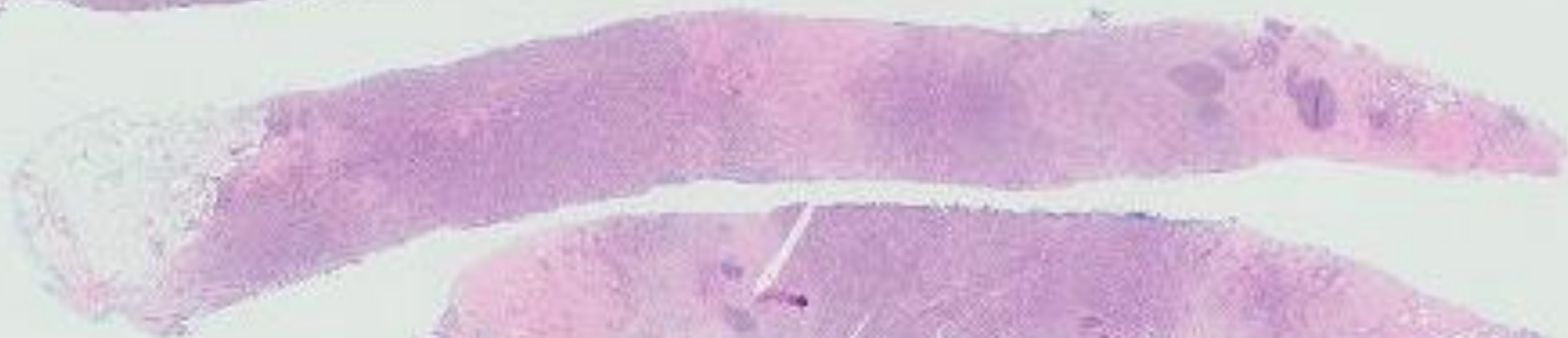
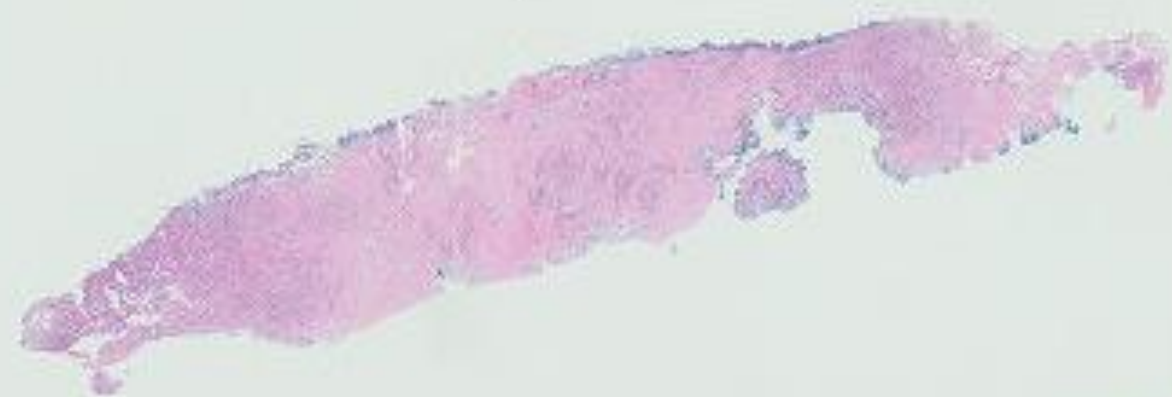
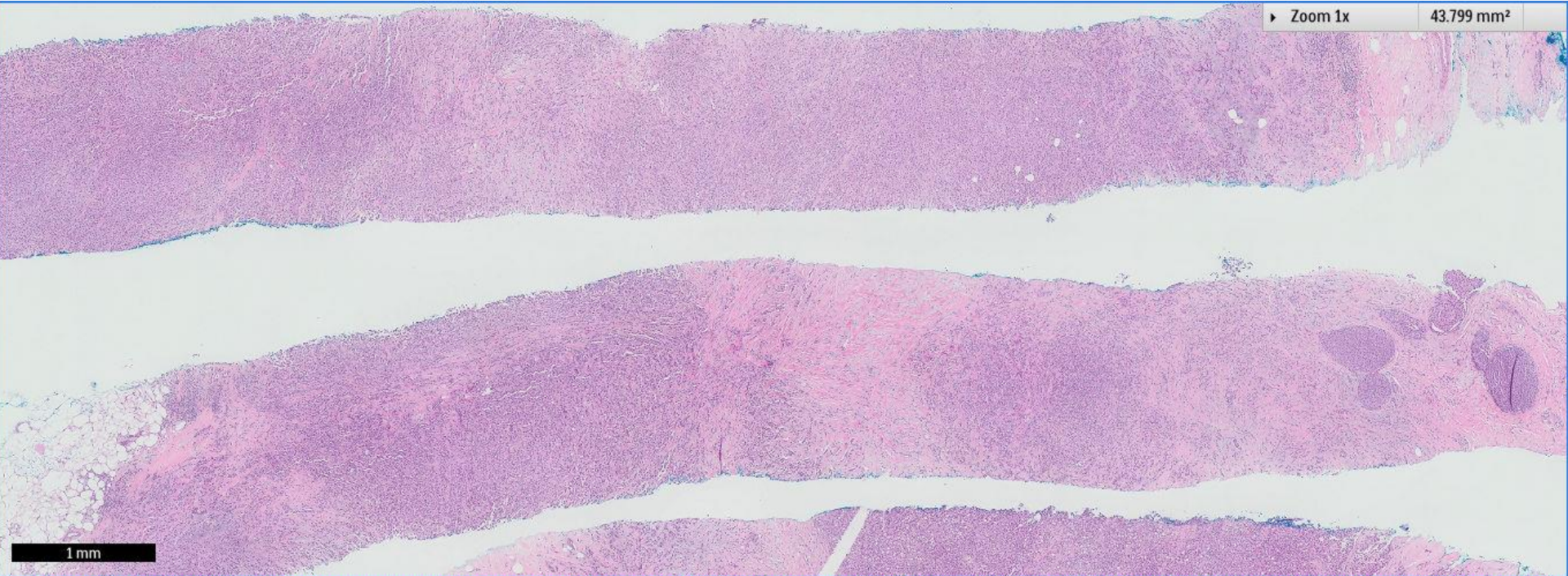


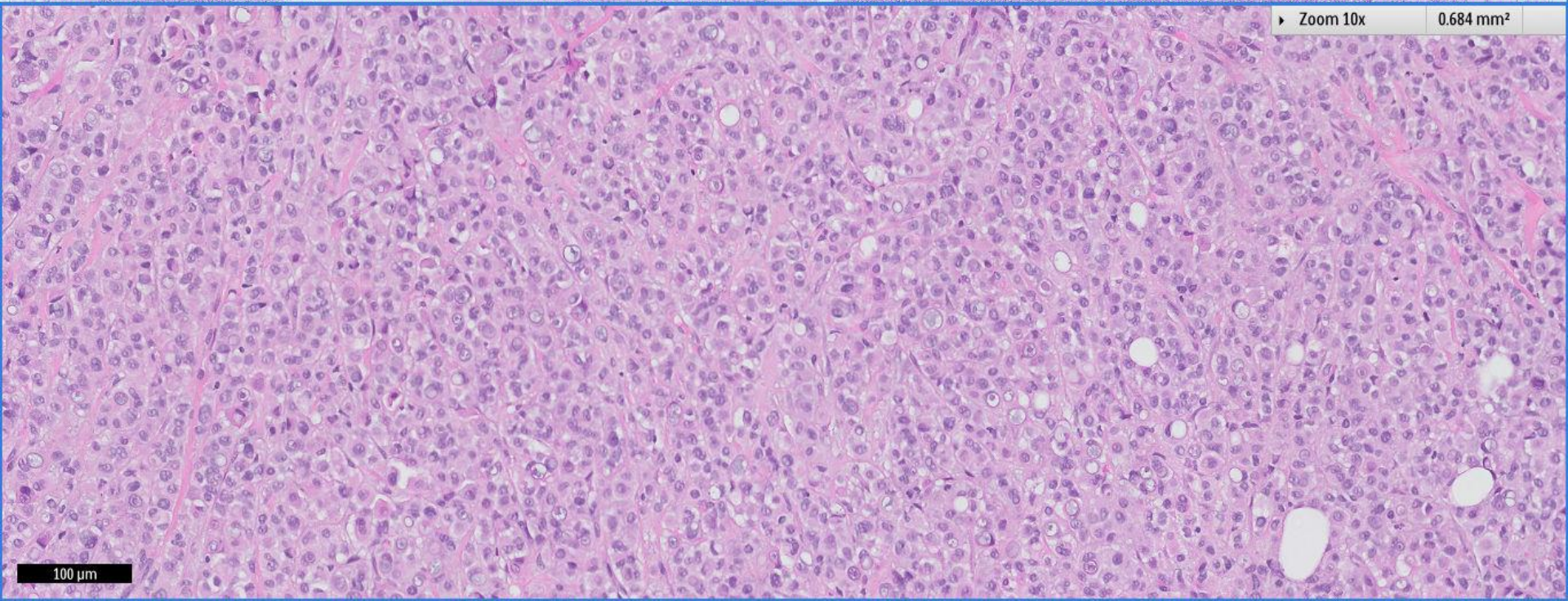
Case 39

61 year old Malay female.
Core biopsy of a right breast mass at 12
o'clock.



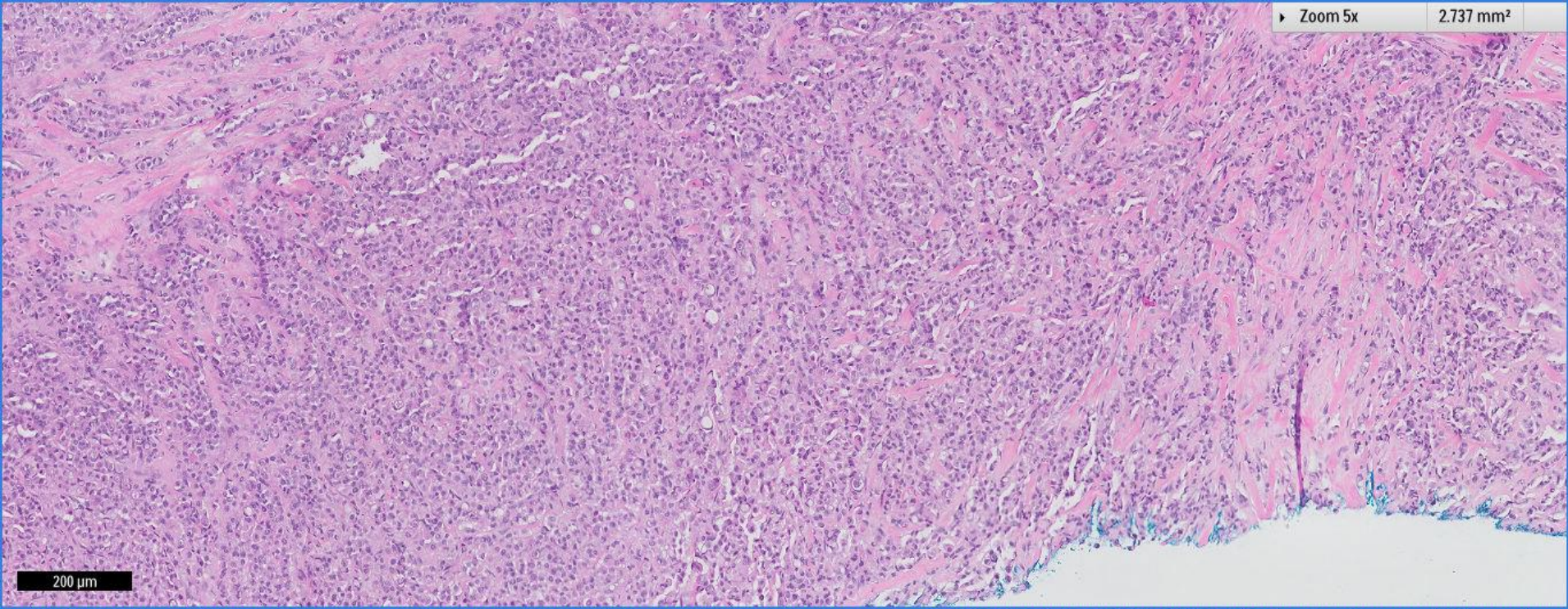


1 mm



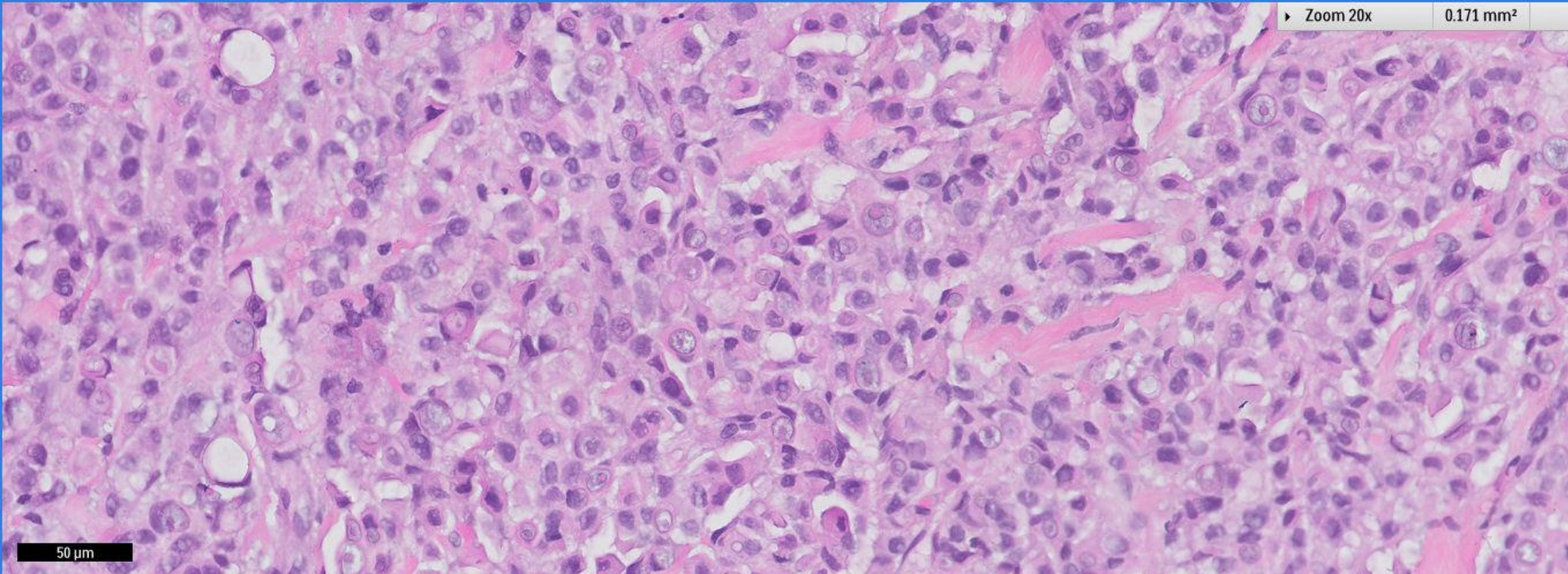
100 μm

Zoom 5x 2.737 mm²

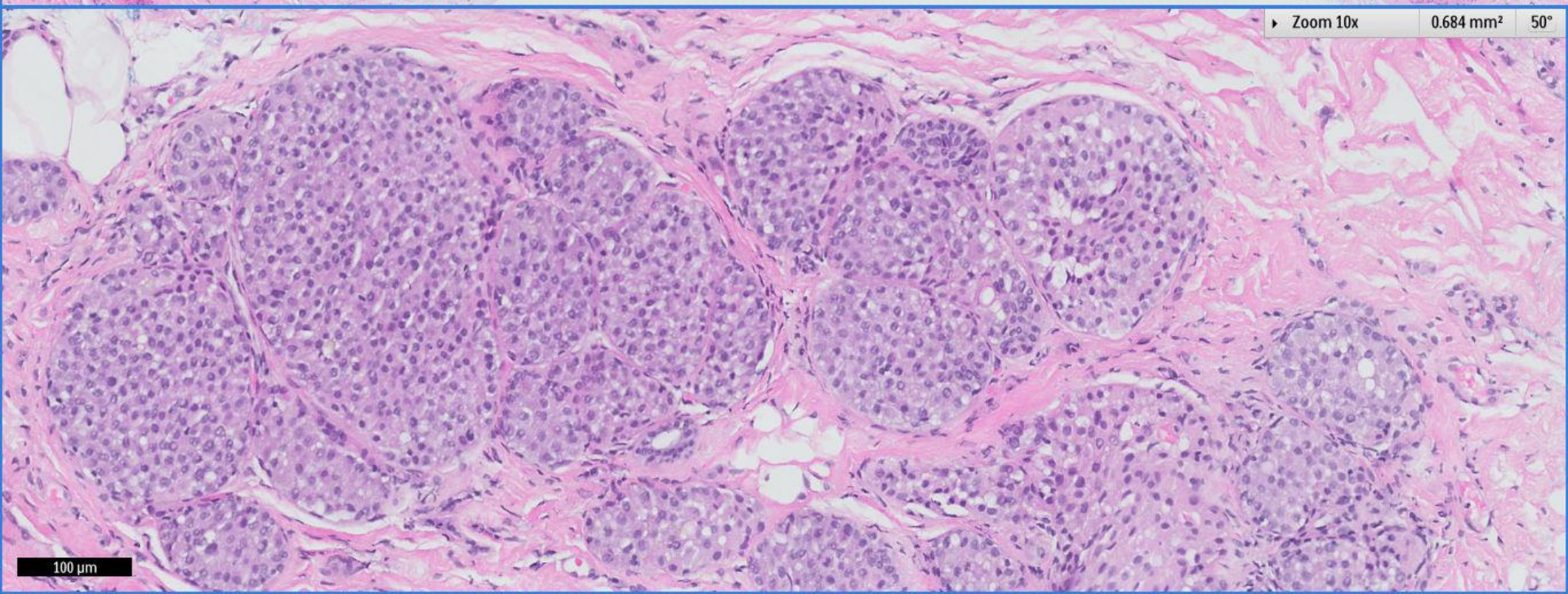
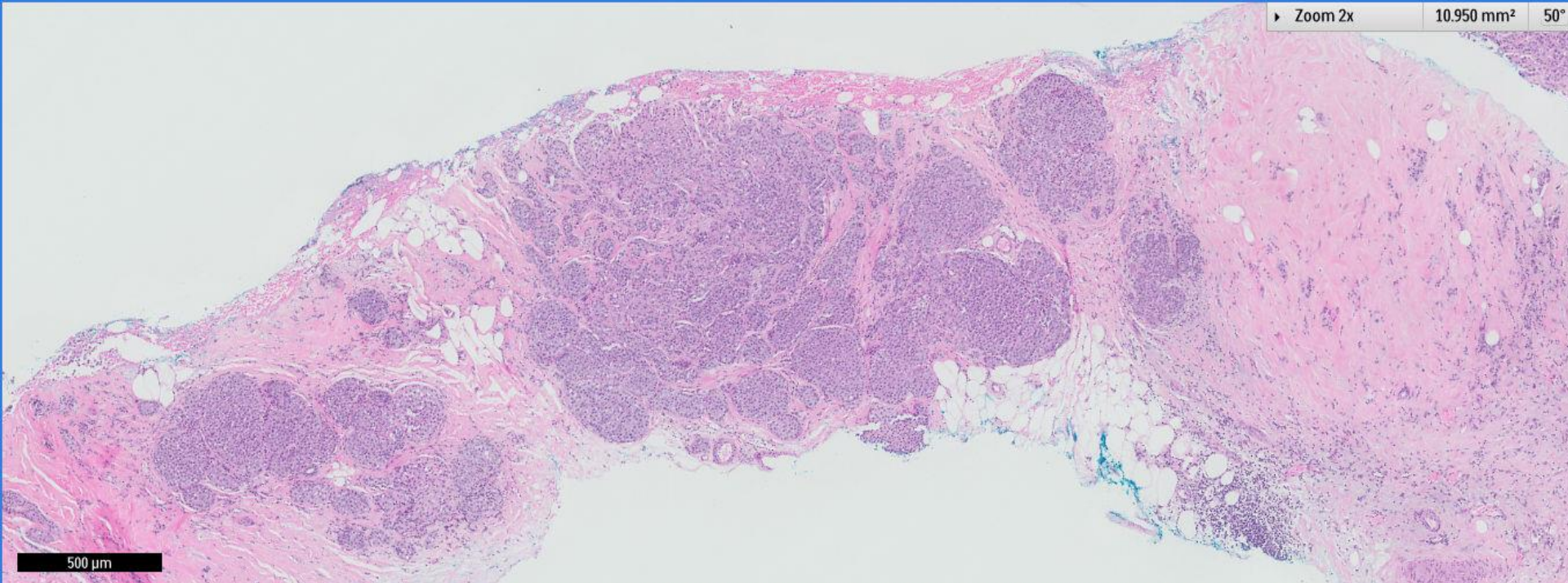


200 μm

Zoom 20x 0.171 mm²

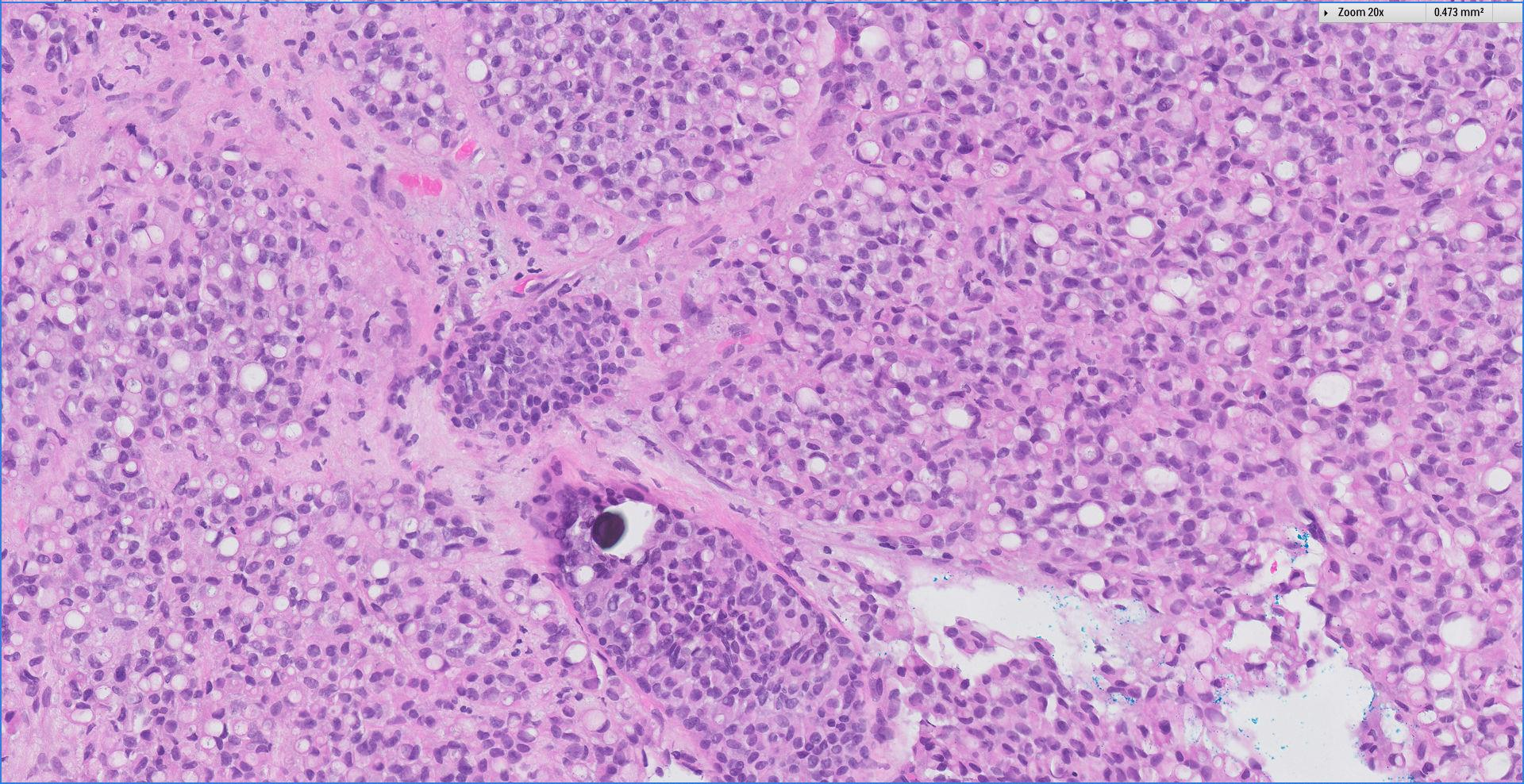
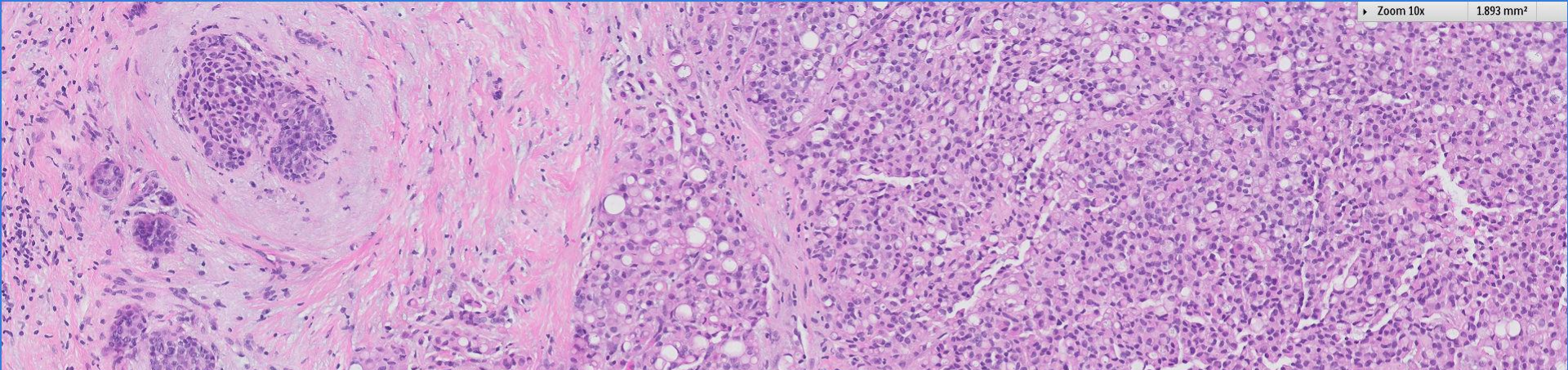


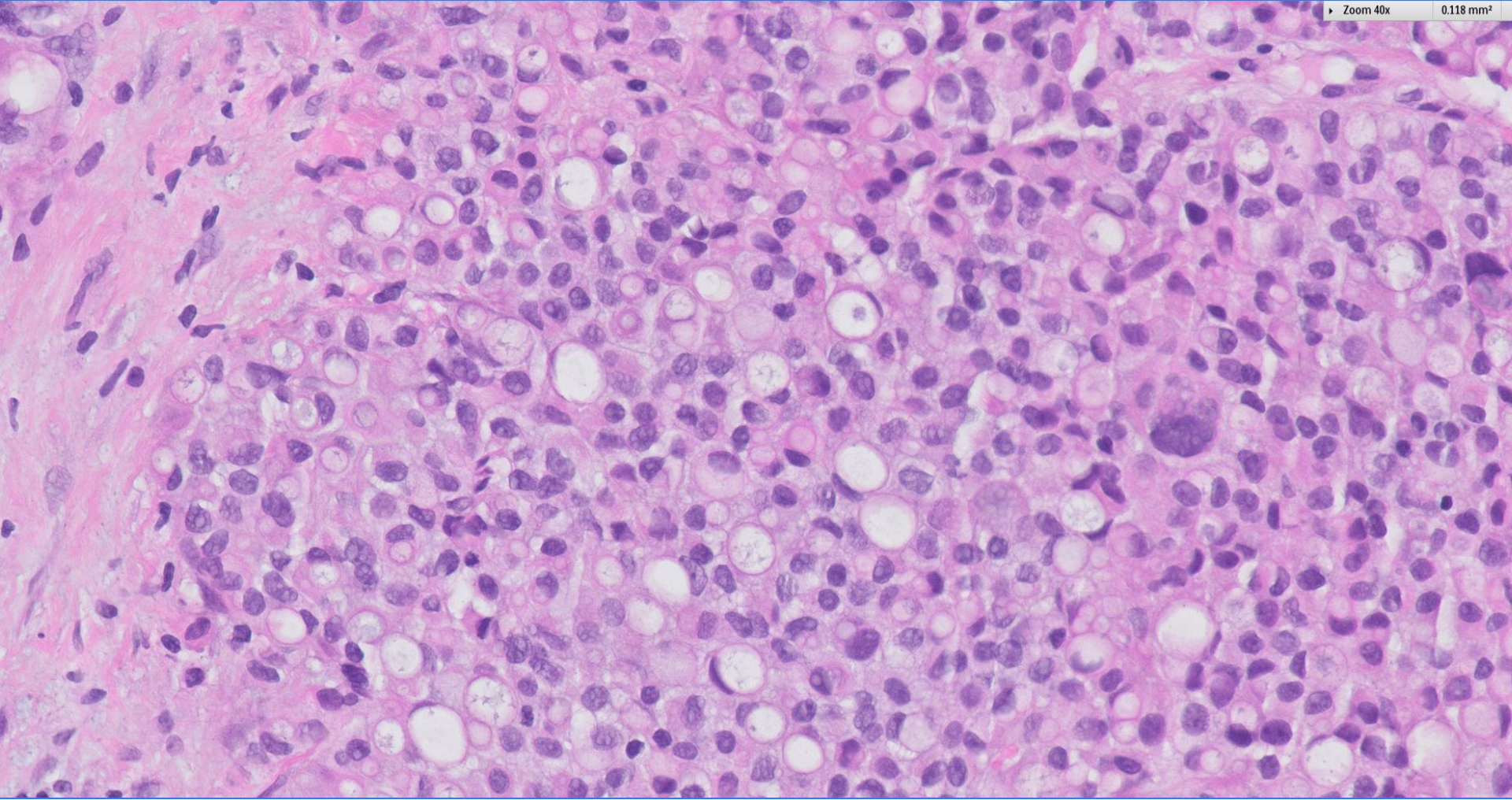
50 μm

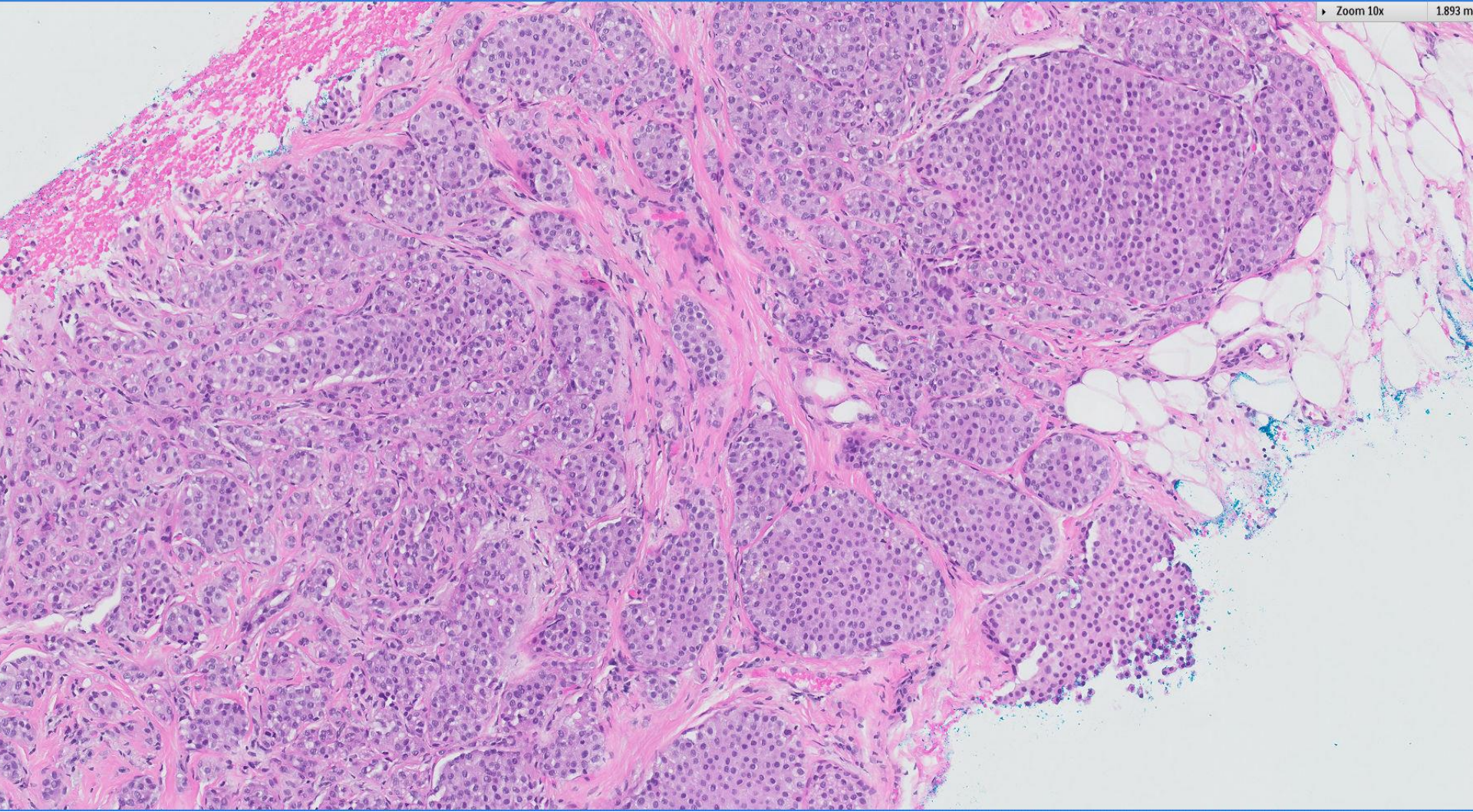


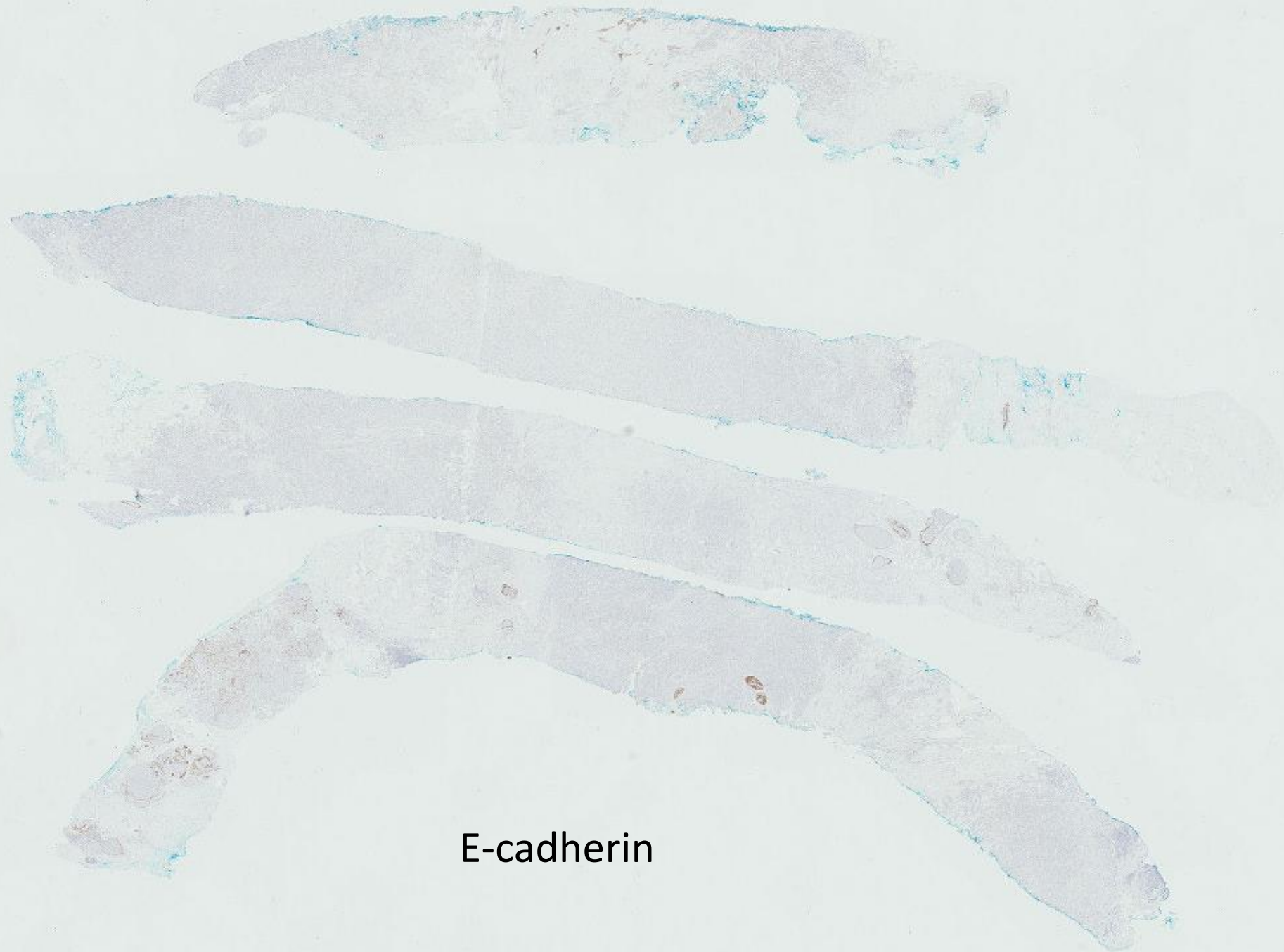


Flower Dome, Gardens by the Bay

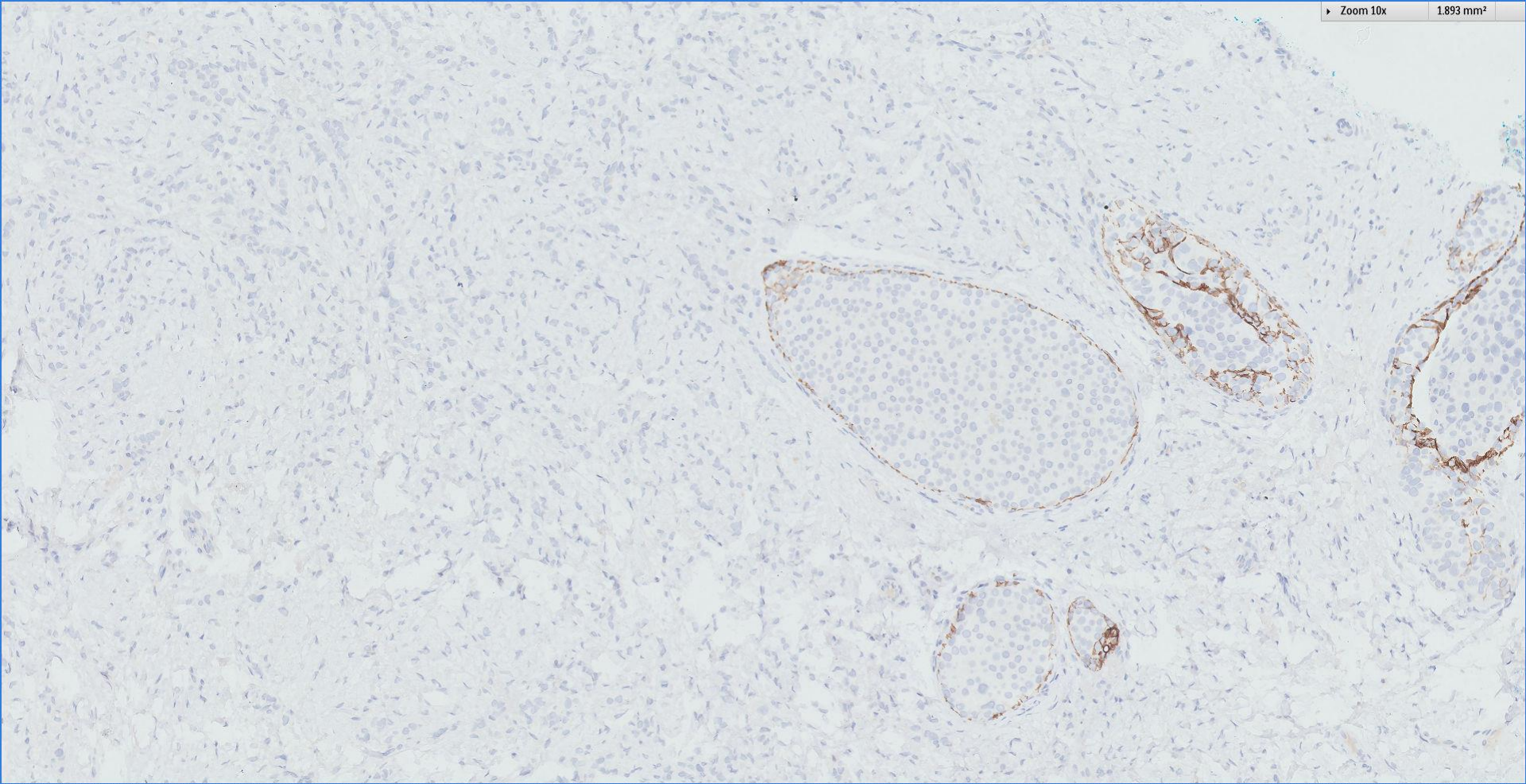




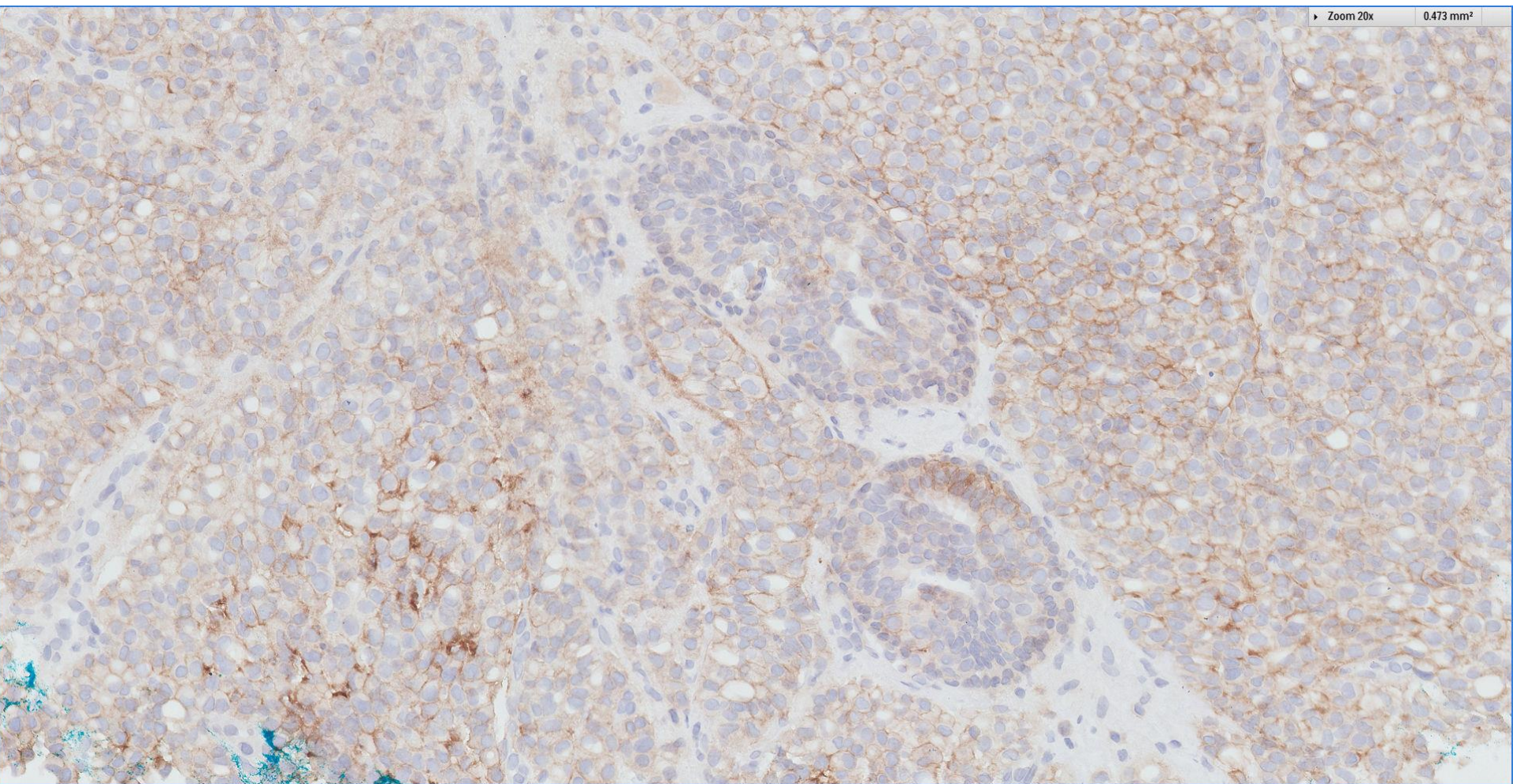




E-cadherin

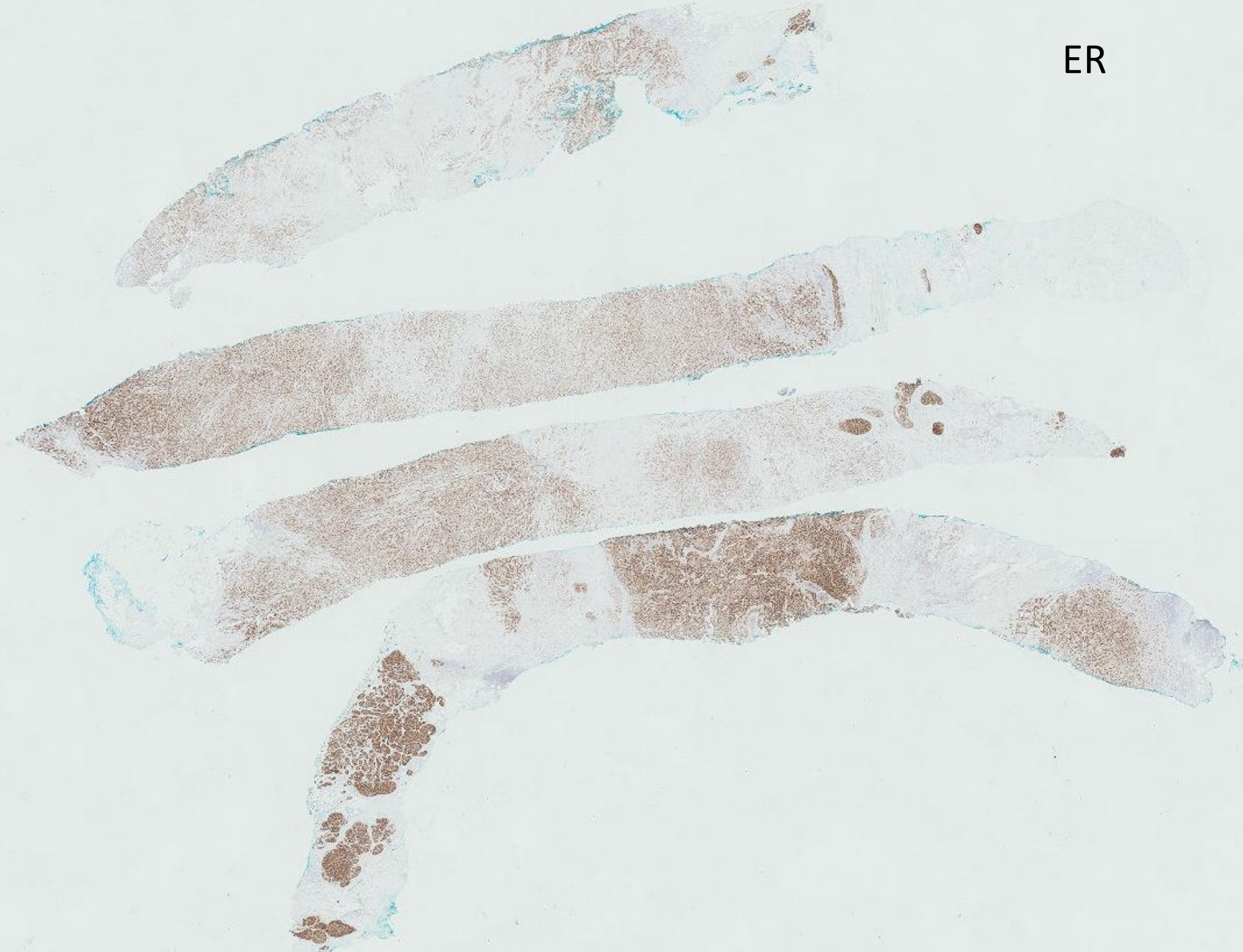


E-cadherin

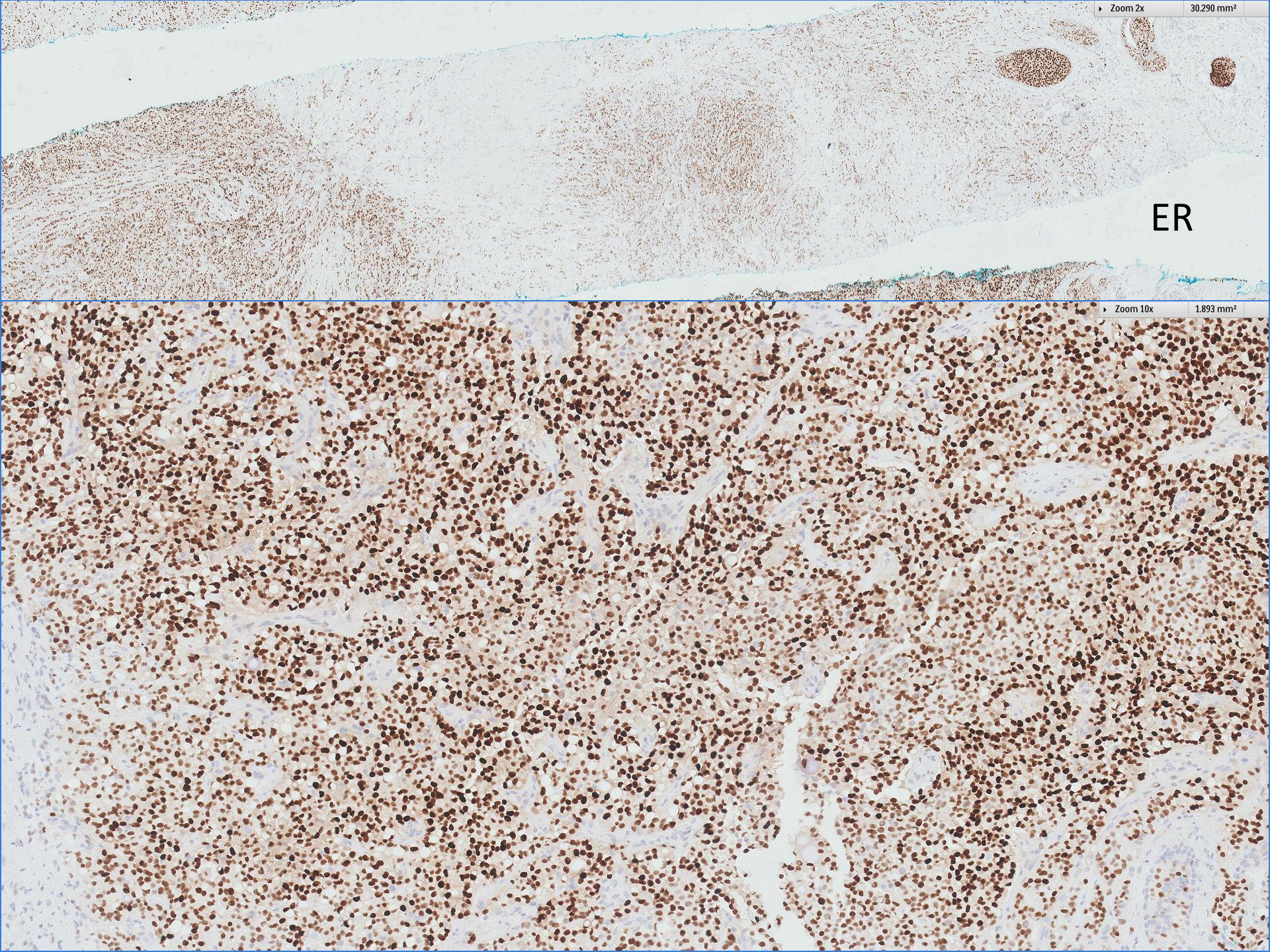


E-cadherin

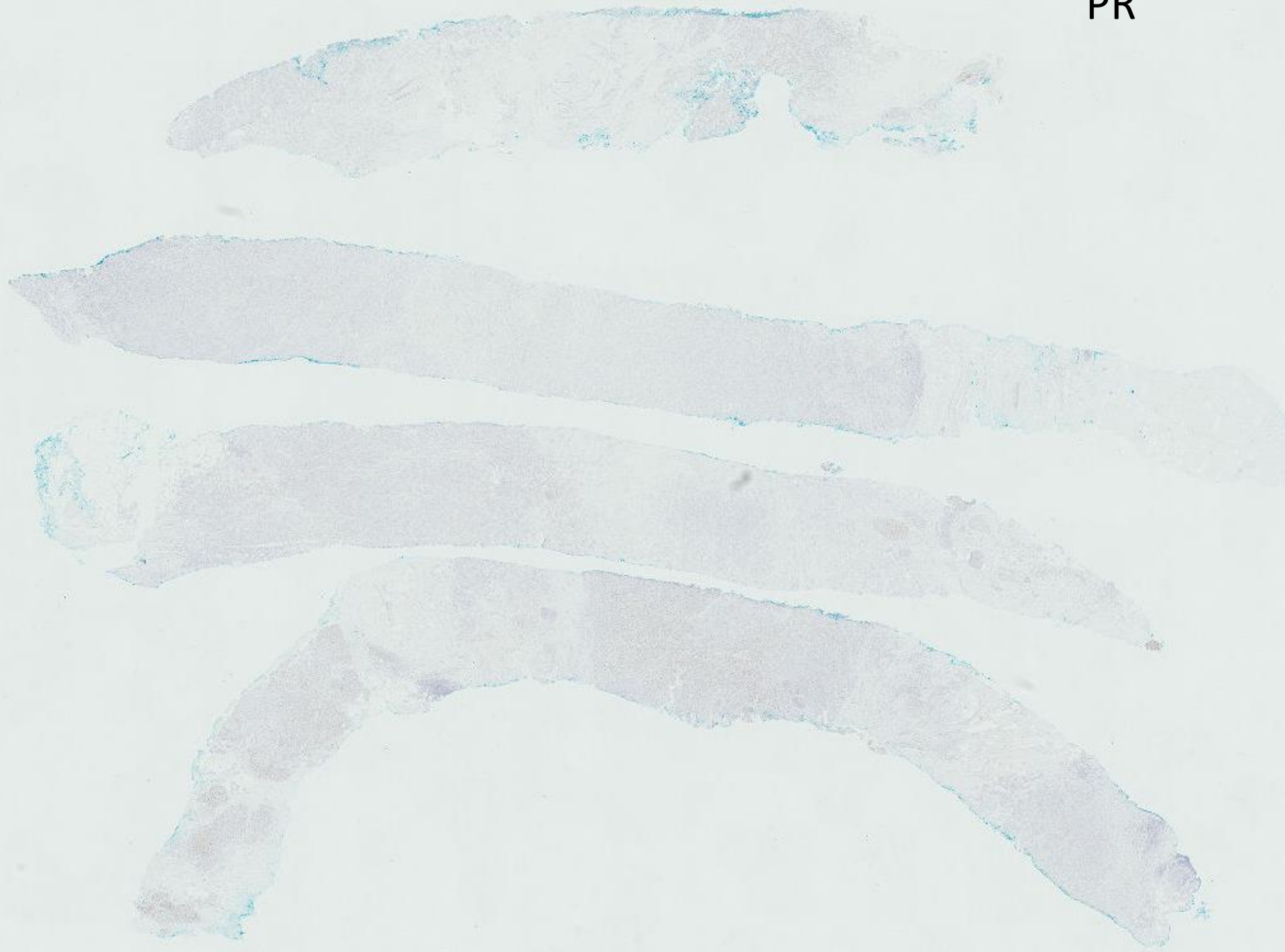
ER



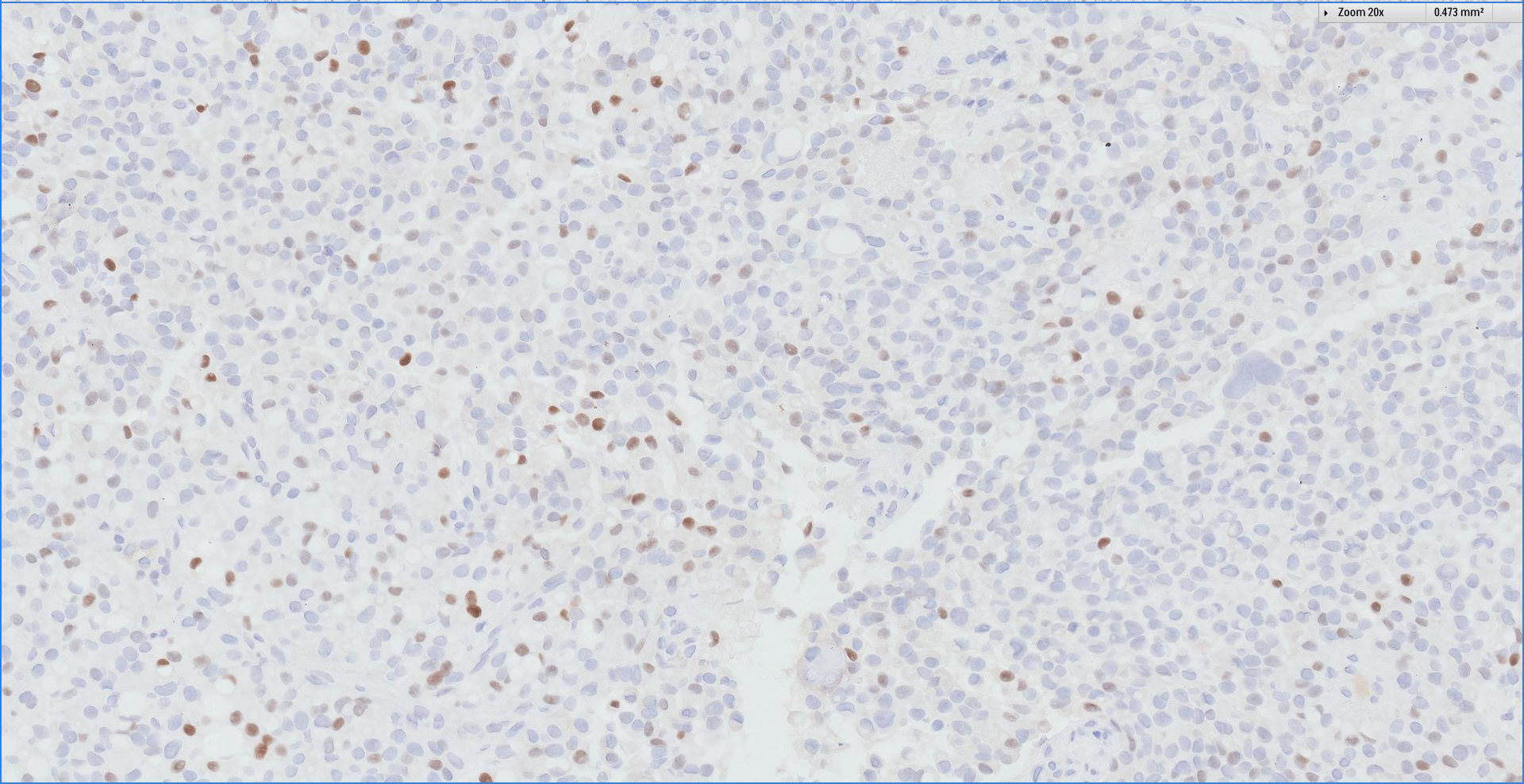
ER



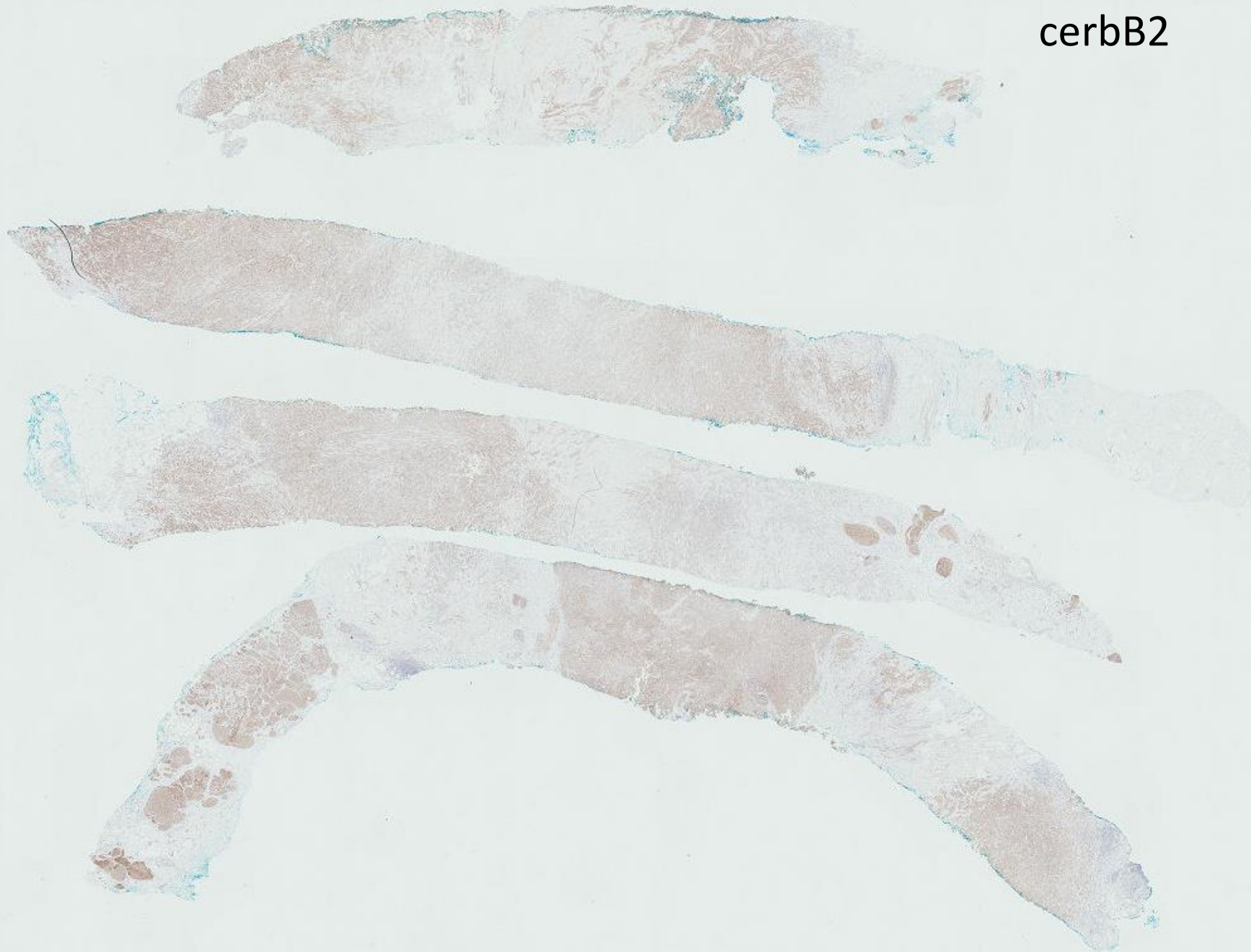
PR



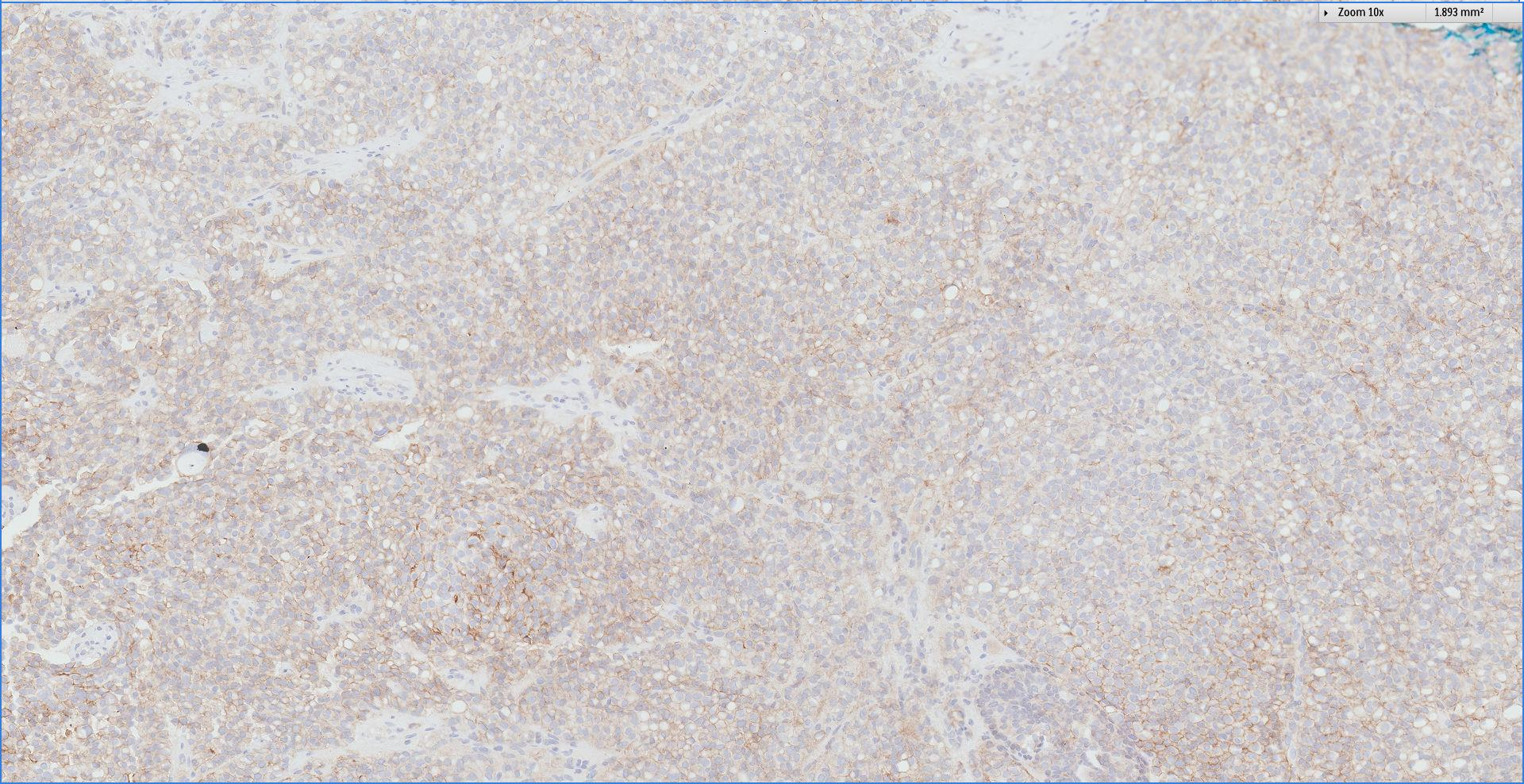
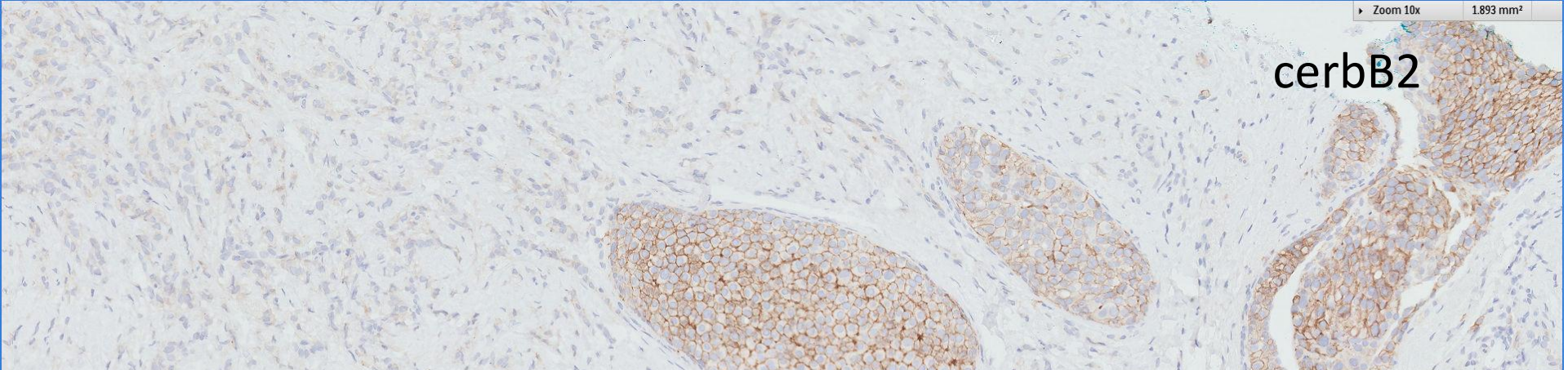
PR



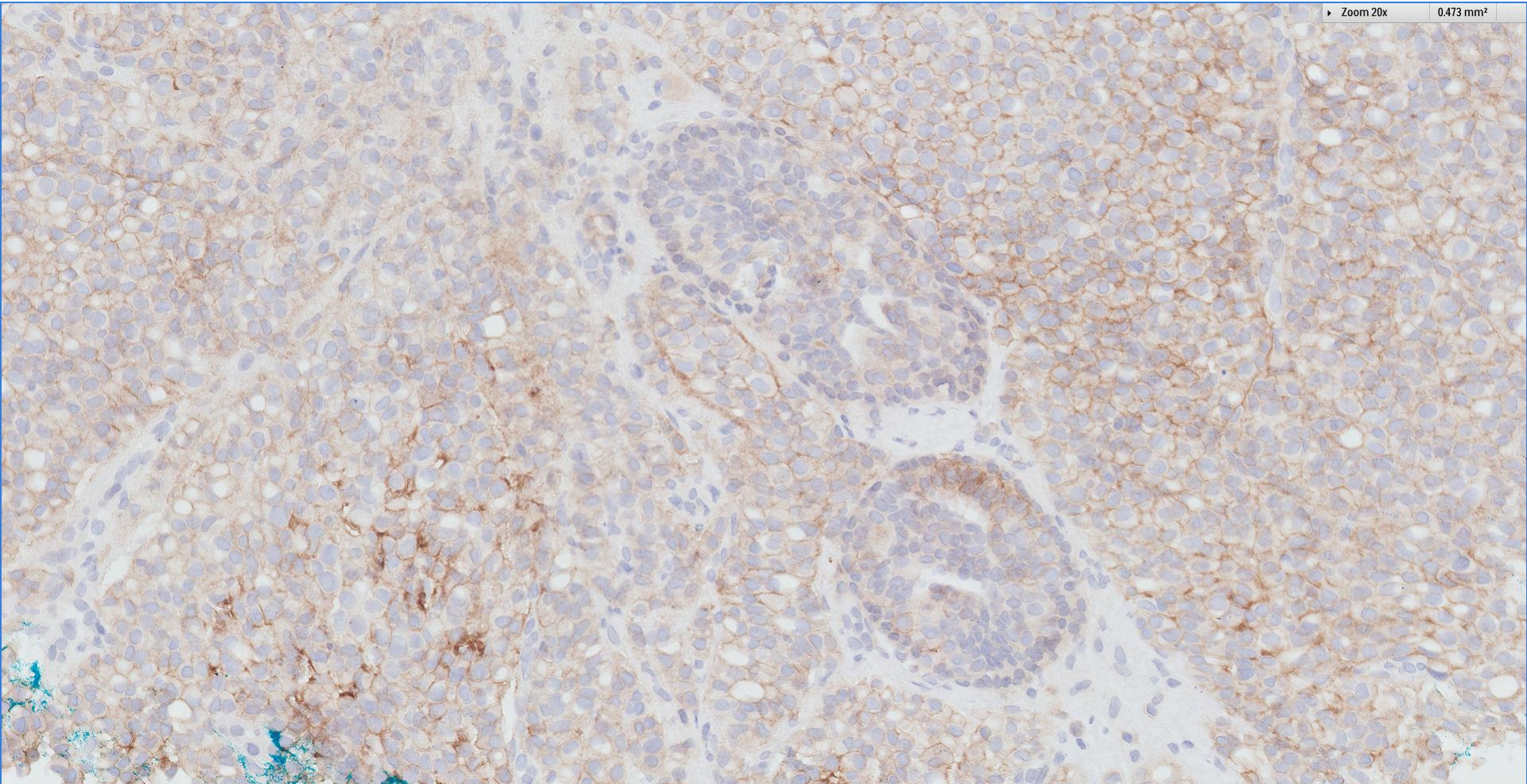
cerbB2



cerbB2



cerbB2



Diagnosis

Right breast mass at 12 o'clock ~

In situ and invasive lobular carcinoma.

ER positive, PR negative, cerbB2 equivocal.

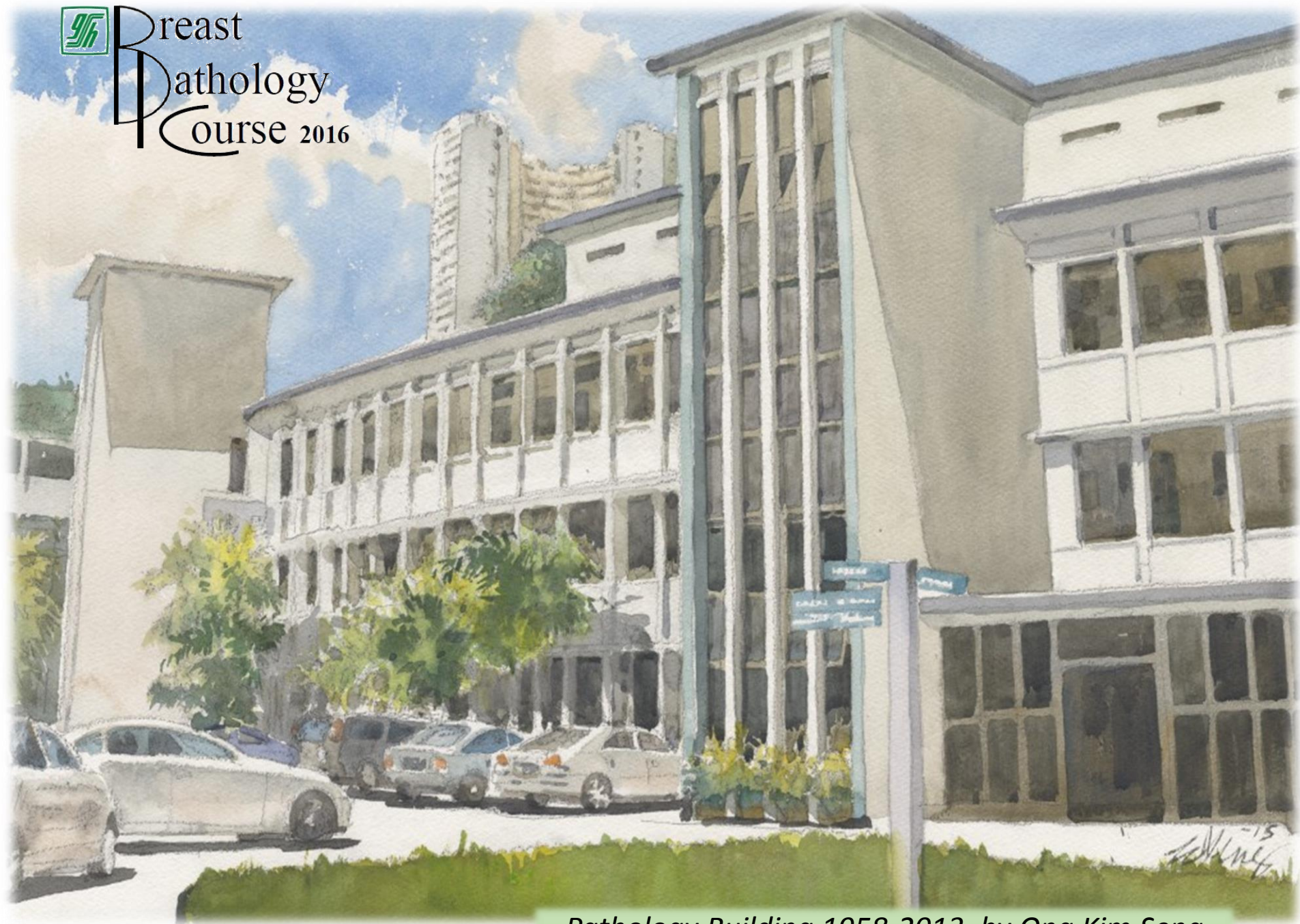
Further history

- Recent diagnosis of sigmoid colonic adenocarcinoma pT4b (invading caecum), N1.
- Subsequently developed peritoneal metastases confirmed to be of colonic origin.

Primary breast carcinoma vs metastatic colonic adenocarcinoma

- Compare morphological appearances.
- Presence of in situ carcinoma in the breast favours breast primary.
- Hormone receptors positive in breast primary.
- Immunostains ~
 - CK7+/CK20- in the breast
 - CK7-/CK20+ in the colon
 - Breast markers ~ GCDFP15, mammaglobin, GATA3

 Breast
Pathology
Course 2016



Pathology Building 1958-2013, by Ong Kim Seng