



STUDY OF SOME DEMOGRAPHIC AND CLINICAL FEATURES OF CARCINOMA BREAST IN A TERTIARY CARE HOSPITAL CHANDRAPUR

Pathology

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ABSTRACT

Background: Breast carcinoma is one of the leading morbid condition among Indian females. Aim of study is to determine some demographic & some clinical features in our tertiary care hospital. **Material&Methods:** A retrospective study of FNAC for a period of 2 years from medical records of January 2017 to December 2018. **Results:** Out of total 40 patients 31 (78%) were females and 9 (22%) were males. Most common age group was 51 to 60 years (45%) followed by 61 to 70 years (32%). 70% belonged to rural population. Lump was most common presentation. Right sided breast involvement was more common, axillary lymph node involvement was common in 13% participants. **Conclusion:** Number of newly diagnosed case of breast diseases is increasing in spite of improvement in health facilities. FNAC of breast is cheap, safe, and highly accurate method for diagnosis of breast lump preoperatively to avoid undue surgery and inconvenience during biopsy. Further studies are needed to plan public health measures.

KEYWORDS

Retrospective, FNAC, Ductal Carcinoma.

INTRODUCTION:

Globally, cancers in all forms are causing about 12% of all deaths. In developed countries cancer is the second leading cause of death and in developing countries it ranks third, accounting for 9.5% of all deaths. ⁽¹⁾ Breast cancer is usually asymptomatic in the early stages during which it is curable, this is the paradox of breast cancer. ⁽²⁾ Therefore, screening for breast cancer appears to be the viable option in reducing the mortality and morbidity of breast cancer. ⁽²⁾ Surgical evaluation of the symptomatic patients by triple assessment, namely, clinical examination of the breast, mammography, and breast biopsy for definitive histological diagnosis is required in many patients. ⁽³⁾ There are few studies in our environment on the clinical aspects of breast diseases.

This is a record based study to evaluate some demographic and clinical features of breast carcinoma of tertiary care hospital.

MATERIAL AND METHODS:

It was a retrospective record based study, performed in Central pathology laboratory, Government Medical College & Hospital, Chandrapur. Required institutional ethical committee approval was obtained before initiating study. Study Population included breast carcinoma patients from medical records **January 2017 to December 2018**. By using universal sampling method 40 patients were included in the study from medical records of 2 years. Reports having major typographical errors were excluded from the study. Study Procedure involves case reports having patient age and sex, history and clinical examination, breast cytology sampling technique, and conclusive breast cytology diagnosis is included in the study. Informed consent was taken from patient before sample collection. Samples from the patients were collected by using 20-22 gauge needle. Aspirated material was expressed on a clean glass slide using 20 cc syringe. Another slide was placed on the material and spread by pulling apart to prepare a smear. The slide was immediately transferred to jar containing isopropyl alcohol. Staining was done with Haematoxyline and Eosin, Pap, May Grunwald Giemsa stain. All data was analysed using Microsoft Excel 2007 & SPSS.

RESULT AND DISCUSSION:

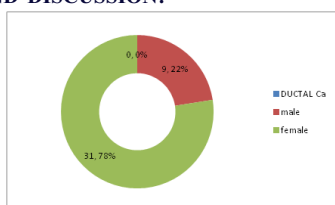


Fig:1 Gender wise distribution of study participants.

Fig1 denotes genderwise distribution of study participants in which maximum i.e 31 (78%) were females and 9 (22%) were males.

Adel Gabr et al⁽⁴⁾ conducted a study in Egypt in which all were females. **Puri S et al⁽¹⁾** carried out a study in India in which all were females with breast cancer. **Babatunde A Ayode et al⁽⁵⁾** conducted a study in Nigeria in which they observed breast lesion among two males and 119 females. Our study finding is consistent with above mentioned study.

Table 1: age group wise distribution of study participants

Age group among females	number	percentage
41 to 50 years	7	23%
51 to 60 years	14	45%
61 to 70 years	10	32%
total	31	100%

Table 1 shows age group wise distribution among female participants which shows maximum belonged to 51 to 60 years age group after that 61 to 70 years age group and after that 41 to 50 years age group. All 9 males belonged to 41 to 50 years age group in our study.

Adel Gabr et al⁽⁴⁾ conducted a study in Egypt in which Approximately one-third of the breast cancer patients diagnosed at age 40–50 years. **Mar'ia Graciela Abriata et al⁽⁶⁾** conducted a study in Argentina in which The mean age of patients was 57.6 years. Our study findings are similar with the mentioned studies.

Table 2: urban rural distribution of study participants.

Area	Number	Percentage
Rural	28	70%
Urban	12	30%
Total	40	100

Table 2 shows the urban rural distribution of study participants in which maximum 70% were rural and 30% belonged to urban population. **Adel Gabr et al⁽⁴⁾** conducted a study in Egypt in which they found 71% of cases from rural areas. **SO Dalton et al⁽⁷⁾** performed a study in Denmark in which they found higher risk of breast cancer among rural population. Our study findings are consistent with above mentioned studies.

Table 3: some clinical features of carcinoma breast

complaints	number	percentage
lump	34	85%
Lump with pain	6	15%

Side of breast involved	number	percentage
left	14	35%
right	26	65%
Axillary lymph node involvement	number	percentage
yes	5	13%
no	35	87%

Table 3 shows some clinical features of breast carcinoma in which lump was a complaint in 85% of participants and lump with pain was in 15% participants. Right sided breast involvement was common i.e., 65% and left sided breast in 35% participants. Axillary lymph node involvement was present among 13% of participants. **Babatunde A Ayoade et al⁽⁵⁾** conducted a study in Nigeria in which they observed that out of 121 patients breast lump was presenting complaint in 111 patients, pain in 28 patients, axillary lump in 3 patients. **H. Tulinius et al⁽⁸⁾** conducted a study in which Primary breast cancer in both breasts was diagnosed in 81 women, 35 in the left breast first, and 46 in the right breast first. Our study findings were similar to above mentioned studies.

CONCLUSION:

Breast cancer was more common among females belonging to age group 51 to 60 years. Rural population more commonly involved. Lump was most common presentation. Right sided breast involvement was more common, axillary lymph node involvement was common in 13% participants. FNAC plays important role in diagnosis. Further studies are required to be performed on breast carcinoma so that required public health measures can be done.

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