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DUCTAL IN SITU ARISING IN FIBROADENOMA OF THE BREAST

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Fibroadenomas are common benign tumors of the female breast. In the appropriate clinical treatment, they are managed without excision, rarely a carcinoma arising within a fibroadenoma. We presented the case of a ductal carcinoma *in situ* (DCIS) arising in a fibroadenoma. We present a case of a 62-year-old woman with an isolated lump, no palpable, in her right breast that underwent a core biopsy, and histological findings of the lesion revealed a DCIS within a fibroadenoma. After 4 years (in 2021) without realizing mammography, by screening, she underwent mammography and ultrasound and was characterized as ACR BI-RADS category 4. The matologist should be aware of the possibility, particularly in older women, to inform the rationale for prompt surgical evaluation and follow-up of all breast masses. Mammography revealed a 1.4 cm mass on the right upper outer without microcalcifications. An ultrasound revealed a solid mass, hypoechoic, 1.4×0.7×1.1 cm, micronucleated. A core biopsy showed a biphasic neoplasia (fibroepithelial): a diagnostic suggestive of fibroadenoma with colonization of DCIS, cribriform, high grade, measuring 2 mm. Immunohistochemistry: ER: POSITIVE: 90–100%. PR: 90–100%. CerbB-2/Her2-neu score 0: negative. Lumpectomy: all margins greater than 2.0 mm: HYALINIZED FIBROADENOMA WITH USUAL DUCTAL HYPERPLASIA (06×04 mm)

SCLEROSING ADENOSIS

ALTERATIONS AND HYPERPLASIA OF COLUMNAR CELLS.

Questions:

1. Benefit from radiation therapy.
2. Value of tamoxifen or aromatase inhibitor.
3. Surveillance and follow-up.

Keywords: Breast cancer. Ductal carcinoma *in situ*. Fibroadenoma.