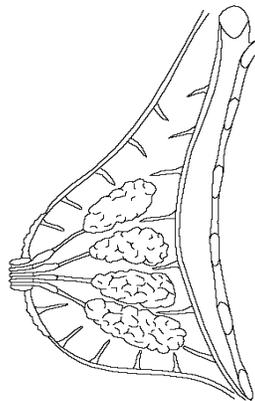


CALIFORNIA  
TUMOR TISSUE REGISTRY

## **“BREAST PATHOLOGY”**

**Study Cases, Subscription A**

**January 1999**



**California Tumor Tissue Registry**  
**c/o: Department of Pathology and Human Anatomy**  
**Loma Linda University School of Medicine**  
**11021 Campus Avenue, AH 335**  
**Loma Linda, California 92350**  
**(909) 824-4788**  
**FAX: (909) 478-4188**  
**E-mail: [cttr@linkline.com](mailto:cttr@linkline.com)**

**Target audience:**

Practicing pathologists and pathology residents.

**Goal:**

To acquaint the participant with the histologic features of a variety of benign and malignant neoplasms and tumor-like conditions.

**Objectives:**

The participant will be able to recognize morphologic features of a variety of benign and malignant neoplasms and tumor-like conditions and relate those processes to pertinent references in the medical literature.

**Educational methods and media:**

Review of representative glass slides with associated histories.  
Feedback on consensus diagnoses from participating pathologists.  
Listing of selected references from the medical literature.

**Principal faculty:**

Weldon K. Bullock, MD  
Donald R. Chase, MD

**CME Credit:**

Loma Linda University School of Medicine designates this continuing medical education activity for up to 2 hours of Category I of the Physician's Recognition Award of the American Medical Association.  
CME credit is offered for the subscription year only.

**Accreditation:**

Loma Linda University School of Medicine is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to sponsor continuing medical education for physicians.

**CONTRIBUTOR: Nora Ostrzega, M.D.**  
**Sylmar, CA**

**CASE NO. 1 - JANUARY 1999**

**TISSUE FROM: Breast**

**ACCESSION #28048**

**CLINICAL ABSTRACT:**

A 47-year-old female presented with a four month history of a breast mass. Following biopsy, a left partial mastectomy with axillary lymph node dissection was performed.

**GROSS PATHOLOGY:**

A 4.6 cm diameter, well-circumscribed, soft tan tumor was present in the 7.0 cm diameter breast resection.

**SPECIAL STUDIES:**

ER/PR receptors	negative
2-neu	positive

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**CONTRIBUTOR: Chisa Aoyama, M.D.**  
**Sylmar, CA**

**CASE NO. 2 - JANUARY 1999**

**TISSUE FROM: Breast**

**ACCESSION #28140**

**CLINICAL ABSTRACT:**

This 34-year-old Hispanic female presented with a long history of a large, left sided breast mass. An excisional biopsy was performed.

**GROSS PATHOLOGY:**

The 13.5 x 10.5 x 6.5 cm tumor was covered by a fibrous capsule. The cut surface was homogeneous, slightly myxomatous, white-tan, without bulging. There was focal hemorrhage but no necrosis or calcification.

**SPECIAL STUDIES:**

Desmin	Positive for less than 10% of the stromal component.
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**CONTRIBUTOR: Eruch Karanjawala, M.D.**  
**Santa Maria, CA**

**CASE NO. 3 - JANUARY 1999**

**TISSUE FROM: Right breast**

**ACCESSION #24886**

**CLINICAL ABSTRACT:**

At the age 17 years, this young woman presented with a right breast mass and was told that it was probably developing breast tissue. A year later she developed pain the her right breast and a 2-3 cm multilobular mass was excised.

**GROSS PATHOLOGY:**

Multiple fragments of homogenous gray-tan, fleshy, glistening tissue weighed 40.0 grams and formed a 7.0 x 2.0 cm aggregate.

**SPECIAL STUDIES:**

IgG	positive
IgA	positive
IgM	positive
MGP	strongly positive

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**CONTRIBUTOR: Robert E. Riechmann, Jr., M.D.**  
**Covina, CA**

**CASE NO. 4 - JANUARY 1999**

**TISSUE FROM: Right breast**

**ACCESSION #28419**

**CLINICAL ABSTRACT:**

This 37-year-old female presented with a mass in the right breast. The mass was surgically removed.

**GROSS PATHOLOGY:**

The 5.5 x 5.0 x 3.7 cm well-circumscribed, firm, ovoid nodule was composed of homogenous glistening white tissue.

**CONTRIBUTOR: Arno Roscher, M.D.  
Granada Hills, CA**

**CASE NO. 5 - JANUARY 1999**

**TISSUE FROM: Left breast**

**ACCESSION #28280**

**CLINICAL ABSTRACT:**

This 79-year-old Caucasian female reported a five month history of an “egg sized” mass in her left breast. In the few weeks before presentation, it had enlarged and ulcerated. A left mastectomy was performed.

**GROSS PATHOLOGY:**

The 26 x 21 x 16 cm breast had a 5.0 cm area of skin ulceration. Beneath this was a large multilobulated fleshy white mass which bulged on sectioning.

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**CONTRIBUTOR: Steve Kargas, M.D.**

**CASE NO. 6 - JANUARY 1999**

**TISSUE FROM: Right breast**

**ACCESSION #28411**

**CLINICAL ABSTRACT:**

During a work-up for end-stage renal disease, this 60-year-old diabetic female was found to have a large right breast mass. A modified radical mastectomy was performed.

**GROSS PATHOLOGY:**

The 682 gram mastectomy specimen included a 7.5 x 7.0 x 4.5 cm tan-red expansile oval tumor.

**SPECIAL STUDIES:**

CAM 5.2	patchy positivity
S-100	negative
Vimentin	negative
Keratin cocktail	4+ positive
Antitrypsin	4+ positive

**CONTRIBUTOR: Chisa Aoyama, M.D.**  
**Sylmar, CA**

**CASE NO. 7 - JANUARY 1999**

**TISSUE FROM: Right breast**

**ACCESSION #28405**

**CLINICAL ABSTRACT:**

This 39-year-old female presented with a one year history of a right breast mass. A right mastectomy was performed.

**GROSS PATHOLOGY:**

Within the resection specimen was a 3.0 x 2.2 x 2.5 cm, well-demarcated, non-capsulated, yellow-tan nodular tumor.

**SPECIAL STUDIES:**

ER/PR           negative  
HER-2/neu      focally weakly positive

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**CONTRIBUTOR: William H. Winchell, M.D.**  
**Santa Cruz, CA**

**CASE NO. 8 - JANUARY 1999**

**TISSUE FROM: Left breast**

**ACCESSION #18213**

**CLINICAL ABSTRACT:**

Abut 3 months after delivery of a normal infant, this 28-year-old Caucasian female presented with a swollen left breast, twice the size of the right. It was firm, red and tender. Incision into what was thought to be an abscess had yielded only inspissated milk. A mass was excised.

**GROSS PATHOLOGY:**

The specimen consisted of 180 grams of tissue received in multiple fragments which were pink-tan, soft and rubbery.

**CONTRIBUTOR: Don Minckler, M.D.**  
**Los Angeles, CA**

**CASE NO. 9 - JANUARY 1999**

**TISSUE FROM: Left and right eyes**

**ACCESSION #22958**

**CLINICAL ABSTRACT:**

This 76-year-old black female presented with decreased vision in both eyes. Ultrasound showed tumor in the choroid of both eyes. Past medical history was significant for breast carcinoma diagnosed one year previously. Bilateral enucleation was performed at autopsy.

**GROSS PATHOLOGY:**

The 2.4 cm right eye had a 0.5 x 0.7 cm raised firm white nodule in the nasal sclera that was not separable from the sclera and a 1.8 cm firm gray-white mass in the choroid extending from the inferonasal ciliary body back to the area of the optic nerve. The 2.6 cm left eye had a gray-white choroidal mass extending around the inferior choroid and a 4.0 x 6.0 mass present nasally superiorly.

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**CONTRIBUTOR: E. M. Butt, M.D.**  
**Pasadena, CA**

**CASE NO. 10 - JANUARY 1999**

**TISSUE FROM: Right and left breast**

**ACCESSION #8340**

**CLINICAL ABSTRACT:**

A 35-year-old black gravida IV, para III, pregnant female presented with bilateral breast masses. The right breast mass had been present for two months. The left breast mass had been noticed one week prior to the time of examination. A bilateral excisional biopsy was performed.

**GROSS PATHOLOGY:**

There were two well-encapsulated yellow tumors. The one from the right breast measured 3.5 cm and the one from the left 1.5 cm in largest diameter. They showed identical microscopic patterns.