BREAST DISEASES;

PATTERN AT LUMHS, 10 YEARS EXPERIENCE OF CONSECUTIVE REFERRALS TO PUBLIC SECTOR MEDICAL UNIVERSITY AT HYDERABAD /JAMSHORO.

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ABSTRACT… Breast lump is the common complaint of women in clinics, which includes the second leading cause of cancer deaths in women. **Objective:** The study was conducted to know the pattern of female breast diseases in our setup at Hyderabad / Jamshoro. **Design:** A descriptive Study. **Setting:** Liaquat University of Medical and Health Sciences, Jamshoro. **Material & Methods:** Descriptive study **Setting:** It was conducted in the department of pathology, Liaquat University of Medical and Health Sciences, Jamshoro. **Period:** Ten years from January 2001 to December 2010. **Results:** Total of 2693 breast biopsies and mastectomies specimen included in this study, of which 278(10.32%) fibrocystic changes, 507(18.83%) inflammatory, 983(36.5%) benign and 889(33.01%) malignant. **Conclusions:** Benign Breast disease; fibroadenoma was the most common lesion. Infiltrating ductal carcinomas were next frequent, which reached hospital at late stage of disease.

Key words: Breast Disease, Fibroadenoma, Infiltrating Ductal carcinoma.

INTRODUCTION

Breast is an organ of female beauty and pride. From puberty to death breast is subjected to constant physical and physiological alterations, which are related to menses, pregnancy and menopause.

Breast cancer is the second leading cause of cancer deaths in women. Though it is one of the most dreadful diseases of women yet most of the patients suffer from benign breast lesions. Awareness about breast cancer and anxiety compels women to presume every symptom in the breast as cancer, which brought patient in out patient clinics; delay in diagnoses increases patient anxiety. Even with better access to early diagnosis and optimal treatment women of low socioeconomic status (SES) have higher risks of death from their disease than those of high SES.

Most of the reporters in Pakistan either focused on malignant diseases or benign breast diseases. This study is design to see the pattern of various breast diseases in Pakistan, particularly in low privileged population of lower Sindh.

This study is of longer duration and includes larger numbers of patients. The aim of study was to find out magnitude of various female breast diseases present as lump in breast.

MATERIAL AND METHODS

This study includes 2693 biopsy specimens of lump in female breast or mastectomies, received in the department of pathology Liaquat University of medical and health sciences Jamshoro / Diagnostic and research lab Hyderabad. They were preserved in 10% Formalin. 3-5 Representative sections were taken and processed for routine hematoxylin and eosin staining, wherever needed PAS and trichrome stains were used.

Specimen of male breast and autolized tissue were excluded form study.

The lesions were classified as No significant disease, fibrocystic changes, inflammatory lesions, benign disease and malignant tumors.

RESULTS

A total of 2693 cases with breast Lump were included in the study during ten years from Jan 2001 to December 2010. Of these 36 (1.33%) showed no significant pathology, 278 (10.32%) fibrocystic changes, 507 (18.83%) inflammatory, 983 (36.50%) benign and 889 (30.01%) were malignant lesion.

The distribution of breast lesions is shown in Table I. Overall benign diseases were the commonest lesion (36.5%), among them fibroadenoma was most common (32.6%), others include benign phylloides tumor 1.6%(43), lactating adenoma 1.2% (32), intraductal papilloma 0.7 % (19), lipoma 0.4% (11).

Malignant lesions were ranked 2nd in frequency (33%). Among them invasive ductal carcinoma was commonest 29.3 % (789). Others include invasive lobular carcinoma 1.4 % (38), medullary carcinoma 0.8% (21), papillary carcinoma 0.6% (16) , mucinous carcinoma 0.5 %(14) , and malignant phylloides tumor 0.4% (11).

Inflammatory diseases ranked third (18.83%) in our study, among them breast abscess was most frequent lesion 7.9% (213). Next was chronic mastitis 1.8% (48) and fat necrosis 0.5% (14).

Fibrocystic changes ranked fourth (10.32%), in which cystic changes with and with out apocrine metaplasia was 6.8% (183), predominant fibrosis 1.7 % (46) and adenosis 1.8% (49).

1.33% (36) biopsies showed no significant pathology.

Table-I. Pattern of Breast Diseases with relative frequencies

Types of lesions	No. of patients	%age
Inflammatory lesions		
Breast abscess	213	7.9
Chronic mastitis	143	5.3
Granulomatous mastitis	48	1.8
Ductectasia	89	3.3
Fat necrosis	14	0.5
Total inflammatory lesion	507	(18.83%)
Fibrocystic changes		
Cysts	183	6.8
Fibrosis	46	1.7
Adenosis	49	1.8
Total fibrocystic changes	278	(10.32%)
Benign lesion		
Fibroadenoma	878	32.6
Lactating adenoma	32	1.2
Intra ductal papilloma	19	0.7
Lipoma	11	0.4
Benign phylloides tumor	43	1.6
Total benign lesion	983	(36.5%)
Malignant lesions		
Invasive ductal carcinoma	789	29.3
Invasive lobular carcinoma	38	1.4
Medullary carcinoma	21	0.8
Invasive papillary carcinoma	16	0.6
Mucinous carcinoma	14	0.5
Malignant phylloides tumor	11	0.4
Total malignant lesion	889	(33.01%)

DISCUSSION

Breast is a modified sweat gland with unique anatomic composition, sensitivity to hormonal alteration and the ability to change the size and consistency. Though it has an exposed location, amenable to physical examination yet the lesion might be hidden for a long time before discovery particularly in this part of world where additional social and religious factors play a role. The fear of breast cancer being the most common malignant tumor in women might stimulate them for regular self examination which will not only help in discovering breast lump that are malignant in nature but benign lesions which are more common, particularly in young age groups.

A palpable breast lump is a common presentation in out patient department. It is well accepted dictum that all lumps in breast are malignant unless proved otherwise on histopathology. In our study, the most common lesions found in female breast were benign lesion (36.50%), followed by malignant (33.01%), inflammatory (18.83%), and fibrocystic changes (10.32%) respectively.

The cause of this high frequency of fibroadenoma in our women is not clear but racial and geographical predisposition could be a factor.

Fibroadenoma was the most frequent histopathological diagnosis 878 (32.6%) in our study this is higher then reported frequency in England (7.7%),[2] and the USA (18.5%)[16]. Our study co-relate with studies in Pakistan; Nazar Hussain et al. (35.1%)[11], Usha et al. (24%)[14], Tariq Wahab Khanzada et al (27%)[13]. Farkhunda Jabeen Dahri et al. (29%),[3] Nasir Malik et al (41%)[9] and Aisha Memon et al (29.4%)[1]. Our study is also in concordance with study in India[8], Saudi Arabia[7], Nepal[6].

Malignant lesion in our study comprised of 889 (33%). Infiltrating ductal carcinoma (29.3%) was the next common in our study; it is also 2nd most common lesion in other studies in Pakistan. Nasir Malik et al (28.4%), Usha et al (30%), Breast cancer reported in Saudi Arabia was less as compared to our study; Mona A Al Nazar reported (15%)[10] Lawrence C. Chiedozi et al (8.6%)[7]. The reason for this is not clear but may be due to natural shyness and reluctance of their female to present with painless or bearable complaints in relation to a personal anatomical organ or this disease may not common there with the bless of God . Incidence of malignant lesions was also less in Nepal (18.7%)[12], and in India (21%).

Breast abscess comprised 7.9%, which was near to study in Karachi by Nazar Hussain et al 7.16%, Tariq Wahab et al (16%), Nasir et al (8.9%). In Saudi Arabia, Mona A Al Nazar (4.2%) Lawrence C Chiedozi et al (36%), in Nepal Khans et al (24%)[5].

In our study fibrocystic changes were 10.32%. This is the most common breast lesion in studies from USA (33.9%) and UK (37%). It co-relate with studies in Pakistan like Nazar Hussain et al (16%), Nasir et al (6.7%), Lawrence et al in Saudi Arabia (4%).

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Article received on: 28/12/2011 Accepted for Publication: 12/03/2012 Received after proof reading: 10/05/2012

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Article Citation:
Shaikh NA, Ujjhn I, Chang F, Rajput JA. Breast diseases; pattern at LUMHS, 10 years experience of consecutive referrals to public sector Medical University at Hyderabad/Jamshoro. Professional Med J Jun 2012;19(3): 356-359.

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Every man loves two women;t
he one is the creation of his imagination
and the other is not yet born.

Kahlil Gibran