

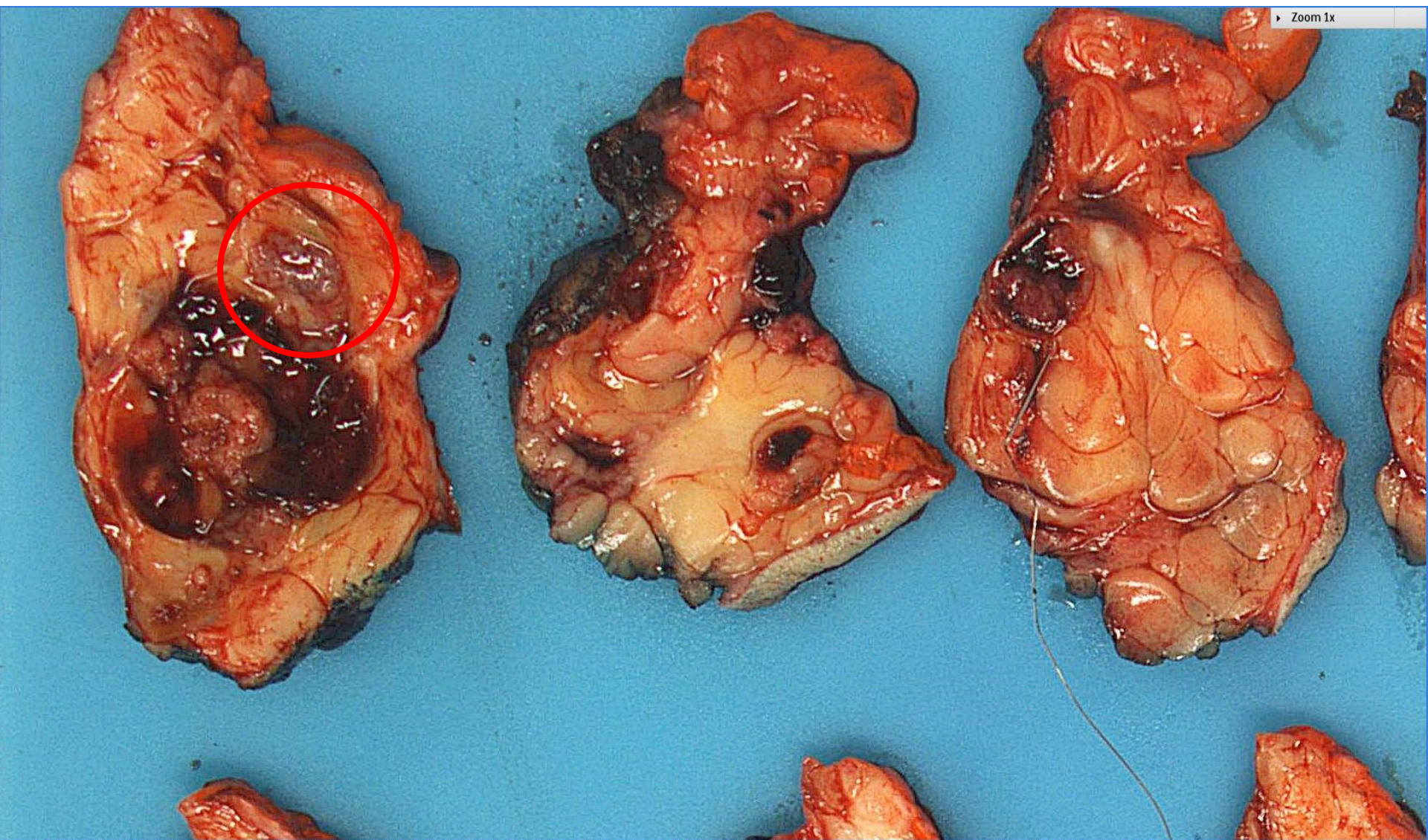
Case 12

58 year old Chinese female.

Right breast wide excision was performed for a prior core biopsy diagnosis of 'papillary neoplasm with cytological atypia' in a right breast tumour.

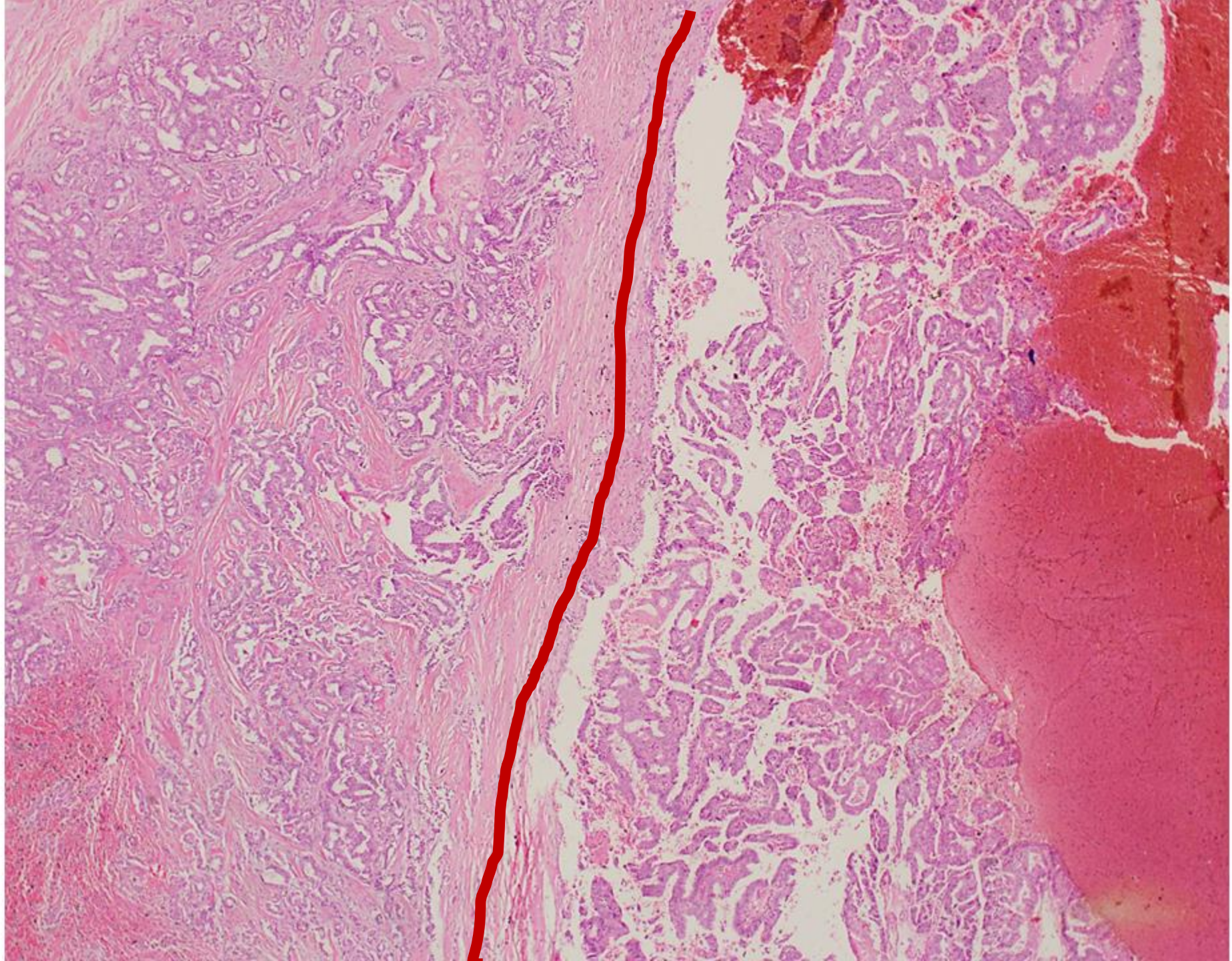
Presented by Puay Hoon Tan





► Zoom 1x







This histological image shows a cross-section of a tissue specimen stained with hematoxylin and eosin (H&E). The central region features a dense, pink-stained band of smooth muscle or fibrous tissue, likely representing the uterine wall. On either side of this central band, there are areas of invasive growth, characterized by irregular, glandular structures with varying degrees of cellular atypia. The label 'Invasive' is placed over the left side of this region, and 'EPC' is placed over the right side, indicating the presence of Endothelial Pericyte Cap formation.

Invasive

EPC

Case 12~ Diagnosis

Right breast wide excision:

Encapsulated papillary carcinoma, grade 1,
78mm.

Invasive ductal carcinoma, grade 1, 3mm, ER+
PR+, cerbB2-.



Encapsulated papillary carcinoma with invasion

- Only the invasive component is sized and staged.
- Defined as tumour infiltrating beyond the fibrous capsule.
- Need to distinguish from entrapped epithelial elements within the fibrous capsule or areas of sclerosis.
- Invasive carcinoma can be NST, cribriform, mucinous etc.
- Receptors may differ between the EPC and its invasive component.

Papillary breast lesions

- ❖ Defined as a group of neoplasms composed of papillary fronds covered by epithelial cells, invested by fibrovascular cores.

Papillary breast lesions ~ the spectrum

- Intraductal papilloma
 - With ADH and DCIS
- Papillary ductal carcinoma in situ
- Encapsulated papillary carcinoma with invasion
- Solid papillary carcinoma
- Invasive papillary carcinoma
- Tumours which may have papillary architecture ~
 - Adenomyoepithelioma
 - Tall cell carcinoma with reversed polarity

REVIEW ARTICLE



Papillary neoplasms of the breast—reviewing the spectrum

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Abstract

Papillary neoplasms of the breast encompass a wide range of tumor types ranging from the benign intraductal papilloma to in situ and invasive papillary carcinomas. In this review, we considered each tumor entity listed under the Papillary Neoplasms category in the latest WHO Classification of Breast Tumors (5th edition), namely intraductal papilloma, papillary ductal carcinoma in situ, encapsulated papillary carcinoma, solid-papillary carcinoma, and invasive papillary carcinoma. We examined their pathological features, current issues pertaining to diagnosis and prognostication, as well as the latest molecular findings. We also briefly addressed adenomyoepithelioma and the newly included tall cell carcinoma with reversed polarity, highlighting areas where they overlap with papillary neoplasms.

Thank You

PATHOLOGY
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Academia

