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Case series of rare breast diseases and their unusual presentation

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Introduction: Primary breast lymphoma is a malignant lymphoma primarily occurring in the breast in the absence of previously detected lymphoma. PBL is a rare disease, accounting for only 0.4-0.5% of all breast malignancies. The median age of patients with diagnosed PBL ranges from 60 to 65 years. This rare condition is especially observed during pregnancy or postpartum, suggesting that tumor growth is influenced by hormonal stimulation. Tuberculous Mastitis (TM) is a rare extrapulmonary presentation of tuberculosis accounting for less than 1% of all diseases of the breast. The disease is very rare in males. The most common clinical presentation of tuberculous mastitis is that of a solitary, ill-defined, unilateral hard lump, difficult to differentiate from carcinoma. The lesion may progress into a breast abscess with or without a discharging sinus or TB ulcer. Idiopathic Granulomatous Mastitis (IGM) is an uncommon chronic inflammatory condition of the breast that clinically mimics breast abscess or carcinoma. The etiology is unknown with variable clinical presentation; it is a diagnosis of exclusion. FNAC, core needle biopsy, USG or MRI may help in diagnosis. Histologically, it shows non caseating granulomas with chronic inflammatory cells. Melanoma is the most rapidly increasing cancer in Caucasians, and 20% of patients diagnosed with melanoma will develop metastasis via hematogenic or lymphatic routes. Melanoma can spread to lymph nodes, secondary sites in the skin, and distant organs such as the breast. Melanoma in the breast could be primarily in the breast skin, primarily in the breast tissue, metastasis in the breast, or in-transit metastases to breast tissue and breast skin. Metastasis is more common in the outer half of the breast because of good vascularity and the presence of more glandular tissue. Autoimmune mastitis is a rare condition where patients with other autoimmune disorders present with breast abscess or features of mastitis. It is due to antigen-antibody reactions. Prolonged corticosteroid use in patients with autoimmune disorders could be a risk factor for developing breast abscess due to immunocompromised state.

Aims & Objectives:

- To discuss the clinic pathological features of rare conditions of the breast
- To discuss their management & prognosis

Methodology: The cases which presented to JSS, Hospital with features of breast malignancy, mastitis & breast abscess were investigated by imaging modalities & histopathological examinations. Treatment was carried out based on histological report accordingly & data compiled.

Conclusion: All cases of suspected breast malignancy, mastitis & breast abscess should be adequately investigated. Histopathological confirmation or appropriate cultures should be obtained in all cases & treatment should be planned accordingly.

Biography

Sariya Mohammadi completed her MBBS from KMC, Mangalore under Manipal University in 2013 and now pursuing her masters in general surgery at JSS University, Mysore. She was selected for the ICMR STS in 2009 and have a publication titled 'streptococcus pseudopneumoniae: An emerging respiratory tract pathogen' in the Indian Journal of Medical Research Nov 2012. She is interested in research work and would like to continue it and wish to publish more articles in the future.

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