



## Study of Profile of Benign Breast Disease (Bbd) in Northeastern Region of Bihar and Jharkhand

### KEYWORDS

Benign breast disease (BBD), Mastalgia, Cyclical, non cyclical mastalgia, profile of benign breast disease.

**Dr. Rakesh kumar**

Associate Professor Department of Surgery Jawaharlal Nehru Medical College, Bhagalpur, Bihar

### ABSTRACT

*Benign breast disease (BBD) is very common disease among young females even in western countries but still there is no much studies for spectrum and profile in india. Both treating clinician as well as patients overlooks this problem. Our aim of study to categorize and evaluate the magnitude this disease in northeastern region of india by clinical examination only.*

### Introduction –

Benign breast diseases are many times more common than breast cancer in western countries. As far as India is concerned references about BBD are very less in surgical literature .in BBD mastalgia/breast pain is the most common problem noticed in both general practice as well as in hospital surgical outpatient department but it does not get proper place in surgical practice . A tendency to neglect benign breast complaints by medical professional and even patients have become universal phenomena . Moreover Indian literature tends to profile the spectrum of this disease only by histopathological examination. Many a times breast pain or mastalgia which is diagnosed clinically overlooked and ignored. The purpose of this study was to profile the incidence and spectrum of BBD amongst women population of northeastern region of Bihar and Jharkhand on out patient basis by clinical examination only to make it more realistic and highlight mastalgia/breast pain in particular.

### Material and method -

In this study total 105 patients were examined and evaluated clinically presenting with complaints of breast pain in out patient department of surgery at JawaharLal Nehru Medical college and hospital Bhagalpur ,bihar during period of January 2012 to September 2014. Cases were analyzed to determine the frequency and significance of BBD in this region, age group , breast related complaints, duration of symptoms , past history of breast diseases either benign or malignant lesion and history of any previous breast surgery, clinical diagnosis as well as menstrual and obstetric profile.the parameters of data collected involved by breast specific history taking , clinical examination of the breasts and clinical diagnosis .

Investigations included were mammography, FNAC , previous surgical notes, and any histopathological reports if available utilized to reach clinical diagnosis.

Any suspicious breast lump for malignancy were asked for triple assessment and excluded from our study.

### Results -

Among total 105 patients observed only 1 had suspicion of malignancy and 104 had BBD.

Age group – the range varied from 25 to 48 years with cyclical mastalgia was 24-48 years. The age group of non cy-

clical mastalgia was 26-65 years .thus patients with cyclical mastalgia were younger than non cyclical mastalgia.

Breast related complaints – out of 125 patients examined had breast pain 11 had lump 20 had painful and 18 presented with painless nodularity. Among all 2 patients presented with nipple discharge and in 2 patients one each had pregnancy,lactational changes and suspicion of malignancy .

Duration of symptoms – in cyclical mastalgia patients group duration noted from 3 to 8 months and in non cyclical mastalgia ranged from 1 to 13 months.

Past history of breast disease and /or any breast surgery – in cyclical mastalgia group no any patient had any history of breast disease or surgery in past. In non cyclical group only 1 had breast abscess surgery.

Family history of breast disease –there were no history noted related to breast cancer in relatives.

Menstrual and obstetric profile – 15 patients with mastalgia gave history menstrual irregularity. The majority of patients with mastalgia were premenopausal .only 2 patients in non cyclical group underwent total abdominal hysterectomy . the majority of patients with cyclical as well as those with non cyclical mastalgia had two or more children.

**Table 1- Frequency of benign breast problems**

DIAGNOSIS	NO OF PATIENTS
Mastalgia	52
Cyclical	30
Non cyclical	20
Associated nodularity	20
Painless nodularity	18
Fibroadenoma	11
Nipple discharge	02
Pregnancy and lactational changes	01
Suspicion of malignancy	01
Total	105

### Discussion –

The cyclical perimenstrual changes that occurs in the breast are so often accompanied by discomfort and that are thought to be normal .however if the intensity of the pain or the duration of pain interferes with the quality of

life . if so occurs it is placed in the class of aberration as per ANDI classification. In the rare instances when mastalgia is severe or resistant to treatment it is placed under the category of a disease within the ANDI framework.

It has been noted that the attitude of both treating clinician and patients mastalgia continues to be ignored in non western populations and this is also in India as well, with few notable exceptions. Shukla and Khanna and colleagues from Varanasi have drawn attention to the significant incidence of mastalgia. It accounts for about 70 % of all BBD estimated. In their studies both found incidence of cyclical mastalgia more than the non cyclical with majority of patients in 2<sup>nd</sup> or 3<sup>rd</sup> decades of life. Later Uma Krishna swami also reported incidence of mastalgia about 57 % of all BBD. In the current study incidence of mastalgia has been noted 51%. This issue is not comparable to figures currently obtained in Indian literature due to the fact that this sample deals exclusively with the patients coming to out patient department. However it does not alert one to the possibility of a higher current incidence or even a rising incidence of BBD in least developed populations. This study also finds that the cyclical mastalgia is certainly more common than non-cyclical mastalgia. The mean age in both cyclical and noncyclical mastalgia falls into the early 2<sup>nd</sup> and 3<sup>rd</sup> decades. Thus the pattern of women's age is closer to that seen in the western countries and other parts of Indian populations. Incidence of fibroadenoma in this study was found 10% which is very low from other part of our country. The incidence of fibroadenoma has been variously described approximately 56% in a study in 1983 , 40% in 1988 and 17% in 1997. The implication of this downward trend over the years needs evaluation.

The present study emphasizes the fact that BBD in general and mastalgia in particular can no longer be ignored. Much work needs to be done to collect comprehensive data about the incidence and prevalence of BBD in other parts of state as well as our country.

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