

## Case 21

48 year old female with a solitary nodule, 2.7 cm, in the left breast at the 2-3 o'clock position.



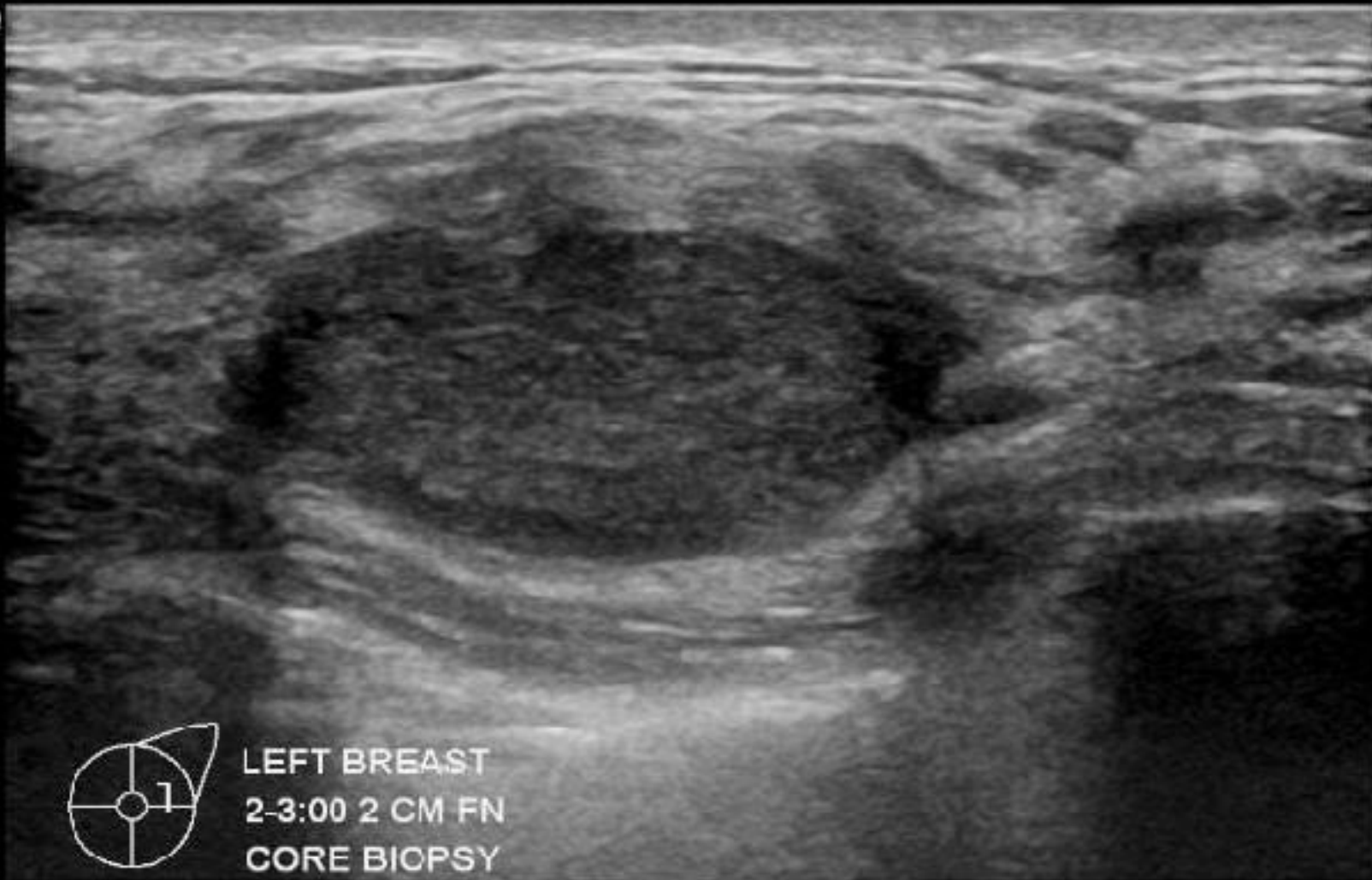
48 year old with solitary nodule  
in the left breast at 2-3:00 position 2.7 cm in size,  
? cellular fibroadenoma/Phyllodes ? mucinous  
neoplasm



SALTSY

SoS 150

OGID  
E9



-B  
Frq 11  
-Gn  
S/A 3  
-Map G  
D 3  
-DR 7  
AO% 10

1"

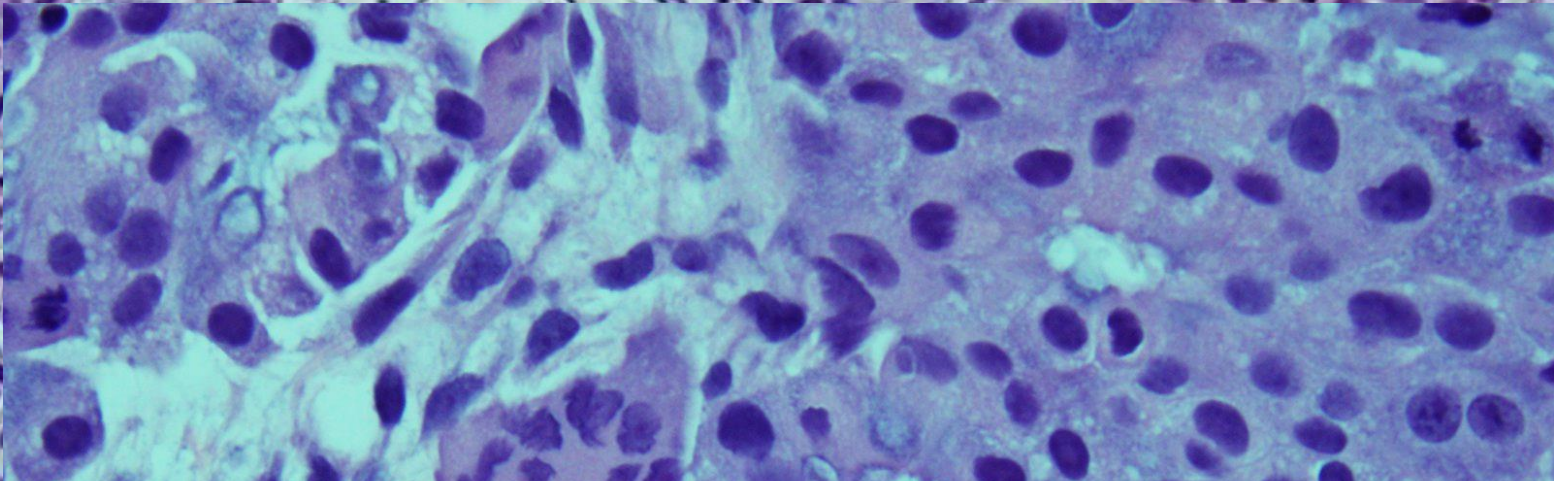
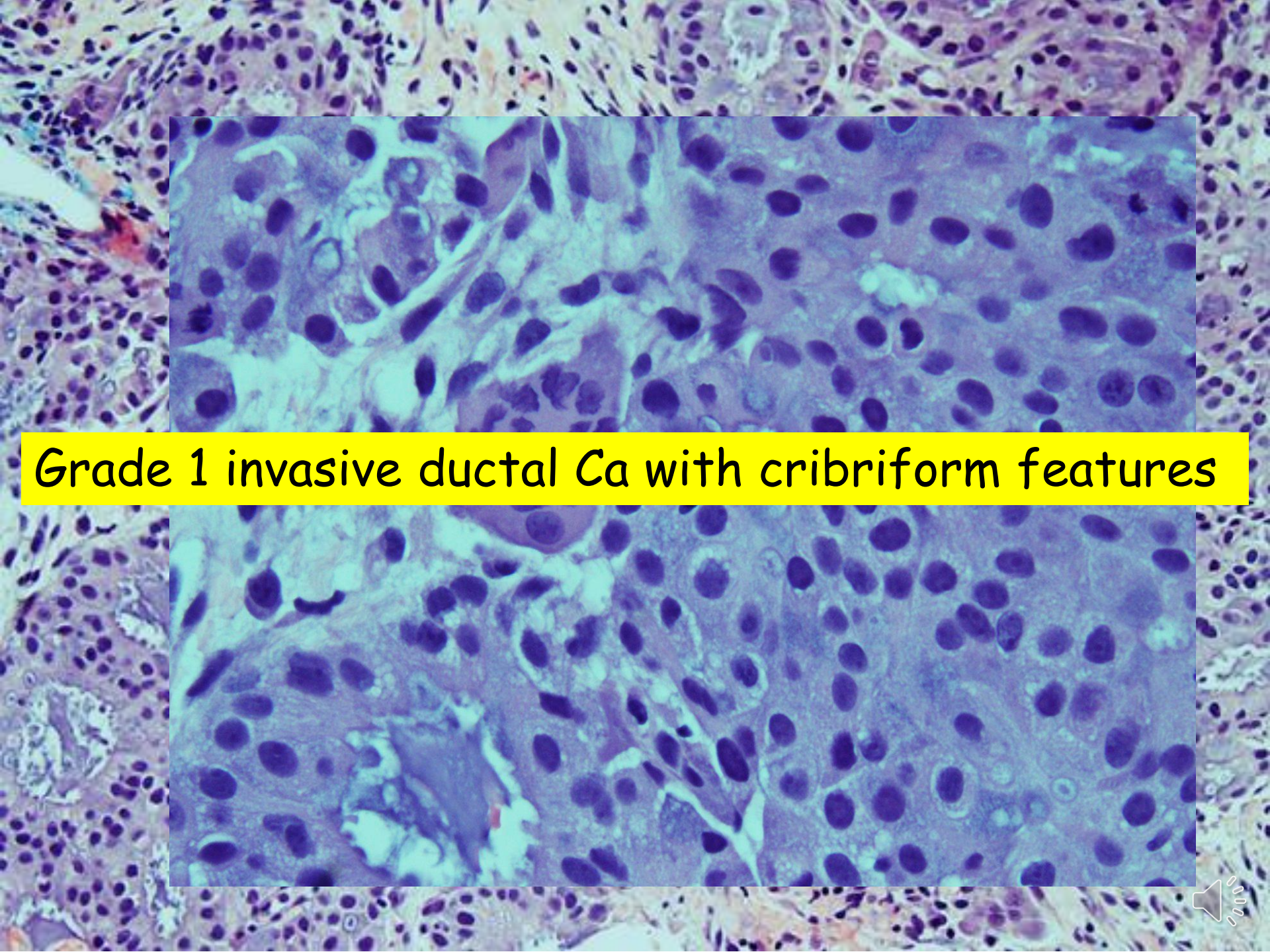
2"

3"

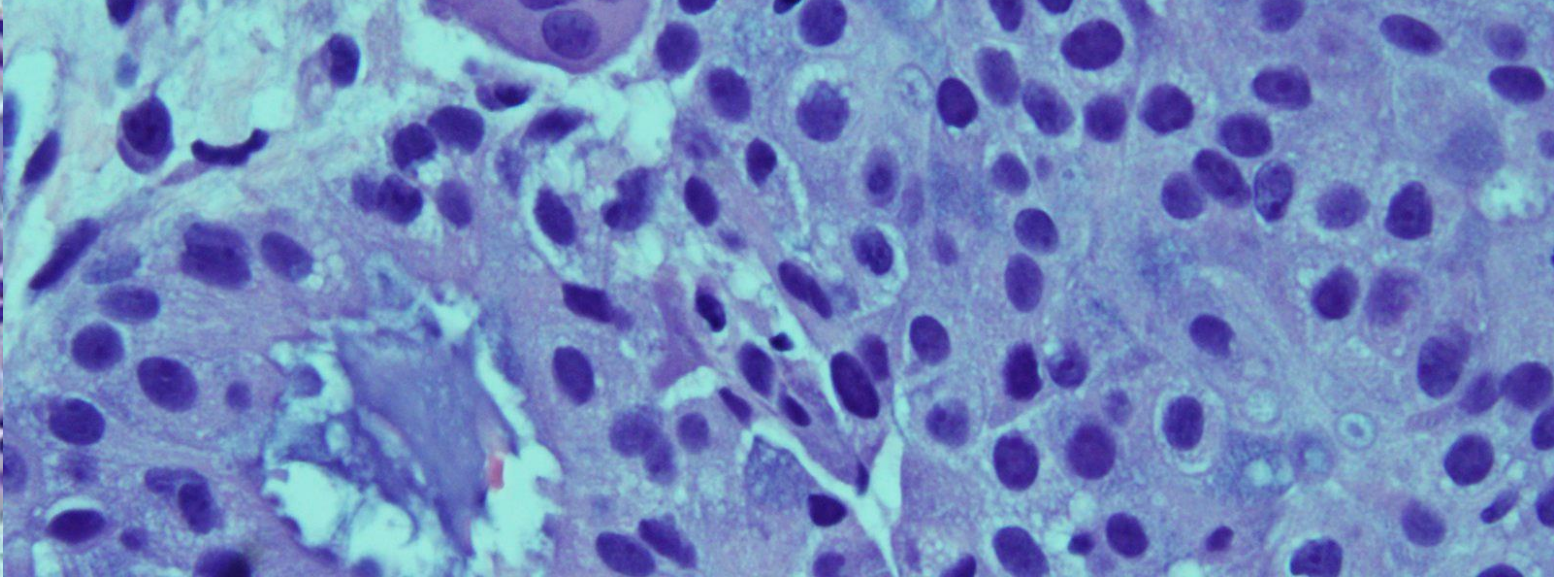


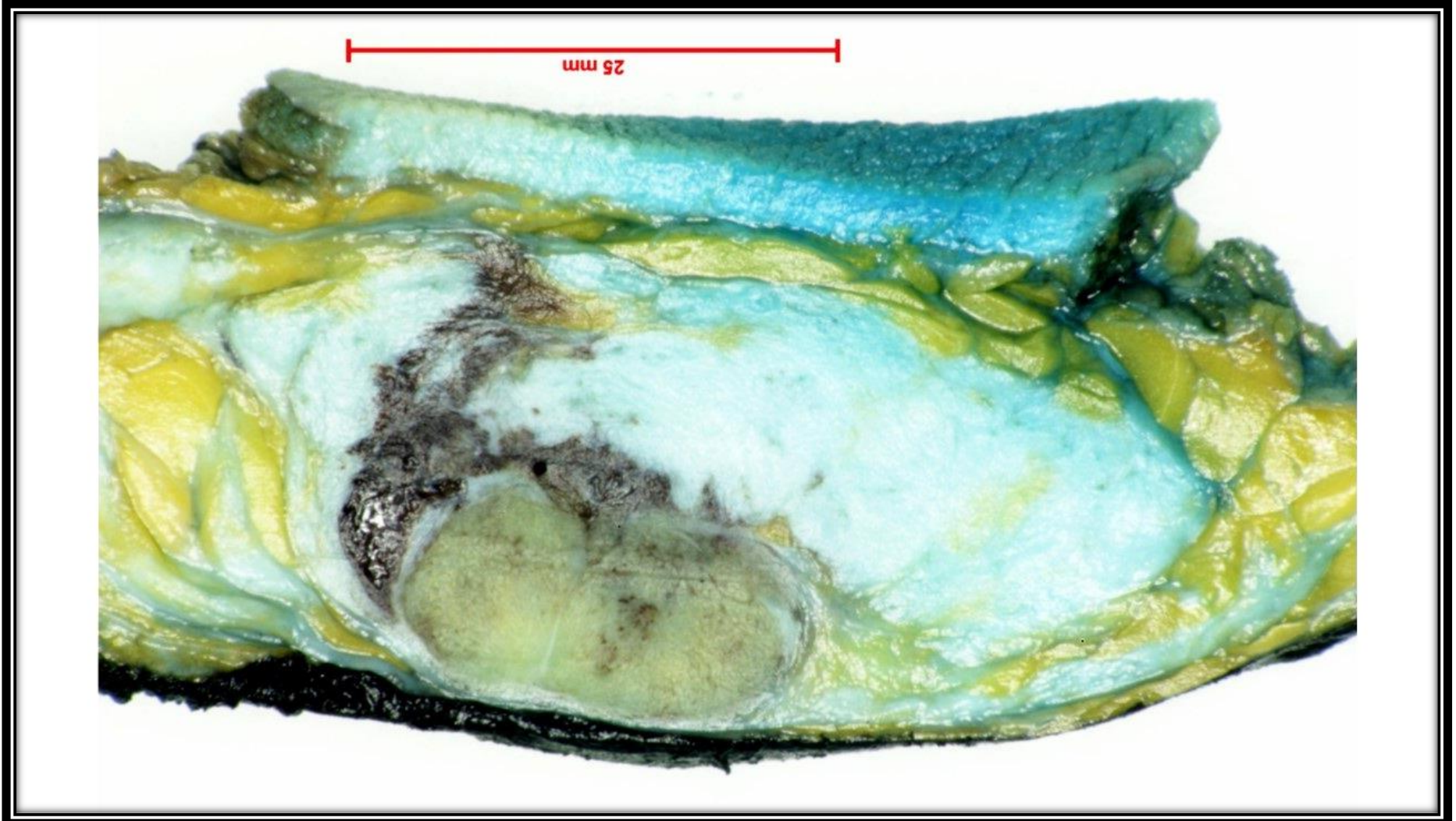
LEFT BREAST  
2-3:00 2 CM FN  
CORE BIOPSY





Grade 1 invasive ductal Ca with cribriform features





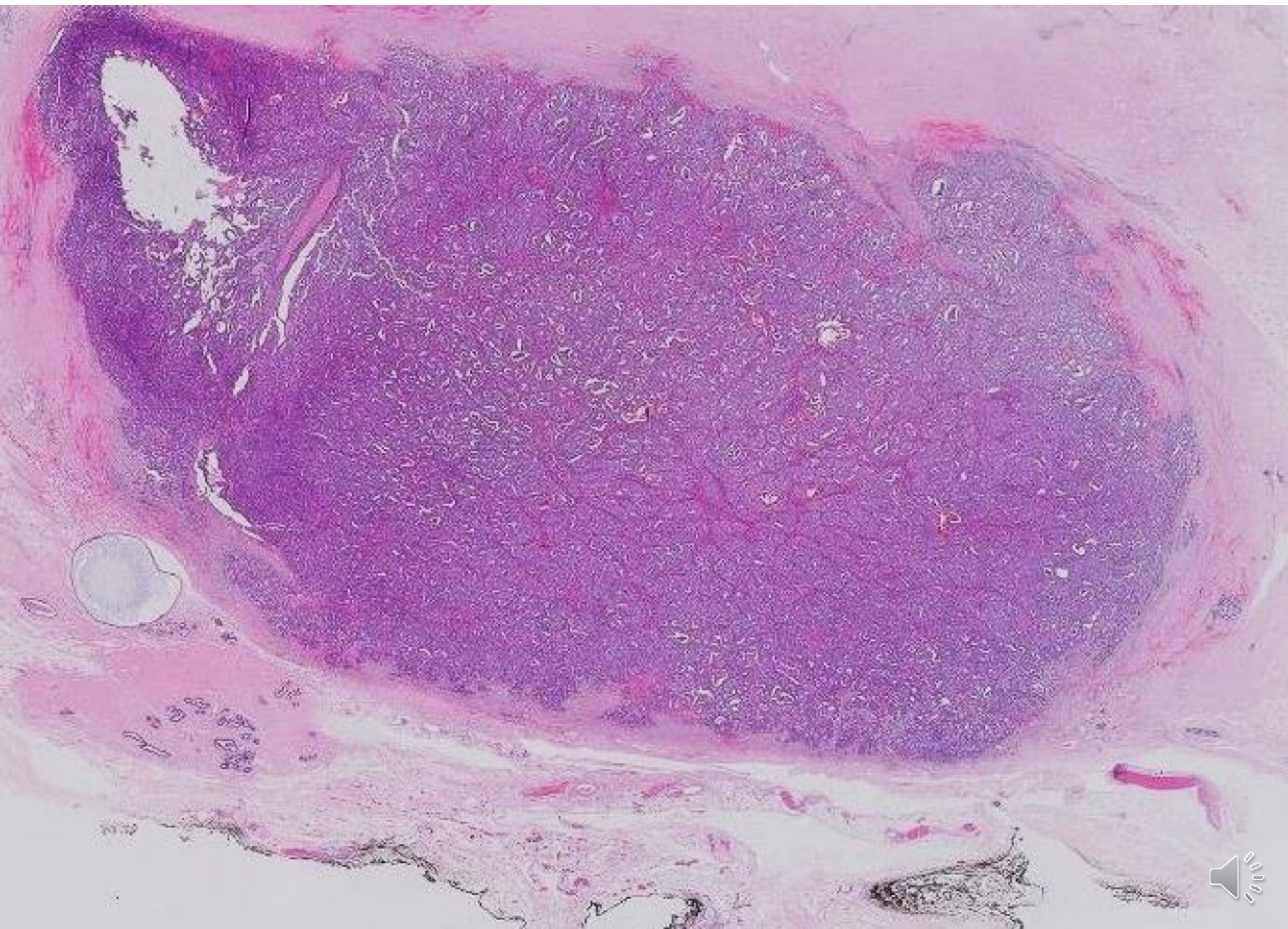


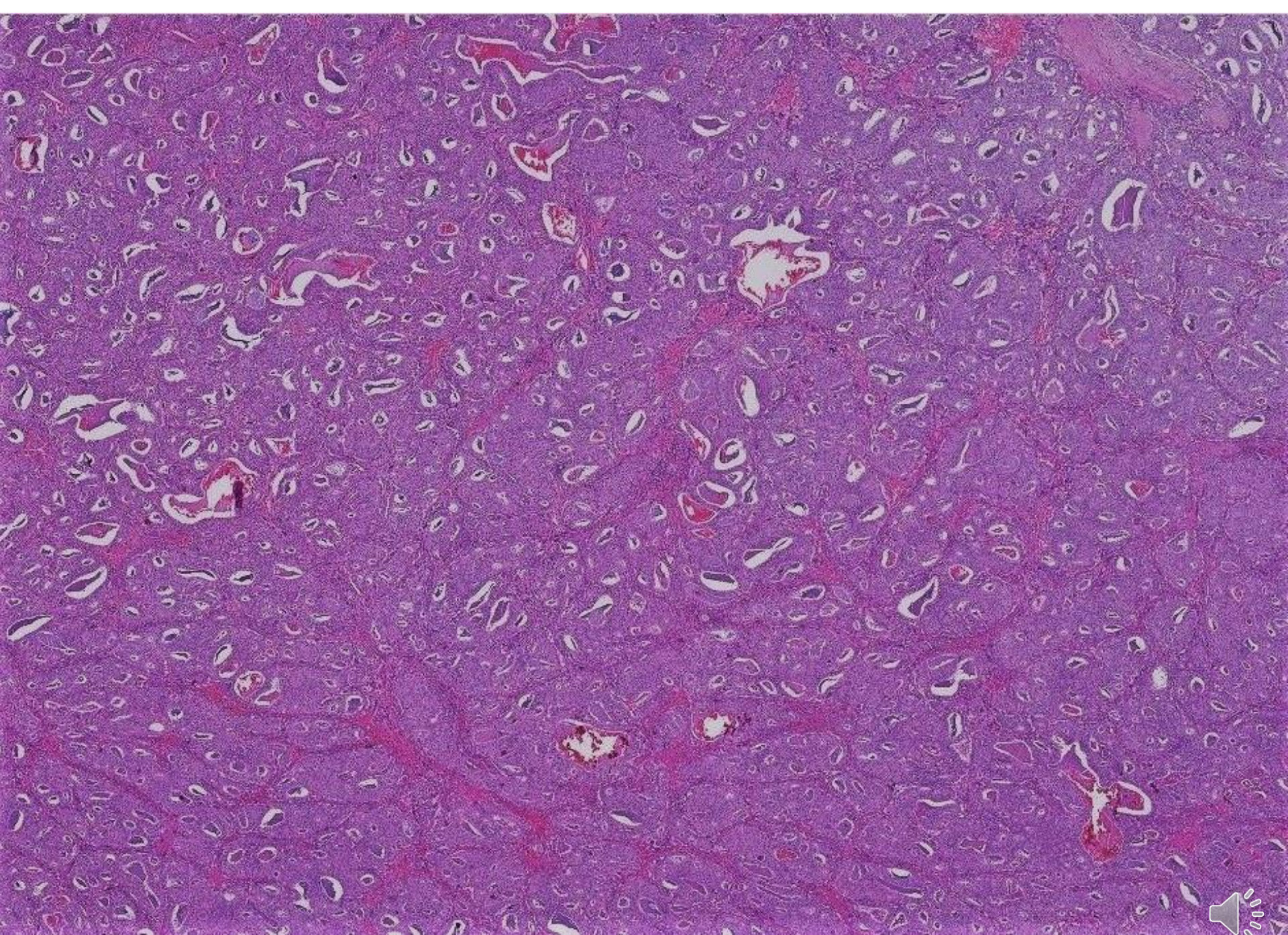
A



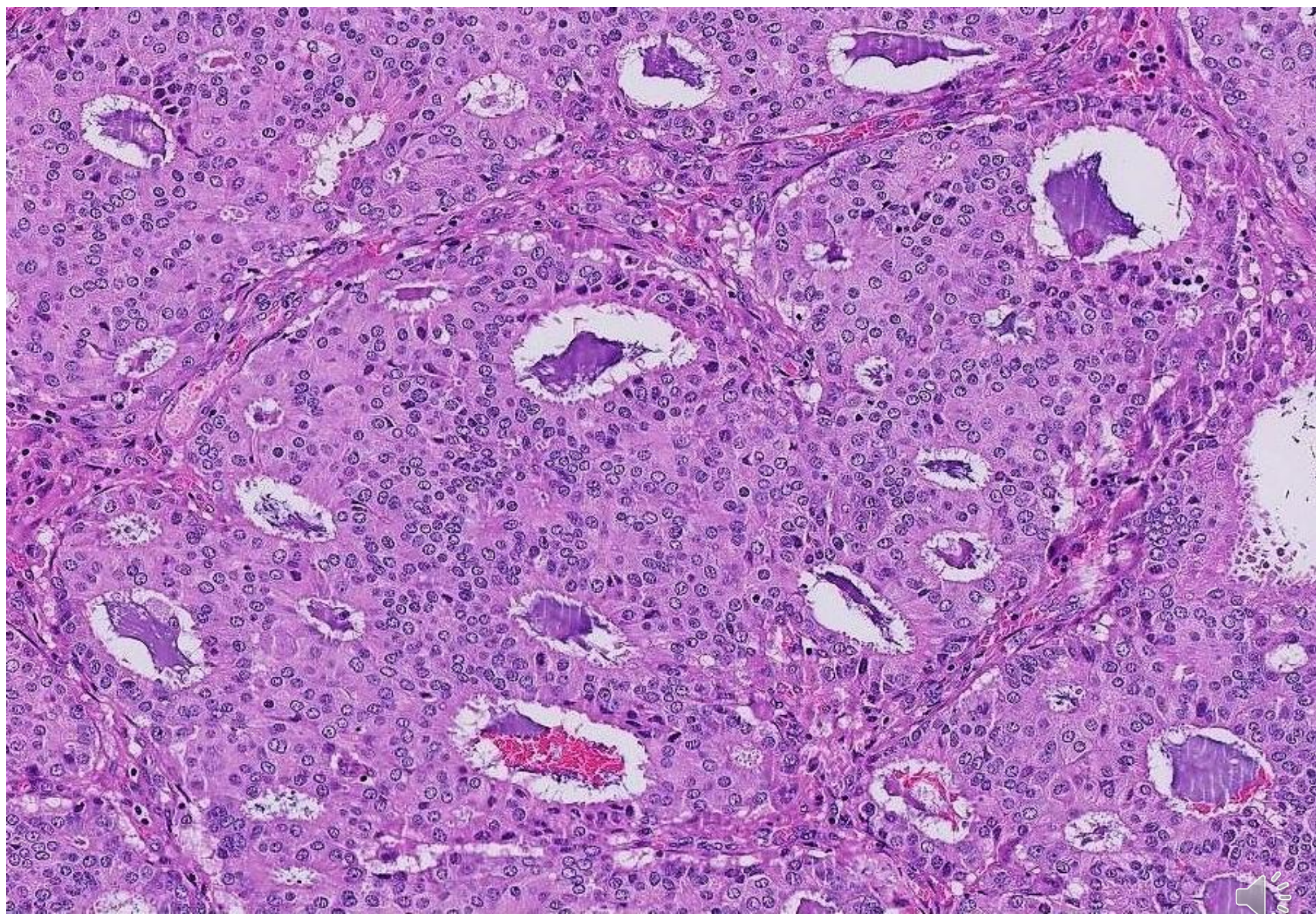
C

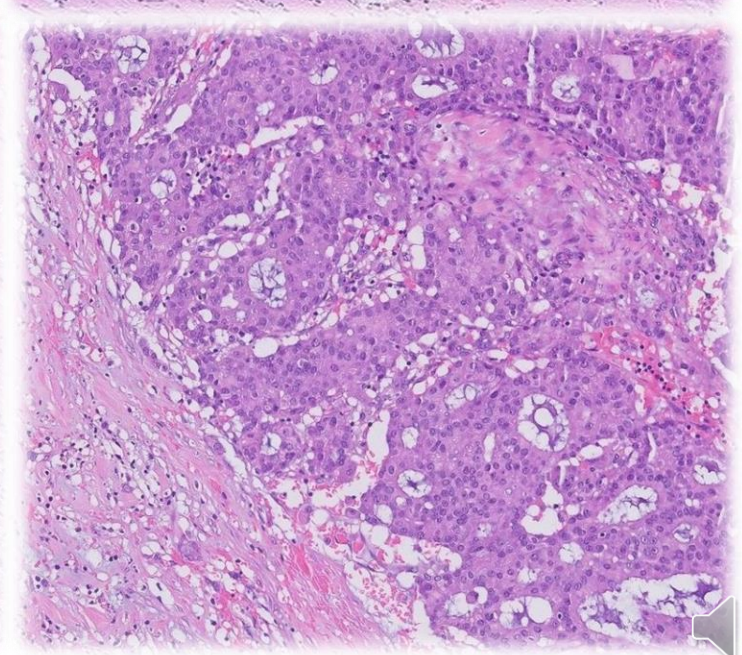
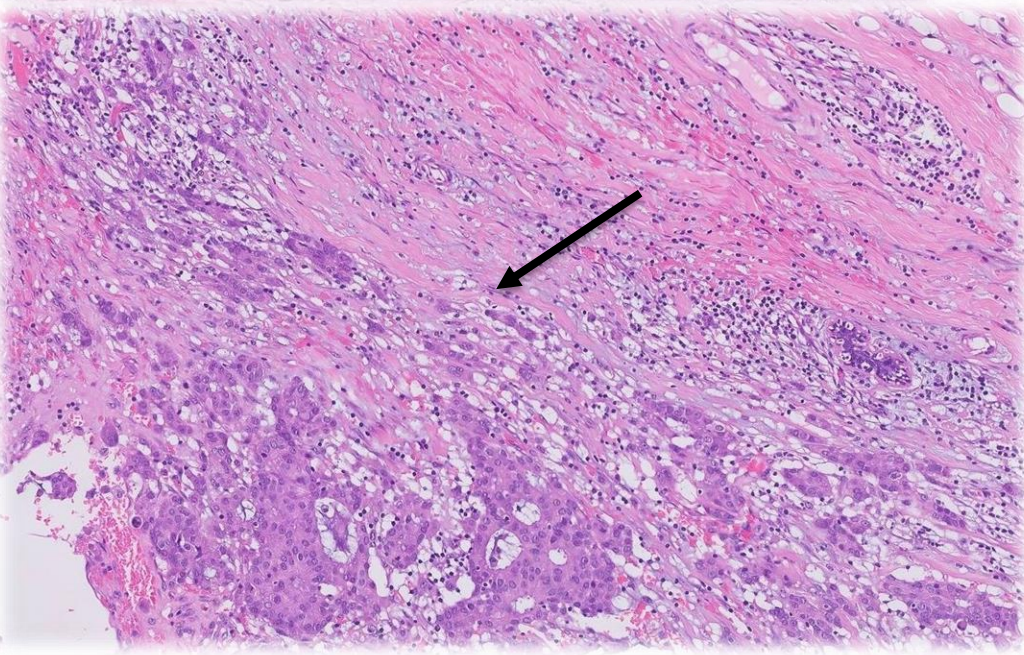
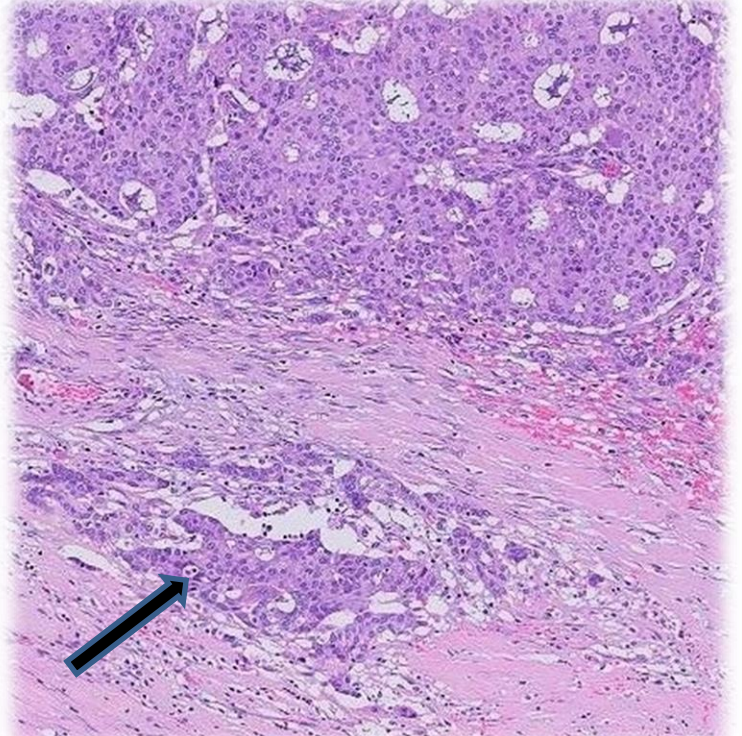
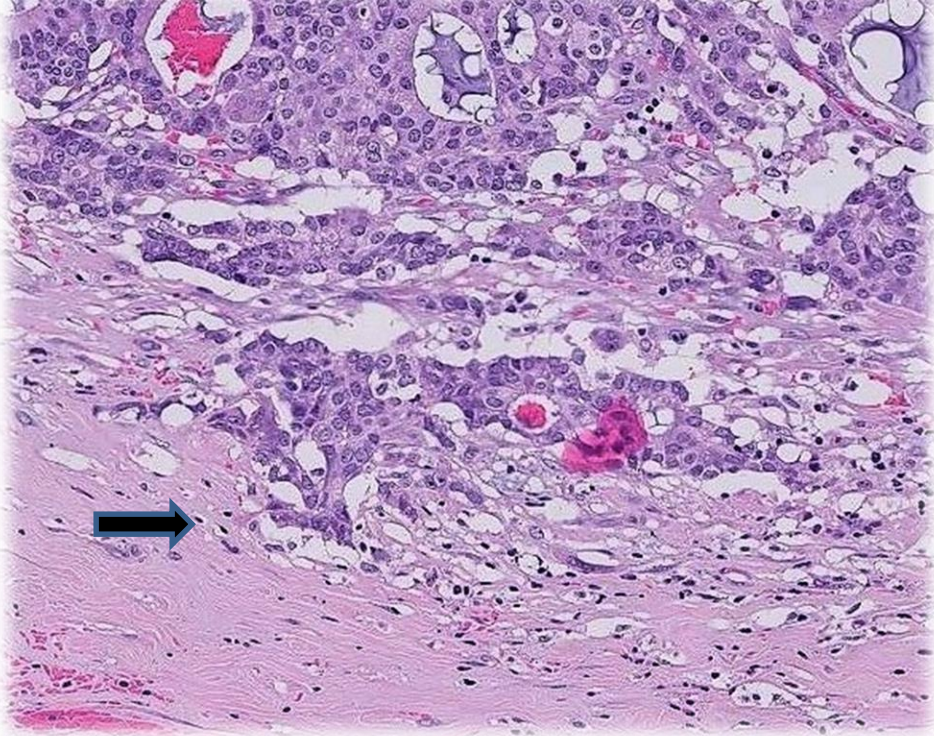


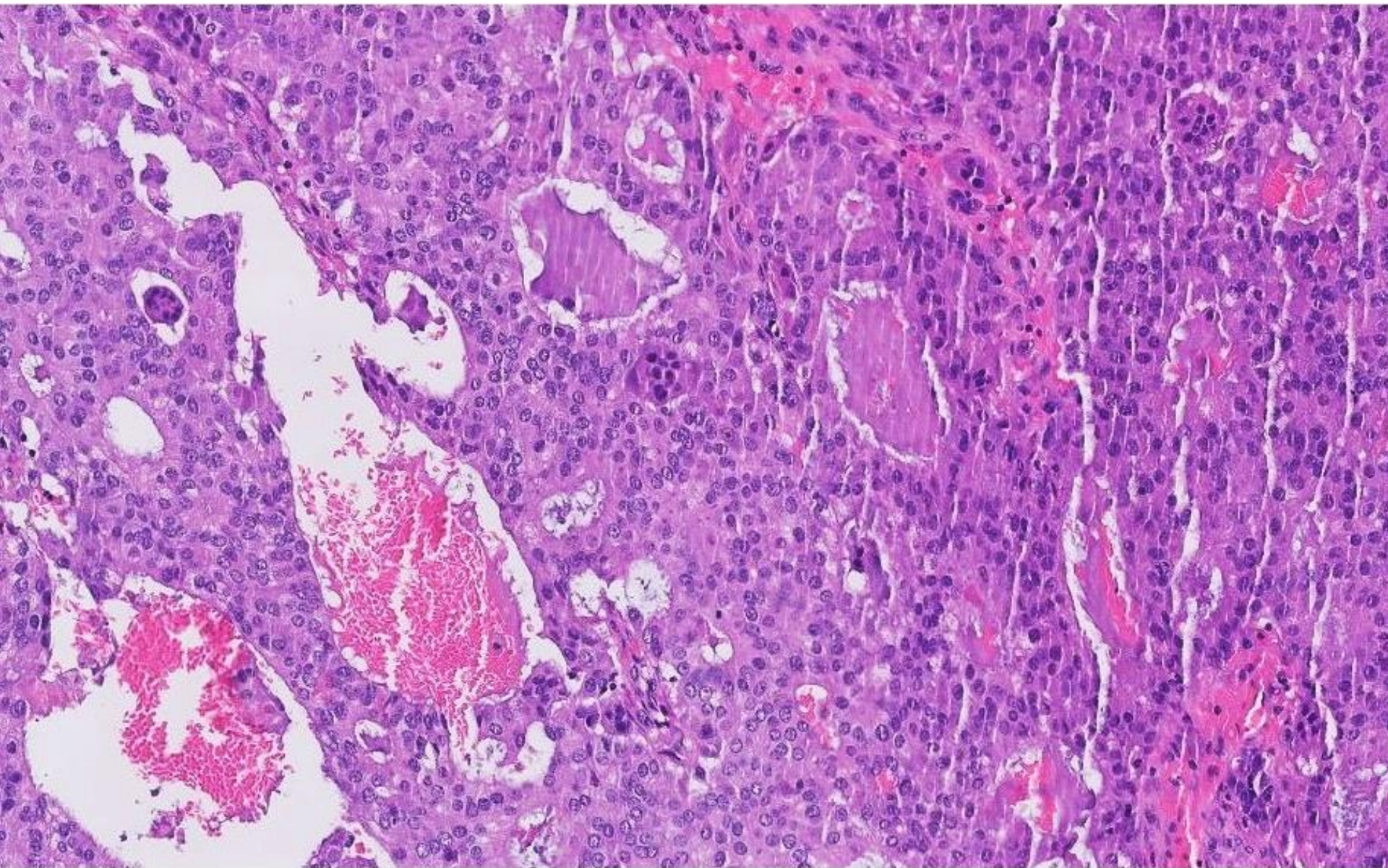


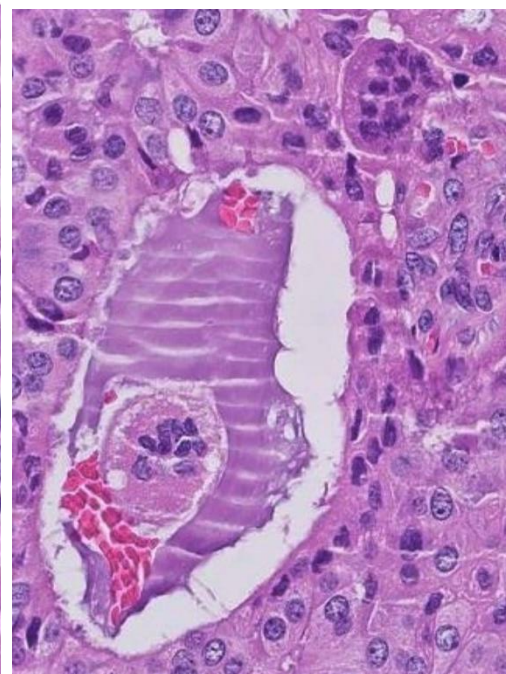
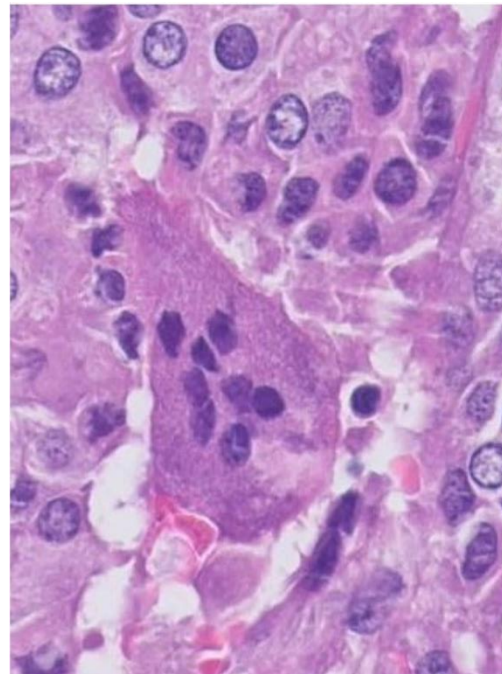
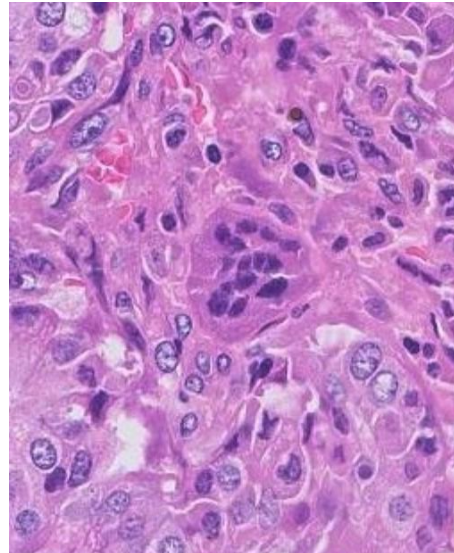
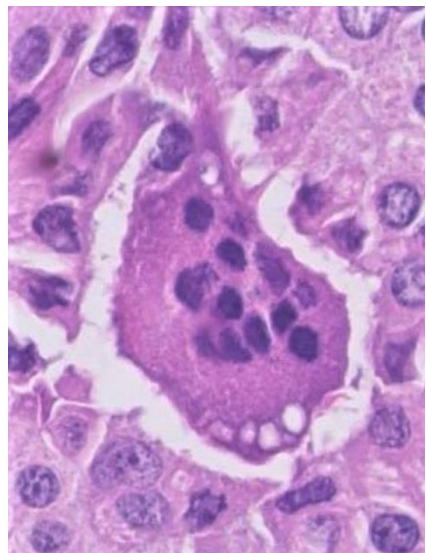
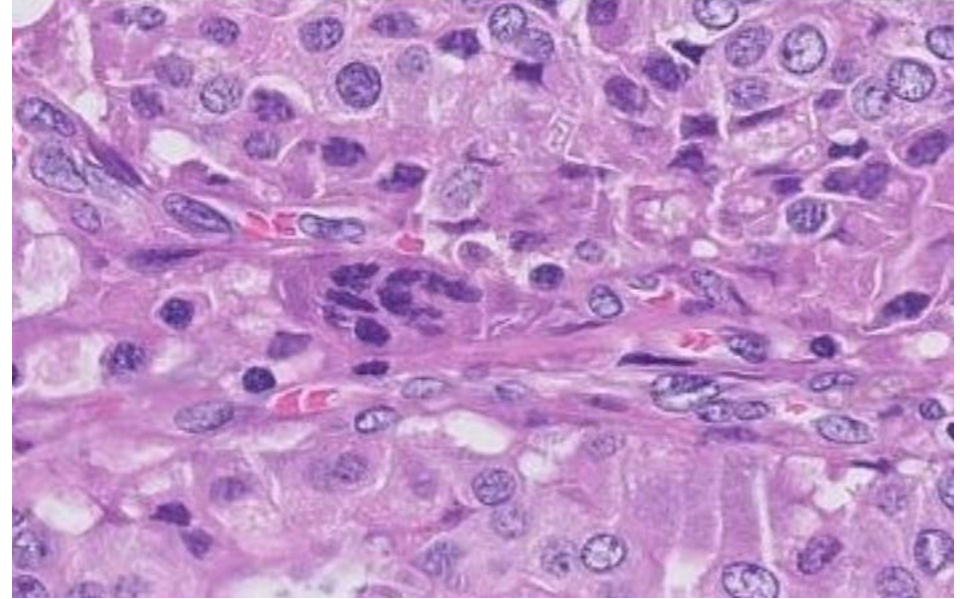
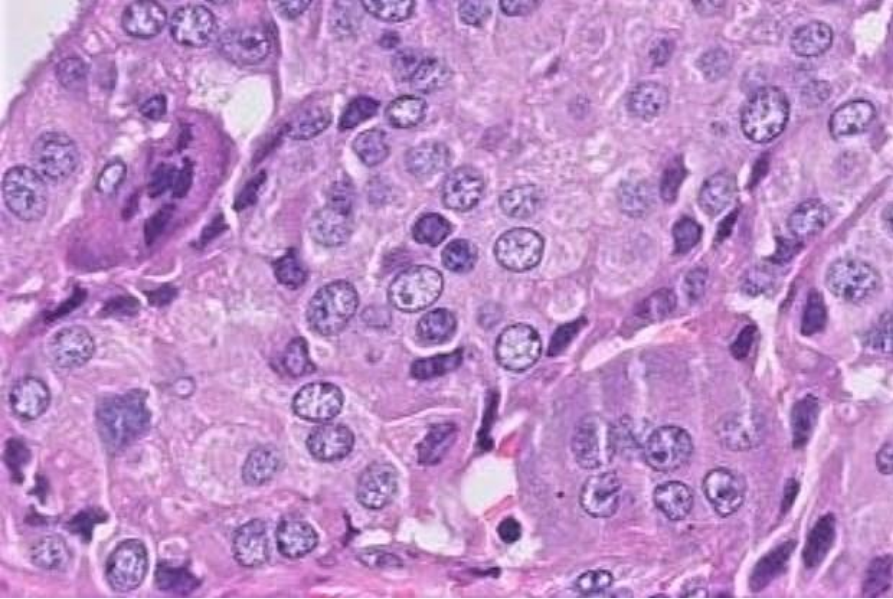












Osteoclastic giant cells



# Diagnosis

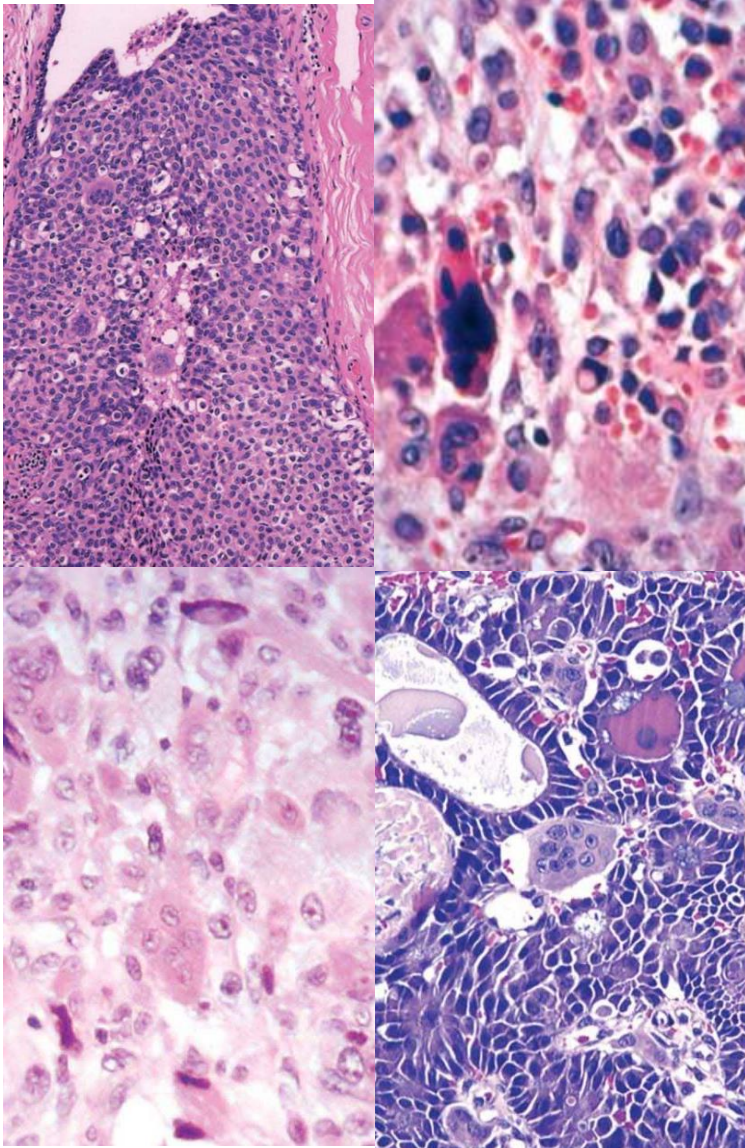
Cribriform carcinoma  
with osteoclastic giant  
cells



# Mammary Ca with osteoclastic giant cells

- First described in 1979 Rosen .
- Clinically show no specific features.
- Macroscopically can typically have a brown/ reddish brown appearance with discrete margins.
- Cribriform pattern of the Ca is relatively common.
- There may be associated low grade DCIS.
- Can be seen in the metastatic deposits.





Carcinomas with accompanying osteoclastic giant cells

- Tubular.
- Papillary.
- Lobular.
- Neuroendocrine.
- Apocrine.
- Mucinous.
- Metaplastic Ca with areas of osseous and cartilagenous differentiation



# Osteoclastic giant cells

- 20-180 um with abundant cytoplasm, many evenly distributed centrally located oval nuclei some with tiny nucleoli.
- Edge of the carcinomatous glands, intervening stroma or in the glandular lumina.
- Stroma shows histiocytes and extravasated RBC's and hemosiderin Recurrent → haemorrhage.
- Fibroblastic proliferation, angiogenesis and lymphocytes in the stroma.



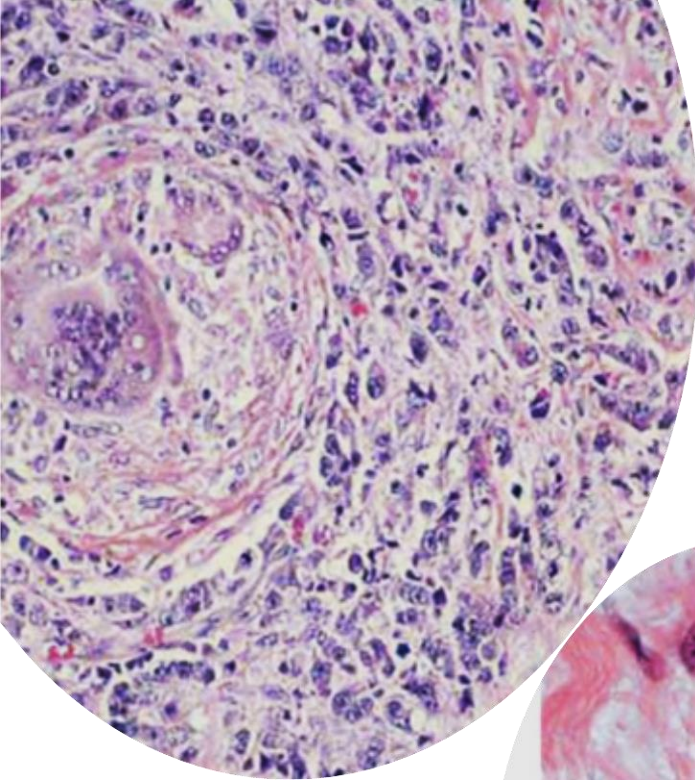


# Pathogenesis

- Factors released by Ca cells induce formation of giant cells , haemorrhage and angiogenesis (Interleukin-1; VEGF).
- CD68 ( histiocytic origin) not epithelial.



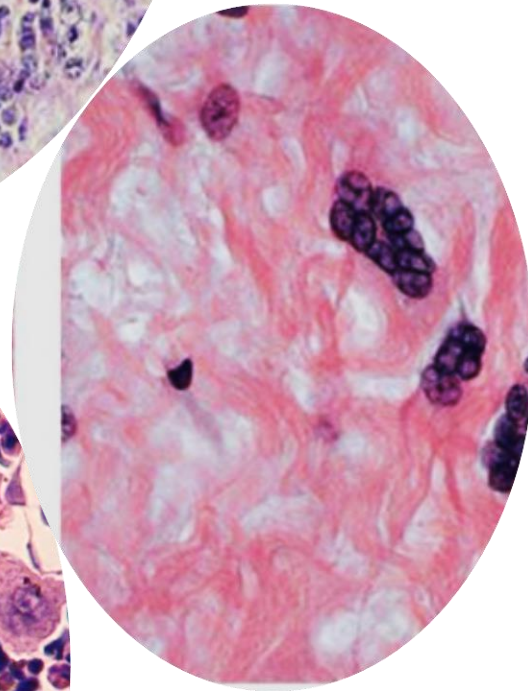
# Differential Diagnosis



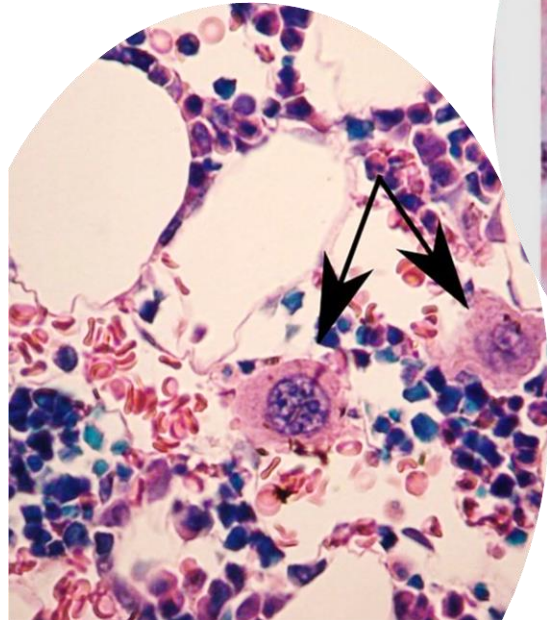
1. **Megakaryocytes** ( myeloid metaplasia).

2. **Giant cells** seen in **Granulomatous inflammation**

- **GM**
- **Sarcoid**



3. **FEL'S** ( **Multinucleate stromal giant cells**).



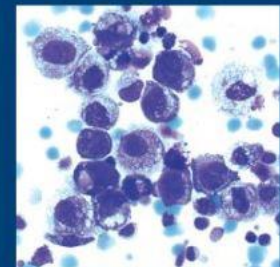
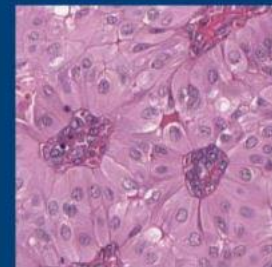
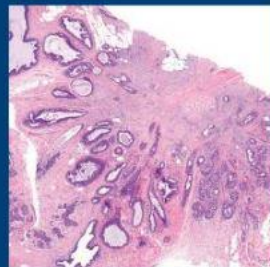
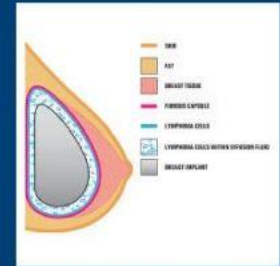
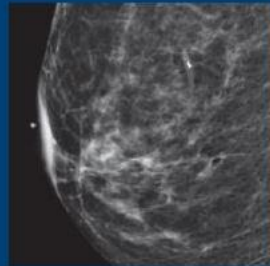
Hoda, Syed A. *Rosen's Breast Pathology*. Wolters Kluwer Health, 2014. [VitalSource Bookshelf].

## References

WHO Classification of Tumours • 5th Edition

## Breast Tumours

Edited by the WHO Classification of Tumours Editorial Board



# Thank You

