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Original Research Article

# Histomorphological Variation of Breast Lump in Lumbini Zone of Nepal

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#### **ABSTRACT**

**Background:** Breast lump can present as inflammatory to neoplastic lesion. Any kind of lesion present in breast makes anxiety to patient for cancer. Histopathology is key for confirm each lesion.

**Objective:** This study is aimed to observe histomorphological variation of excised breast lump in Lumbini zone of Nepal.

**Materials & methods:** Prospective descriptive study was done from April 2016 to October 2016 of excised 54 cases of all female breast lumps in National Path Lab, Rupendehi, Nepal. FNAC and excised male breast lump were excluded from the study.

**Results:** The entire excised breast lumps were categorized as Inflammatory, Non-neoplastic and Neoplastic. Neoplastic is classified as Benign and Malignant lesion. Out of 54 cases aged from 15 -72 years, Fibroadenoma, Fibrocystic Disease, Abscess/Mastitis and Invasive Ductal Carcinoma was dominant lesion of each categories. Fibroadenoma, Fibrocystic Disease with equal frequency of 25.92%, Abscess/Mastitis and Invasive Ductal Carcinoma was 22.22% and 7.40% respectively

**Conclusion:** Malignant lesion was least common of each category with predominance of Invasive Ductal Carcinoma 7.40% .Invasive Ductal Carcinoma was prevalent in 7<sup>th</sup> decades.

**Key words:** Breast Lump, Fibroadenoma, Histopathology

#### INTRODUCTION

Breast is organ which can change according to marital status and age of patient. (1) Due to awareness of patient, for any palpable breast swelling, pain and discharge from breast make anxious to patient for malignant lesion. (2) Most common cancer of female in western world is breast cancer and is most common cause of death in 4<sup>th</sup> to 6<sup>th</sup> decades. (1)

Lesions in breast varied according to age group and carcinoma of breast is extremely rare before 2<sup>nd</sup> decades and is

rises after this age and almost 20% upto 9<sup>th</sup> decade. (1) Incidence of breast cancer in Asian patient are more commonly seen in younger age group compare to western and nearly one fourth breast cancer in young age. (3) Benign breast lesion are most common lesion of all breast lesion of earlier age group, among them most common were Fibroadenoma and Fibrocystic disease. Despite knowing this excision biopsy is performed to rule out malignant lesion. (4)

Most of lesions are diagnose on the basis of clinical history, physical

examination, FNAC, ultrasonography, mammographic findings and histopathology correlation. (2,5) Among all such technique biopsy is gold standard for confirmation of diagnosis. (6) This study is carried out to observe the histomorphological profile of all types of breast lump in Lumbini zone of Nepal.

### **MATERIALS & METHODS**

Prospective study from April 2016 to October 2016 received 54 excised biopsy specimen of breast of all age group of female in histopathology department of National Path Lab Butwal, Rupendehi, Nepal. FNAC case and male was excluded from study. Hematoxylin & Eosin staining of section were performed according to manual methods and observed under the

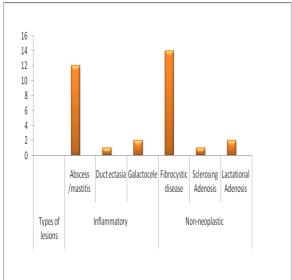
light microscope. The data were tabulated in Microsoft excel 2007 and was analyzed by SPSS 16.

#### RESULT

The result of present descriptive study is categorized into three categories Inflammatory. Non-neoplastic Neoplastic. Dominant lesion was Neoplastic 22(40.74%). Neoplastic is again divided into Benign and Malignant lesion and most common lesion was Benign and Fibroadenoma was most prevalent which is 14 (25.92%). Similarly, in Inflammatory and Non-neoplastic categories, Abscess/ Mastitis and Fibrocystic diseases was 12(22.22%) and 14(25.92%) respectively and were shown below in Table 1, Fig 1 and Fig 2.

Table 1: Histopathological finding in different age group (N= 54)

Type of lesion	Total Number of cases and	Age group						
	percentage (N=54)	10-20	21-30	31-40	41-50	51-60	61-70	>71
Inflammatory	15 (27.77%)							
Abscess /Mastitis	12 (22.22%)	2	8		1			1
Duct ectasia	1 (1.85%)				1			
Galactocele	2 (3.70%)		2					
Non-neoplastic	17 (31.48%)							
Fibrocystic disease	14 (25.92%)	4	2	5	2	1		
Sclerosing Adenosis	1 (1.85%)		1					
Lactational Adenosis	2 (3.70%)		2					
NEOPLASTIC	22 (40.74%)							
Benign	17 (31.48%)							
Fibroadenoma	14 (25.92%)	6	7	1	0	0		
Myofibroblastoma	1 (1.85%)	1						
Intraductal papilloma	1 (1.85%)					1		
Lactating adenoma	1 (1.85%)		1					
Malignant	5 (9.25%)							
Invasive Ductal carcinoma	4 (7.40%)				1	1	2	
Invasive lobular carcinoma	1 (1.85%)				1			





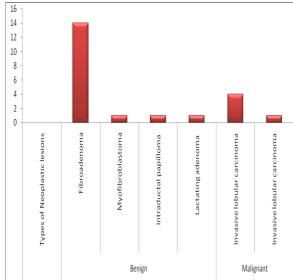


Fig 2: Bar diagram of neoplastic lesion

#### **DISCUSSION**

The majority of breast disease patient in Nepal were female. Present study was prospective study and highlighted on frequency percentage and with histomorphological changes of Inflammatory, Non-neoplastic and Neoplastic lesion of specimen sent in National Path Lab, Butwal Nepal. This study was compatible with the study done by Abdul Kader M Albasri et al in reference to most common lesion of these entire Benign and Nonneoplastic lesion showing Fibroadenoma 44.3% and fibrocystic disease 23.4%. Present study showing Benign and Malignant ratio was 4.4:1. (3) In Malignant lesion, most dominant were Invasive Ductal Carcinoma 7.40% is consistent with study done by Shirley SE et al showed 69.5%. (7) The number of frequency is low this is because of less number of cases and short duration of study. Present study showed that dominant type of carcinoma is Invasive Ductal Carcinoma which is 7.40% and other is Invasive Lobular Carcinoma 1.85% and study done by Khokher S et al showed the frequency was 91% of Invasive Ductal Carcinoma and 2% had Invasive Lobular Carcinoma which is also concordance with this study. (8) Similar study done by Abu Khalid et al also showed that Invasive Ductal Carcinoma is the dominant lesion among the malignant lesion with frequency of 7.9% is also consistent with present study. (9) There is no any significant histopathological difference between types of Breast Carcinoma despite short duration of study. Among Benign, Nonneoplastic and Inflammatory lesion prevalence of Fibroadenoma and Fibrocystic Disease was with equal frequency 25.92% and Abscess/Mastitis 22.22% respectively and were most common lesion of each category. This study is about similar in prevalence with study of Abu Khalid et al showing that Fibroadenoma, Fibrocystic Disease and Abscess were 39.4%, 18.4% and 15.9% respectively. (9) Present study revealed that Fibroadenoma and Abscess/Mastitis were seen most commonly in 3<sup>rd</sup> decade. However, Fibrocystic Disease was in 4<sup>th</sup> decade and the cases were 7, 8 and 5 respectively. Present study is concordance with study done by Abdul Kader M Albasri et al in case of Fibroadenoma. However, fibrocystic disease and Abscess/Mastitis were common in 3<sup>rd</sup> and 5<sup>th</sup> decade respectively. <sup>(3)</sup> The reason for this could be due to less sample size and short duration of study in present study.

#### **CONCLUSION**

Malignant lesion is least common of each category with predominance of Invasive Ductal Carcinoma 7.40%. Invasive Ductal Carcinoma is prevalent in 7<sup>th</sup> decades.

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