

Breast Conditions

2009



Conditions

Benign
Malignant

Benign

- Fibrocystic Changes
- Developmental
 - Agenesis
 - Macromastia
 - Polythelia

Tumors

- Cysts
- Solid
- Functional

Malignant

- Types
- Staging
- Treatment
 - Radiation
 - Chemotherapy
 - Hormonal
 - Surgery

Surgery

- Mastectomy
 - Partial
 - Simple
 - Total

Surgery

- Axilla
- Sentinel Nodes
- Full Dissection

Evaluation - Breast Mass

- H & P
- Differential
- Assessment
- Tests
 - Radiography
 - Biopsy

Treatment

- Minimal Intervention
- Overall Plan

RISK

- Family History Previous Breast CA
- Atypia Age
- RISK
- Hormones Radiation
- Genetic

Moderate to Marked Increase

- Age inherited genetic mutation
- Gender
- Personal History 2 or more 1st degree relatives
- Atypical Cells Biopsy Personal family Hx. Ca
- Radiation Exposure
- Post-menopausal dense breast tissue

Moderate to Minimal Increase

- Alcohol Nonatypical
“proliferative biopsy
- Obesity 2nd degree relatives Ca
breast
- Menarche < 12 HRT
- Menopause >56
- Parity after 30
- Smoking

Uncertainties & Myths

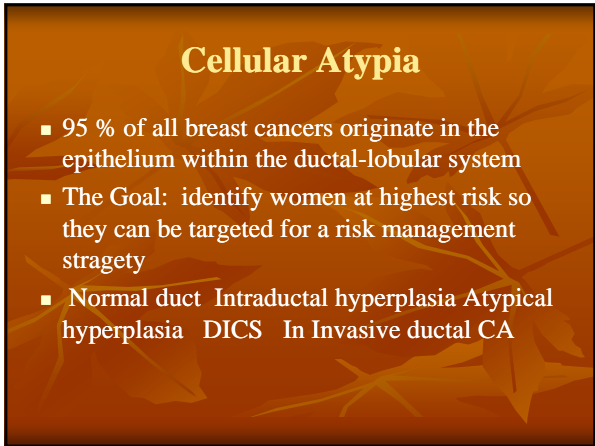
- Oral Contraceptives
- Diet
- Stress
- Abortions
- Deodorant
- Under-wire Bras

Determining Risk

- The Gail Model Age, 1st relatives, Age of 1st
 - Live births, Breast Bx., Atypical hyperplasia,
 - Menarche, race
 - <http://bcra.nih.gov/brc>
- The Claus Model
1st & 2nd Breast CA
Age of diagnosis







Evaluation

- Nipple aspirate fluid
- Breast Ductoscopy
- FNA
- Biopsy
- Ductal Lavage

Surveillance

- Physical Exam
- Mammogram
- Ultrasound
- MRI
- Ductal cytology

Breast Ca Reductions

- Drug Therapy (tamoxifen) 32-49% in women with atypical hyperplasia
- Prophylactic mastectomy 90% reduction
- Prophylactic oophorectomy 53% reduction in women with BCRA mutations

Prognostic Indicators

- ER/PR Markers
- DNA Types
 - Diploid – normal DNA
 - Aneuploid – abnormal amount DNA – 70% aggressive
 - S phase – big # - aggressive

Oncogene

- Her-2/neu – positive tumors aggressive
- Biomarker – IHC overexpression gene - effect
- FISH – Overexpression actual gene – cause
- Combined markers
 - Oncotype DX
 - ER +/- Node Neg. High Risk – 30% recur
Benefit from Chemo + Tmx
 - Low Risk – 6% No benefit from
Chemo + Tmx

Future

- Horizon
- Research
- Education
