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General Surgery

A CLINICO PATHOLOGICAL STUDY OF CARCINOMA BREAST

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ABSTRACT In India, breast cancer is the most common cancer among women, and studies show a high mortality-to-incidence ratio due to delayed diagnosis, particularly in rural areas. Limited awareness, lack of health education, socioeconomic barriers, and poor access to healthcare facilities contribute to late-stage presentation and subsequent poor treatment outcomes. This study aims to analyze the clinico-pathological features of breast carcinoma in a rural population of Telangana and highlight the factors influencing its presentation.

KEYWORDS : Carcinoma breast, breast cancer, FNAC, Histopathology, TNM staging, Receptor status (ER, PR, HER2), Mastectomy.

INTRODUCTION:

In this study, the clinical features, correlation of FNAC/ Core-needle biopsy with postoperative Histopathology Report, stage of presentation, pathological types, mode of spread, staging and management of breast cancer were studied.

AIMS AND OBJECTIVES OF STUDY:

To correlate the clinical findings with FNAC (positive or negative) reports and postoperative histopathology reports.

MATERIALS AND METHODS:

Materials:

In this study the data obtained from 30 cases at Department of General Surgery, Government Medical College & Government General Hospital, Jagtial, Telangana, from June 2022 to May 2025.

Inclusion Criteria:

Patients who were willing for surgery and other treatment modalities

- Age between 20 to 80 yrs
- Includes only females
- All patients with breast lumps and FNAC positive reports
- Patients who presented with clinical Stage I, Stage II and Stage III disease

Exclusion Criteria:

- Patients with benign breast diseases
- Excludes inoperable advanced breast cancers.
- Patients with inflammatory breast carcinomas
- Recurrent breast lump in a previously operated case of breast carcinoma.

A detailed clinical history has been taken from all patients at the time of admission. All patients with clinical and FNAC/ Core-needle biopsy evidence of malignancy will be worked up for treatment modalities. All patients who were willing for mastectomy were explained about the surgery and chemotherapy to be given after the surgery.

Specific Investigations:

- Fine needle aspiration cytology(FNAC)/ Core-needle biopsy
- Ultrasound breast / Mammography – same or opposite breast
- Post Operative Histopathology Report
- Chest X-ray PA view
- Ultrasound Abdomen and Pelvis
- Liver function tests
- Alkaline Phosphatase levels
- Informed written consent

INTERVENTION:

- Surgery in the form of mastectomy depending on the stage of disease with adjuvant chemotherapy in all the selected cases.
- Neoadjuvant chemotherapy is given to selected patients while chemo-radiotherapy with hormonal therapy was given to a few cases.

OBSERVATION AND RESULTS:

Table 1: Characteristics Of The Breast Lump:

Breast Lump	No. of patients studied (n=30)	% in the study
Pain / Discomfort		
- Absent	14	46.7
- Present	16	53.3
Side		
- Left	14	46.7
- Right	16	53.3
Size cms^2		
- <2 cms^2	2	6.7
- 2-5 cms^2	16	53.3
- >5 cms^2	12	40
Quadrant		
- Central	3	10
- Lower Inner	4	13.3
- Lower Outer	1	3.4
- Upper Inner	4	13.3
- Upper Outer	18	60
Fixity		
- Nil	25	83.3
- Present	5	16.7

Table 2: Characteristics Of The Nipple:

Nipple Retraction	No. of patients	% in the study
- Absent	15	50
- Present	15	50
Discharge		
- Absent	20	66.7
- Present	10	33.3

Table 3: Distribution Of The Axillary Lymph Nodes:

Axillary Lymph nodes	No of patients	% in the study
Absent	9	30
Present	21	70
Total	30	100

Table 4: Distribution Of Peaud Orange:

Peau d orange	No of patients	% in the study
Absent	20	66.7
Present	10	33.3
Total	30	100

Table 5: Distribution Of The TNM Staging:

TNM staging	No of patients	% in the study
Tumour size		
- T1	3	10
- T2	14	46.7
- T3	4	13.3
- T4	9	30
Nodal Status		
- N0	9	30
- N1	19	63.3
- N2	2	6.7
Stage of the Disease		
- Stage I	2	6.7
- Stage II	15	50

-	Stage III	13	43.3

Table 6: Correlation Of The FNAC, ER/PR Status, HER-2 Neu And Histopathology Of The Patients Studied:

Age of the patients (years)	Histopathology			P-value
	IDC (n=24)	ILC (n=3)	MC (n=2)	
FNAC				0.826
-IDC	14(58.3%)	2(66.7)	2(100)	
- Suggestive	11(45.8%)	0(0)	0(0)	
ER/PR				0.821
- Positive	13(54.2)	0(0)	0(0)	
- Negative	12(45.8)	2(66.7)	2(100)	
HER-2 Neu				0.048
- Absent	23(95.8%)	3(100)	2(100)	
- Present	1(4.2)	0(0)	0	

CONCLUSION:

Lump in the breast is the commonest complaint on presentation. Most of the patients who present have palpable axillary lymph nodes. Higher cases were noted with Stage II and Stage III disease, reflecting the poor health education and ignorance on the part of the patients. FNAC was highly effective in diagnosing malignancy and was highly sensitive. Histopathology revealed the highest incidence of infiltrating ductal carcinoma in the study. ER/PR and Her-2neu positivity were low compared to other trials.

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