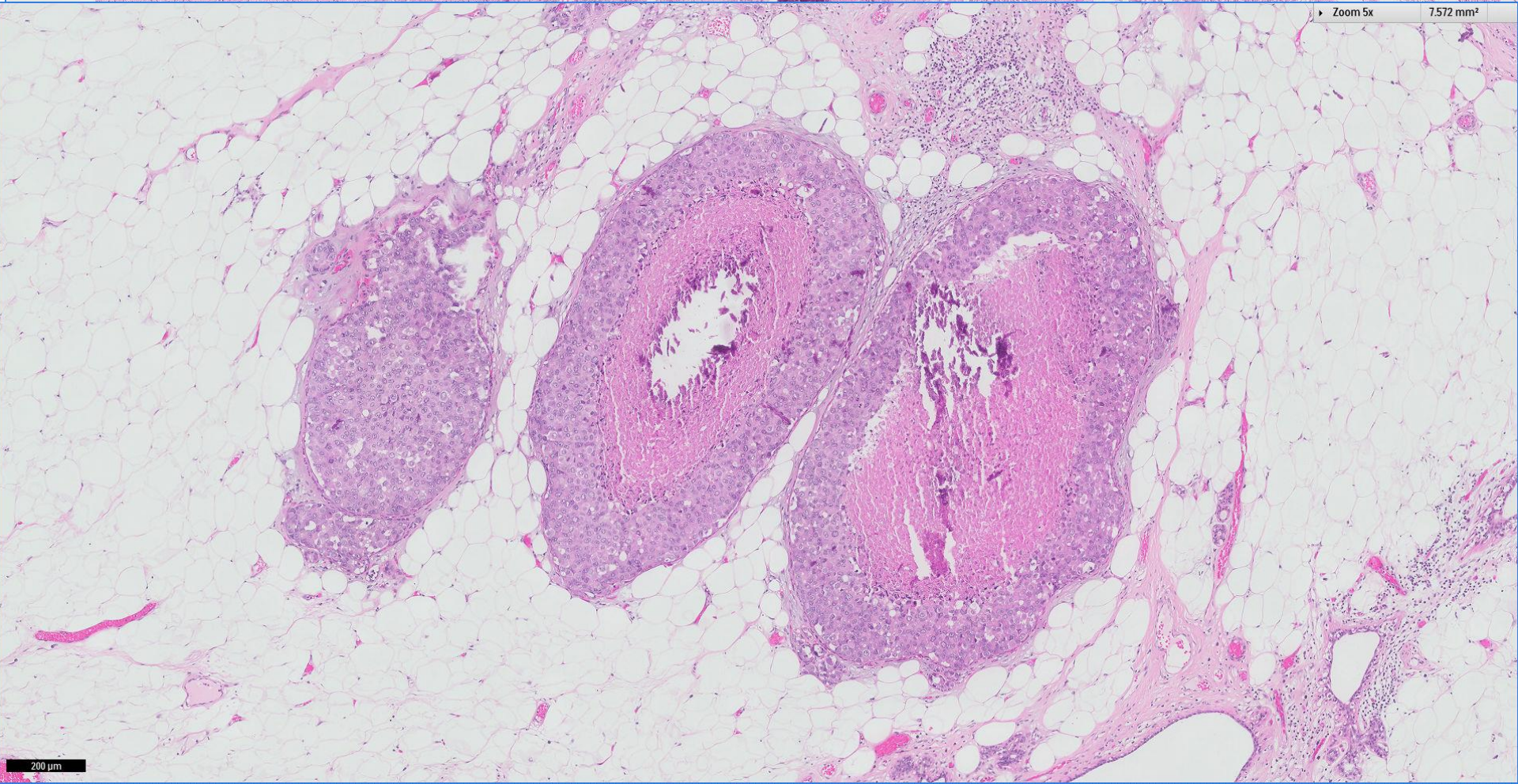
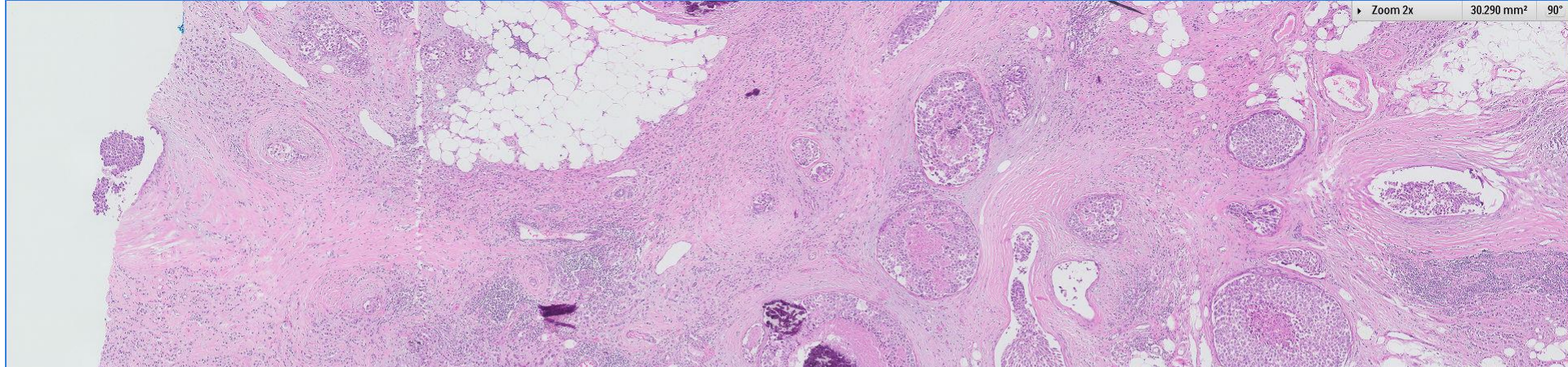
Ultrasound guided trucut biopsy of right breast mass:
**Pleomorphic lobular carcinoma in situ with
necrosis and calcifications**

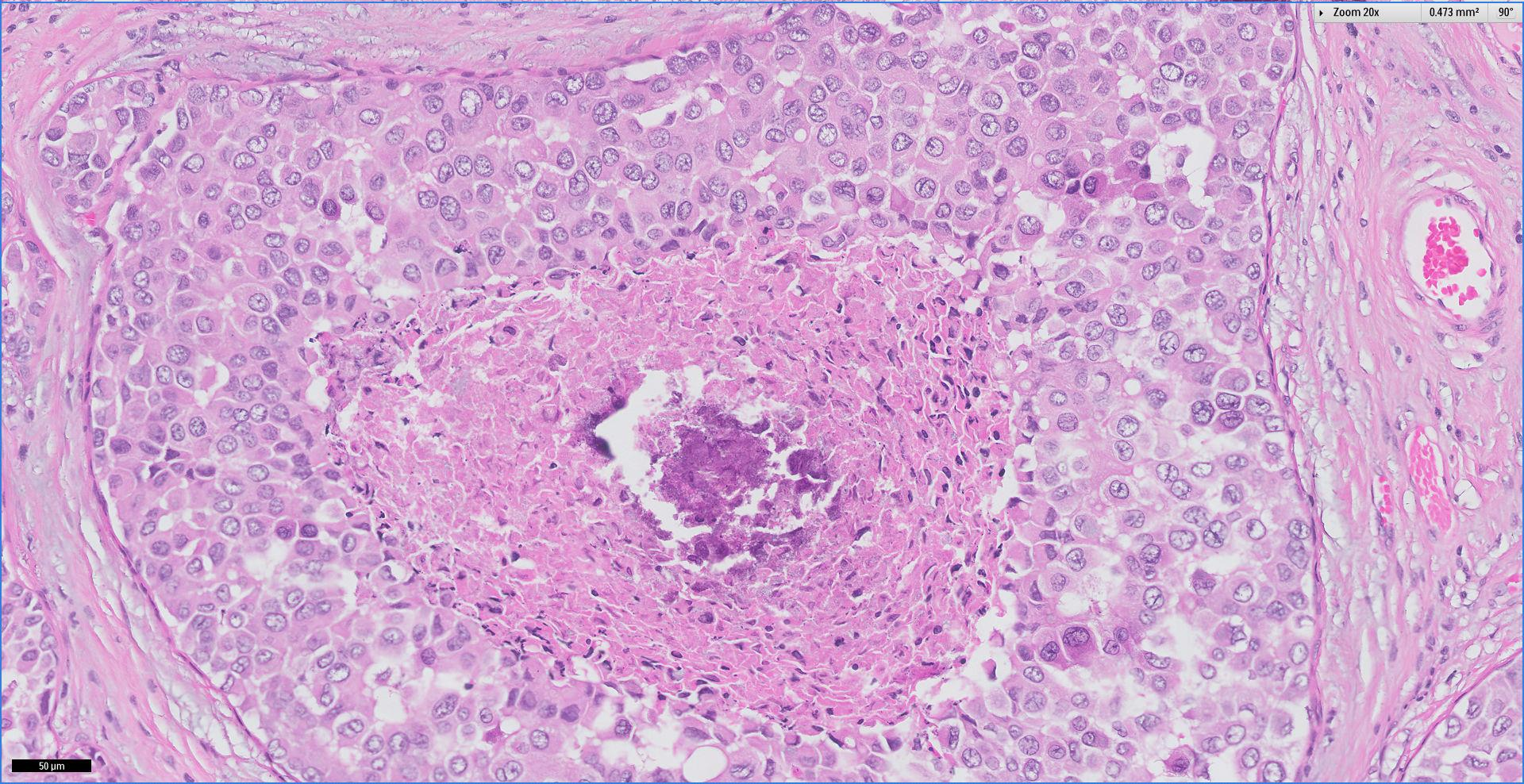
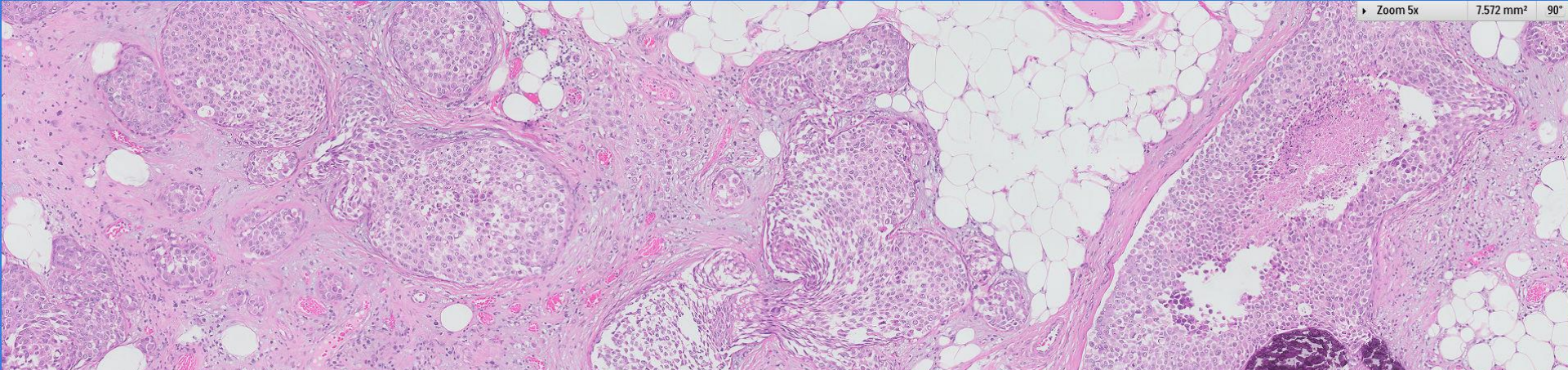
Right breast wide excision

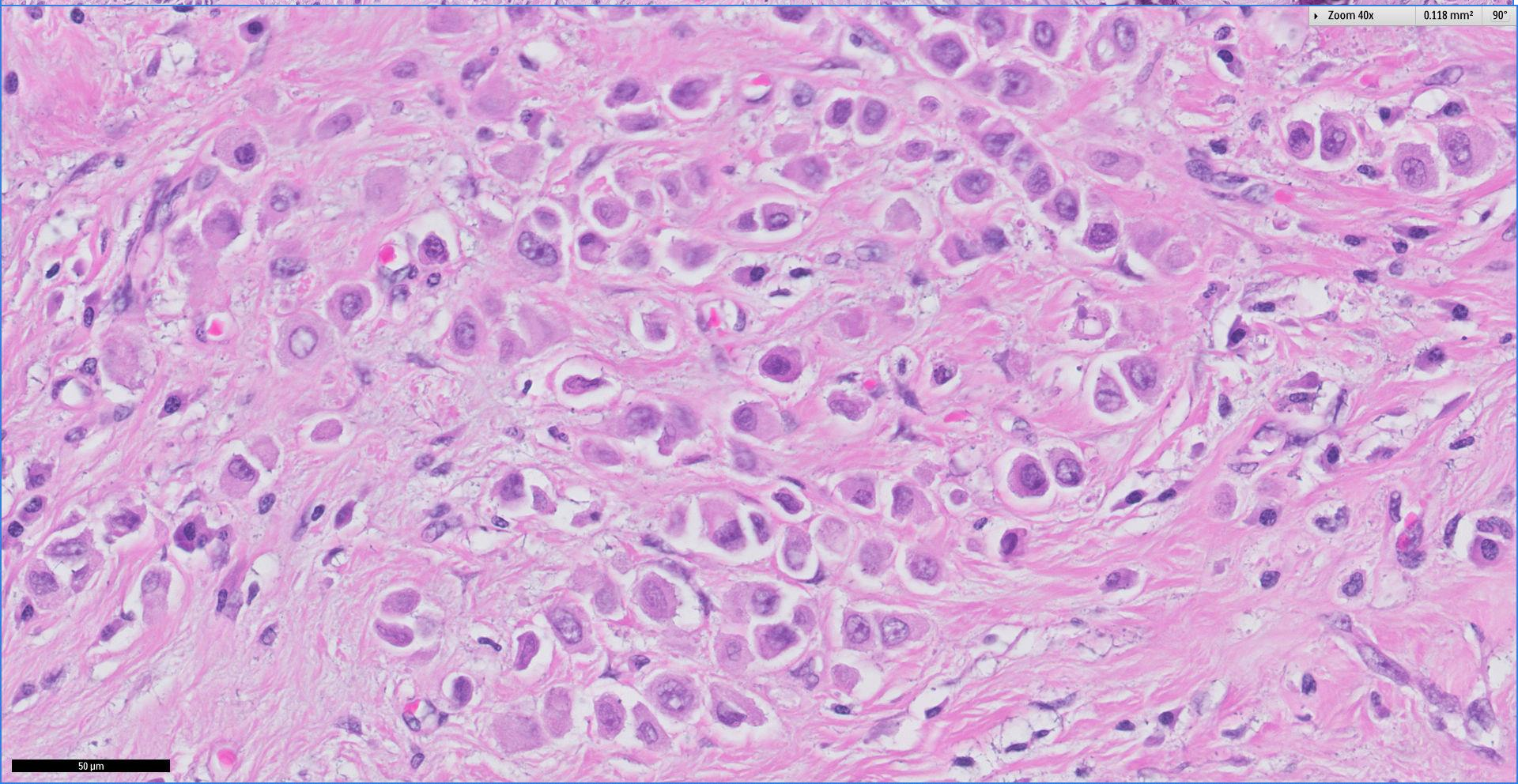
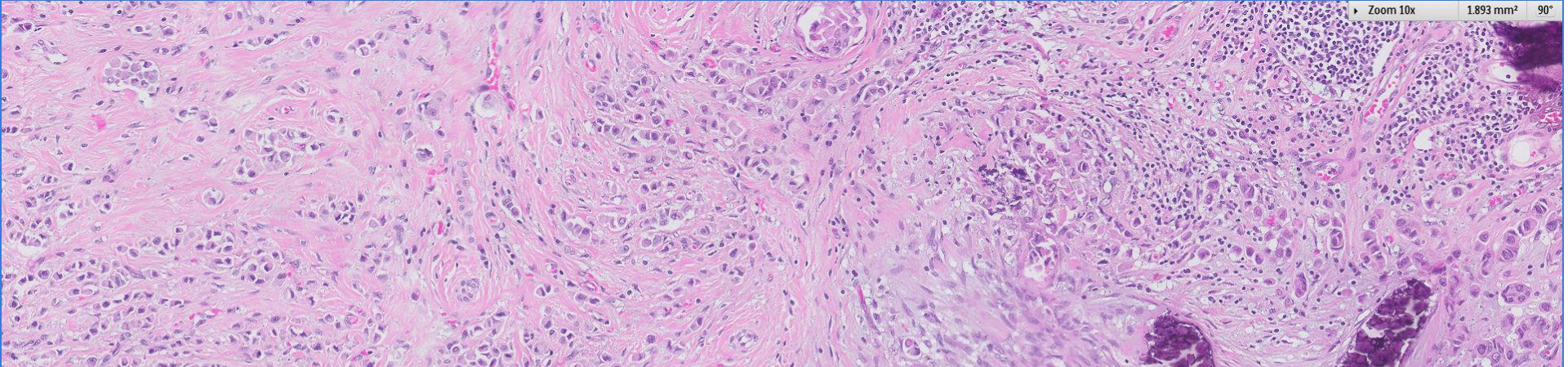


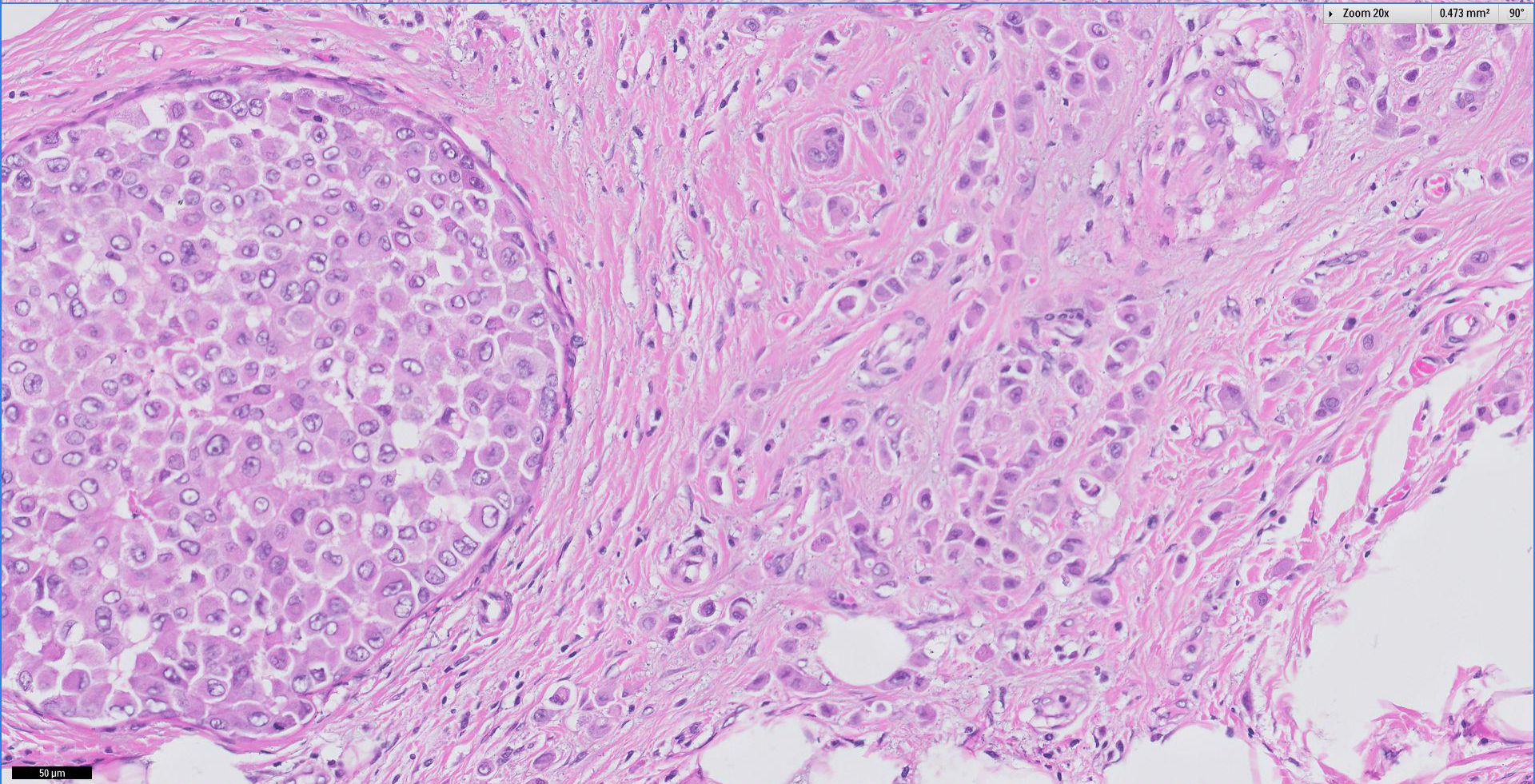
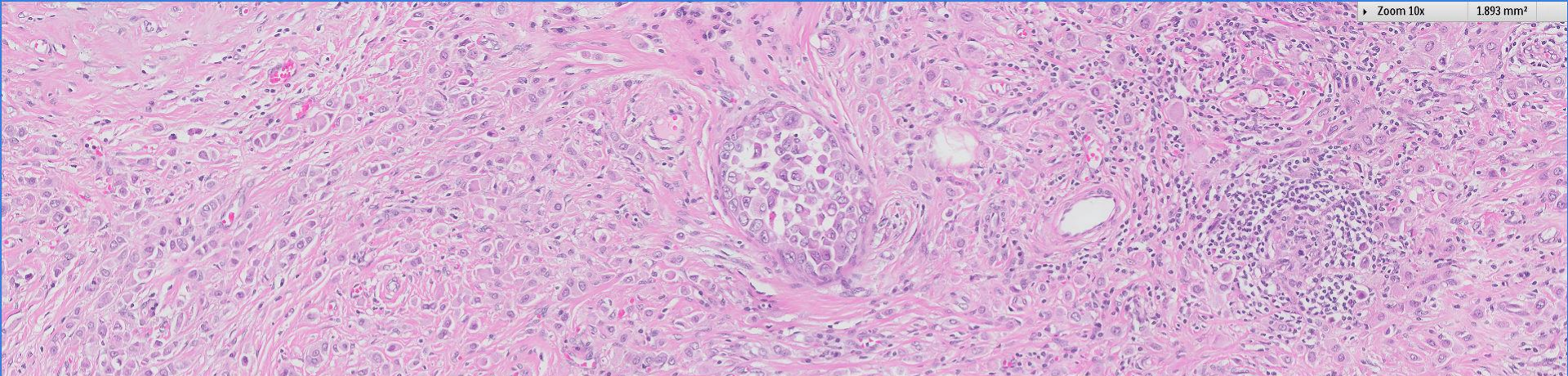
Wide excision



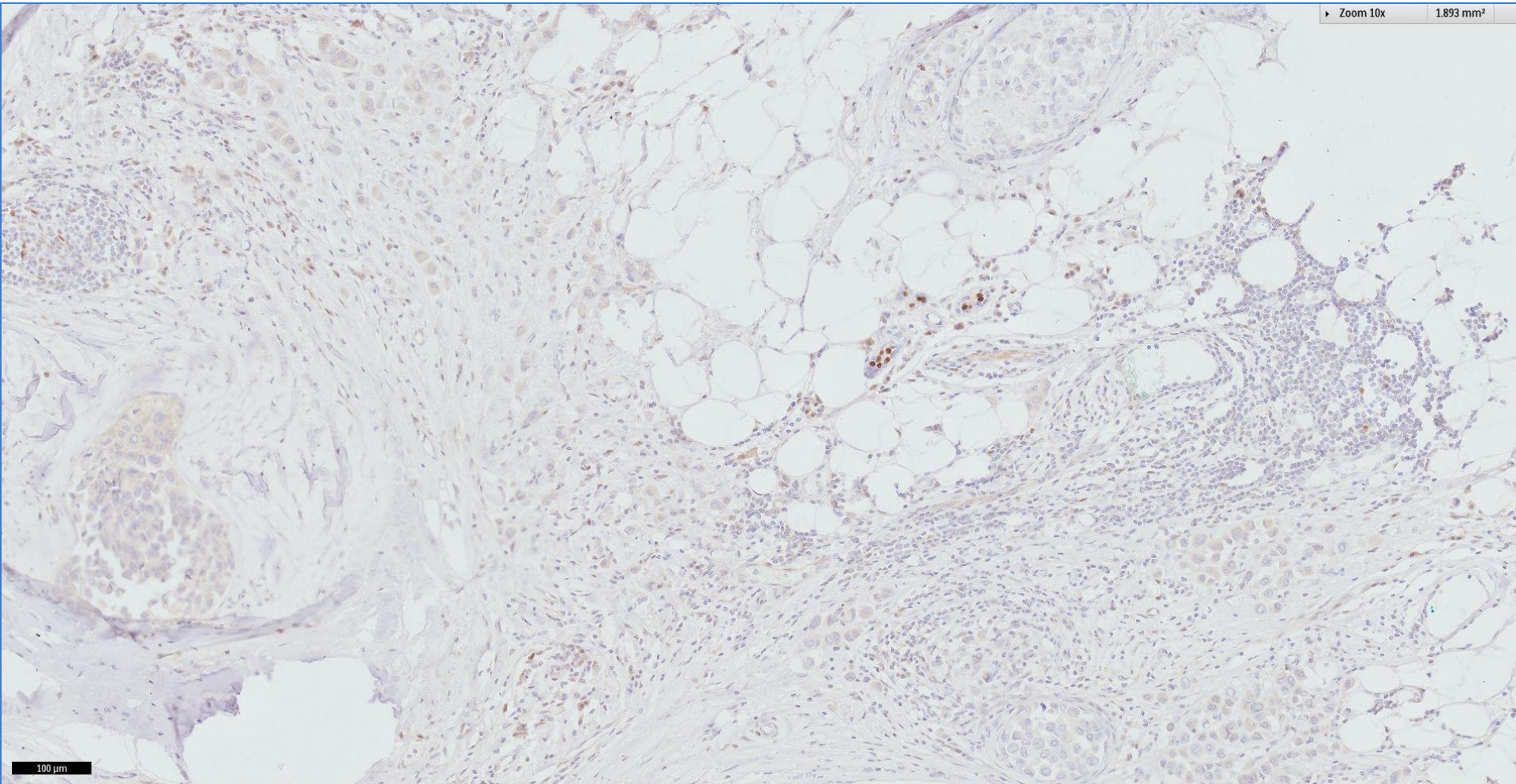




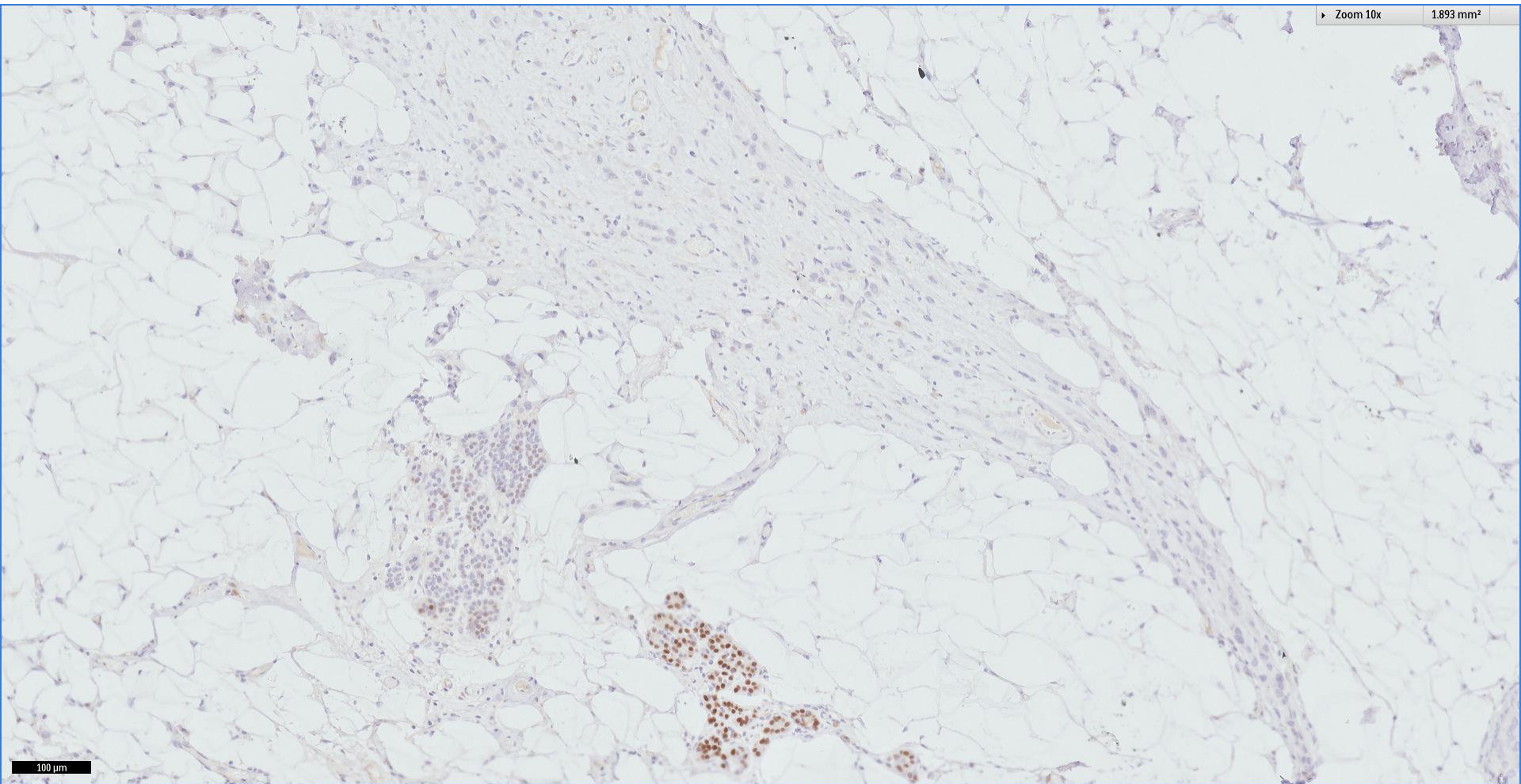




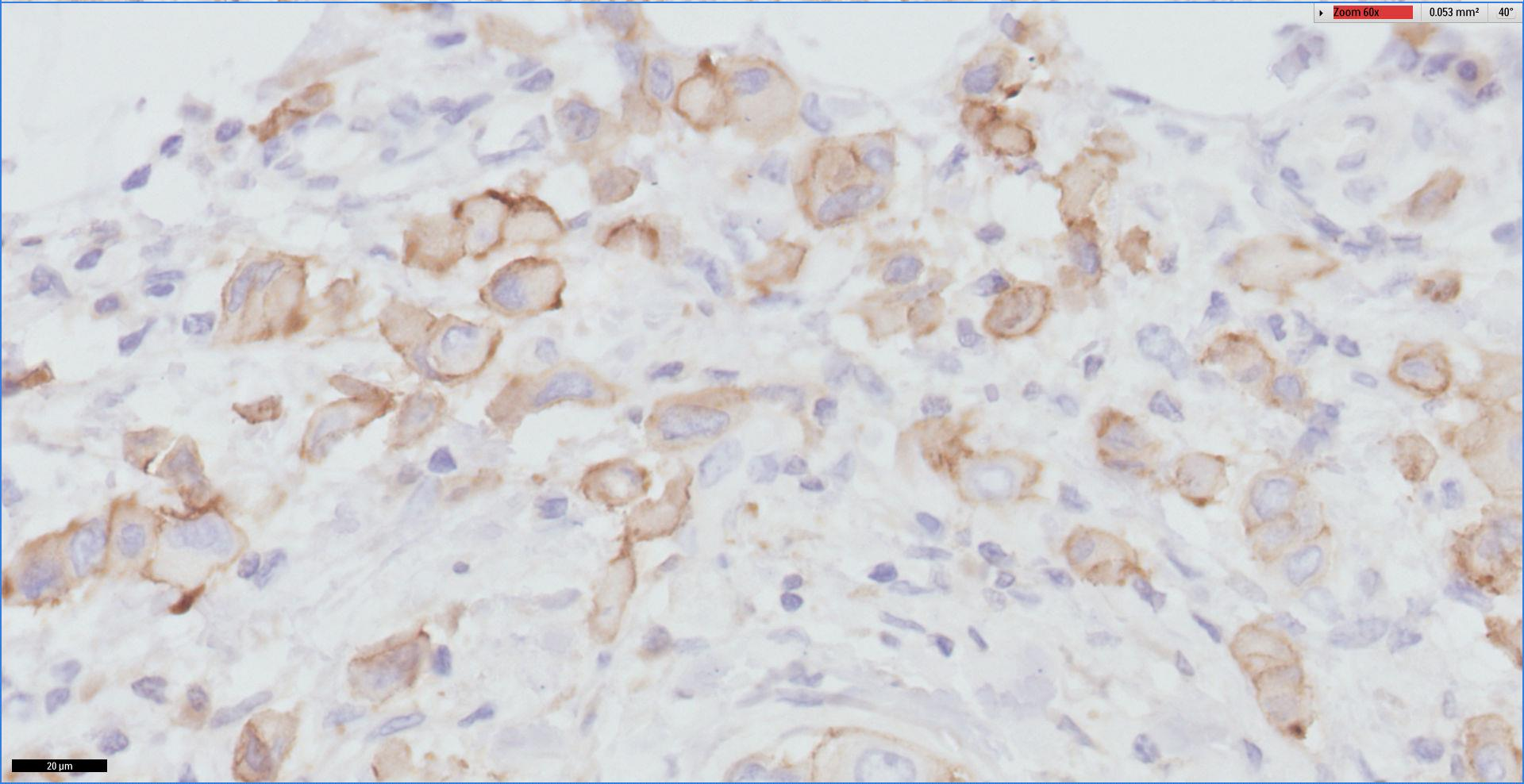
ER



PR



HER2



Diagnosis

Right breast, wide excision:

Invasive lobular carcinoma with pleomorphic features, 20mm, grade 2.

Pleomorphic lobular carcinoma in situ.

ER negative, PR negative, HER2 borderline.

HER2 FISH not amplified.

Discussion points

- Pleomorphic LCIS
- Triple negative invasive lobular carcinoma

Pleomorphic LCIS

- Variant of LCIS.
- Marked nuclear pleomorphism similar to that of high nuclear grade DCIS.
- Apocrine features may be seen.
- Necrosis can be present.
- Lacks E-cadherin protein expression.
- Genomic alterations typical of lobular lesions with 16q losses and 1q gains.

Pleomorphic LCIS

- Clues to diagnosis:
 - Discohesion of tumour cells.
 - Cytomorphology ~ eccentric nuclei, intracytoplasmic vacuoles.
 - Adjacent classic lobular neoplasia.

Pleomorphic invasive lobular carcinoma

- Growth pattern of ILC.
- Greater degree of atypia (grade 3 nuclei), pleomorphism and mitoses.
- Triple negativity can occur; less frequent than in invasive ductal carcinoma.
- Androgen receptor & GCDFP15 tend to be positive.

Author, journal, year	Pleomorphic LCIS	Pleomorphic ILC	ILC
<p>Harbhajanka A et al. Appl Immunohistochem Mol Morphol. 2014 Jul;22(6):e18-26.</p>			<p>255 ILC. 5.49% of ILC are triple negative: - Elderly. - Pleomorphic. - Larger tumour size. Increased expression of vimentin, CK5, p16, p53, and c-kit.</p>
<p>Khoury T et al. Histopathology. 2014 Jun;64(7):981-93.</p>	<p>47 PLCIS. Adverse ER/PR/HER2 molecular profile. At least 41.2% overexpress HER2. At least 11.7% triple-negative.</p>		
<p>Monhollen L. Histopathology. 2012 Sep;61(3):365-77.</p>		<p>40 cases. 5 of 38 (13.2%) triple-negative cases. 4% basal phenotype. Older patients, negative hormonal receptor status correlated significantly with worse clinical outcome.</p>	

 Breast
Pathology
Course 2016



Pathology Building 1958-2013, by Ong Kim Seng