

Evaluation of patients with breast cancer according to histopathological types

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Abstract

Introduction

It is known that invasive breast carcinoma consists ductal or lobular structures. However, currently, only about 10% are classified as specific types. Some of the histopathological subtypes have characteristic features in the terms of prognosis.

Material&Methods

We evaluated non metastatic invasive breast carcinoma patients according to age, menopausal status, histopathological subtype, hormone receptor status, stage and HER 2 status.

Results

A total of 77 patients were included in the study. In the group of Invasive Ductal Carcinoma (IDC), 53 patients (68.8%) had a mean age of 55.2 (range 35-83). 36 of them (69%) were post menopausal, 17 (31%) were premenopausal. Staging of these patients were Stage I, II and III 10, 28 and 15 respectively. 43 patients (81%) had positive estrogen (ER) or progesterone receptor. Seventeen patients (32%) had positive and 29 (53%) had negative HER 2 status

Nine patients (11.6%) with the mean age of 56.1 (range 34-76) were invasive lobular carcinoma (ILC). Only three of them (33.3%) were premenopausal. Staging of these cases were Stage I, II and III 1, 5 and 3 respectively. All of ILC patients had ER or PR positive. Additionally three patients had positive and four patients were negative HER 2 status

There were seven cases (9%) with mixed type (lobular +ductal or any other of these two histologic type of tumor) of breast carcinoma. Only 2 patients were premenopausal. Mean age were 56.4 (36-71). All of them had positive with ER or PR while 3 cases were HER 2 status positive.

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There were eight patients (%10,3) as specific types including two neuroendocrine carcinoma, two intracytic carcinoma, two medullary carcinoma, one papillary breast cancer and one occult breast carcinoma.

Discussion

We identified consistent rates with the literature on the analysis of histopathological subtypes. Furthermore, hormone receptor positivity was also consistent with the literature as ILC was higher than IDC.



Evaluation of patients with breast cancer according to histopathological types

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Introduction:

It is known that invasive breast carcinoma consists ductal or lobular structures ¹. However, currently, only about %10 are classified as specific types. Some of the histopathological subtypes have characteristic features in the terms of prognosis ².

Material&Methods:

We evaluated non metastatic invasive breast carcinoma patients according to age, menopausal status, histopathological subtype, hormone receptor status, stage and HER 2 status.

Results:

A total of 77 patients were included in the study. In the group of Invasive Ductal Carcinoma (IDC), 53 patients (%68.8) had a meanage of 55,2(range 35-83). 36 of them (%69) were post menopausal, 17 (%31) were premenopausal. A total of 16 patients were no axillary lymph node metastasis. As N stage classification, 22 patients were N1, seven patients were N2 and eight patients were N3. Staging of these patients were Stage I, II and III 10, 28 and 15 respectively. 43 patients (%81) had positive estrogen (ER) or progesterone receptor. Seventeen patients(%32) had positive and 29 (%53) had negative HER 2 status

Nine patients (%11.6) with the meanage of 56,1 (range 34-76) were invasive lobular carcinoma (ILC). Only three of them (%33,3) were premenopausal. In 4 of the patient axillary lymph node metastasis were not found. As N stage classification three of them were N1, one of them was N2 and one of them was N3. Staging of these cases were Stage I, II and III 1, 5 and 3 respectively. All of ILC patients had ER or PR positive. Additionally three patients had positive and four patients were negative HER 2 status.

There were seven cases (%9) with mixed type (lobular +ductal or any other of these two histologic type of tumor) of breast carcinoma. Only 2 patients were premenopausal. Meanage were 56,4 (36-71). All of them had positive with ER or PR while 3 cases were HER 2 status positive.

There were eight patients (%10,3) as specific types including two neuroendocrine carcinoma, two intracytic carcinoma, two medullary carcinoma, one papillary breast cancer and one occult breast carcinoma.

Discussion:

We identified consistent rates with the literature on the analysis of histopathological subtypes ². Furthermore, hormone receptor positivity was also consistent with the literature as ILC was higher than IDC ³.

Key words: Breast cancer, histopathological subtypes, surgical treatment

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