

2022-RA-1691-ESGO **A RARE CASE OF THE TALL CELL
CARCINOMA OF THE BREAST WITH
REVERSED POLARITY**

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Introduction/Background Tall cell carcinoma of the breast with reversed polarity (TCCRP) is a rare subtype of papillary carcinoma recently recognized as a distinct entity on the fifth edition of the WHO classification of breast. Here we aim to highlight the histopathological features of this rare entity.

Methodology We retrospectively report the first case of TCCRP of the breast diagnosed and treated in the Institut of Salah Azaiez in 2022.

Results We report the case of a 45 year woman with no family history of cancer who suffered from bilateral mastodynia. There were no nodules or mass palpated on physical exam of the breasts and axillary region. The screening mammography showed an irregular hypoechoic mass of the right breast of 17*10 mm, classified as 4B. The core biopsy specimen revealed a complex nodular lesion. The mass was surgically excised and the pathological report revealed a TCCRP of the breast. PR and ER were negative as well as the HER-2. The Ki-67 proliferative index was around 10%. The patient underwent lymph sentinel lymph node biopsy as treatment and was proposed for radiotherapy.

Conclusion TCCRP is a rare entity with histological features that mimic the papillary thyroid carcinoma. It is usually a triple-negative tumor, negative to thyroid transcription factor 1 and thyroglobulin with a low potential for malignancy and a good prognosis. Wide excision is the keystone of the treatment. However, chemotherapy and radiotherapy are still controversial due to lack of evidence.

2022-RA-1693-ESGO **BREAST CARCINOMA ARISING WITHIN
FIBROADENOMAS: REPORT OF SEVEN
OBSERVATIONS**

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Introduction/Background Fibroadenoma is the most common benign breast neoplasm seen in young women under 30 years of age. Cancer within fibroadenoma is usually found incidentally during pathologic examination, with reported incidences ranging from 0.002% to 0.125%.

Methodology We retrospectively report seven cases of carcinomas arising in mammary fibroadenomas to report clinical, radiological and histological characteristics of breast carcinoma arising within fibroadenoma.

Results The average age of patients was 41 years (26–53) with a mean delay of consultation of 92 days (15–365 days). In three cases, fibroadenomas were complex, containing cysts, adenosis and apocrine metaplasia. Carcinomatous lesions were dominated by the invasive type. Invasive ductal carcinoma was found in four cases, associated in one case with ductal carcinoma in situ (DCIS) and with mucinous colloid carcinoma in

the other one. Lobular invasive carcinoma associated with lobular carcinoma in situ in one case (LCIS). In the two other cases, a focus of LCIS and DCIS was found arising from a complex background of fibroadenomas. Fibrocystic dystrophy lesions were found in the adjacent parenchyma associated in one case to intralobular neoplasia lesions. The treatment consisted of a lumpectomy in one case, conservative treatment in three cases and a mastectomy associated to axillary node dissection in the three others. Radiotherapy was indicated in six cases and chemotherapy done in four cases. After a mean follow up of 3, 57 years (1–7) no sign of recurrence was reported.

Conclusion Although malignant changes are rare, the risk of malignancy inside a fibroadenoma should be kept in mind. Thus, follow-up is advised, and biopsy or excision is needed if any progressive changes or increase in size is seen.

2022-RA-1698-ESGO **BENIGN METASTASIZING
LEIOMYOMADIAGNOSED IN
POSTMENOPAUSAL PATIENTS WITH
SUSPECTED MALIGNANT OVARIAN
PERITONEAL CARCINOMA: REPORT OF
TWO CASES AND REVIEW OF LITERATURE**

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Introduction/Background Uterine leiomyomas are the most common type of benign smooth muscle tumors of the genital organs in reproductive age. Benign metastasizing leiomyoma (BML) is a rare disorder that affects women with a history of uterine leiomyoma, which can find in extrauterine sites, most common in the lung. Because, it is a rare entity, most studies about this issue are case reports, which makes the comprehension difficult to understand the pathological behavior and the most adequate therapeutic approach.

Methodology This work reports two cases of BML in postmenopausal women, previously hysterectomized. The first was 62 years old, was multiple small peritoneal nodules with aspect of carcinomatosis and the second, 59 years old, has a malignant mesenchymal neoplasm in gluteus muscle, whose staging revealed a large solid adnexal mass suspicious for ovarian cancer.

Results Both were submitted to laparotomy for resection the lesions, and the anatomopathological examination showed multiple nodules composed of smooth muscle cells with morphological aspect similar with leiomyoma. In contrast to the knowledge that benign tumors do not metastasize, the term BML is used to describe the presence of histologically benign smooth muscle tumor outside of uterus. It has been suggested that BML is originated by dissemination of uterine primary lesion through lymphovascular pathway, peritoneal seeding by implant and proliferation of fragments of uterine leiomyoma after surgery, or celomic metaplasia mediated by hormone-sensitive proliferation.

Conclusion Despite most cases has a history of prior surgery (myomectomy or hysterectomy), the description of cases of women without a history of myoma surgery, which raises doubts about the hypothesis of lymphovascular dissemination due to former surgery. Options for BML treatment include