OVARIAN CARCINOMA METASTASIS

CLINICAL CASES OF ATYPICAL POLYPOID

REPORT ONE CASE OF OVARIAN CARCINOMA METASTASIS TO BREAST MIMICKING THE PRIMARY BREAST CARCINOMA: CASE REPORT AND REVIEW LITERATURE

Introduction/Background

In Algeria, breast cancer has become a major public health problem with a real urgency of intervention and management. The aim of this work was to analyse the epidemiological, clinical, therapeutic and evolutionary particularities of breast cancer in young women under the age of 30.

Methodology

This is a retrospective cohort of 35 patients under 30 years of age with breast cancer who were treated at the radiotherapy department of the cancer center Tlemcen, Algeria between September 2017 and August 2021.

Results

The median age was 28 (20–30) years, the left breast was affected in 51.4% of cases (18 patients) and the external site of the tumor predominated in 45.7% of cases (16 patients). 85.7% of patients had invasive ductal carcinoma. The tumors were classified as T1 in 25.7%, T2 in 57.1%, T3 in 8.5% and T4 in 8.5% of cases. 51.4% of the cases had lymph node involvement and the median histological size was 35 mm (0–70). 29 patients (82.8%) underwent radical surgery (patey) and 6 patients (17.1%) underwent conservative surgery. Chemotherapy was used in 11.4% of cases as neoadjuvant and in 88.5% of cases as adjuvant. 25 patients (71.4%) received adjuvant hormonal therapy and 12 patients (34.2%) received targeted therapy. Locoregional radiotherapy was delivered in all patients at a biological dose of 50GY to the chest wall, supra and subclavicular lymph nodes ± tumor bed.

Conclusion

Although our series showed satisfactory results, breast cancer in young women remains of unfavorable prognosis.

Abstract 2022-RA-215-ESGO Table 1

Clinicopathological characteristics of patients diagnosed with APA

<table>
<thead>
<tr>
<th>Case</th>
<th>Age</th>
<th>BMI</th>
<th>Parity</th>
<th>Menstrual Status</th>
<th>Clinical Symptoms</th>
<th>Largest Diameter (mm)</th>
<th>Associated Pathohistological Findings</th>
<th>Treatment Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>38</td>
<td>31.2</td>
<td>0</td>
<td>Premenopausal</td>
<td>Infertility, AUB, uterine cavity mass</td>
<td>14</td>
<td>None</td>
<td>Conservative</td>
</tr>
<tr>
<td>2</td>
<td>52</td>
<td>27.1</td>
<td>0</td>
<td>Premenopausal al</td>
<td>AUB, uterine cavity mass</td>
<td>11</td>
<td>Glandular polyp</td>
<td>Hysterectomy</td>
</tr>
<tr>
<td>3</td>
<td>31</td>
<td>20</td>
<td>1</td>
<td>Premenopausal</td>
<td>Uterine cavity mass</td>
<td>5</td>
<td>None</td>
<td>Conservative</td>
</tr>
<tr>
<td>4</td>
<td>48</td>
<td>36</td>
<td>1</td>
<td>Premenopausal al</td>
<td>AUB, uterine cavity mass</td>
<td>18</td>
<td>None</td>
<td>Hysterectomy</td>
</tr>
</tbody>
</table>
Two months after delivery, TCR provided normal histopathological specimen.

A 38-year-old patient presented with infertility and abnormal uterine bleeding (AUB). After TCR of APA, patient started assisted reproductive treatment with frequent ultrasound monitoring.

For patients aged 48 and 52 year, who presented with intratumoral mass (largest diameter of 18 mm) and AUB, hysterectomy was recommended after confirmation of APA by TCR.

Clinical symptoms of APA included infertility and AUB. Transvaginal ultrasonography confirmed intracavitary lesions in all patients, with largest diameter of 18 mm and glandular polyp as associated pathology.

Conclusion In our institution, two patients are being conservatively treated for APA with one case of successful pregnancy. Due to the rarity of APA, further observation will evaluate the success of conservative treatment.

SSMISSING OR BAD GRAPHIC SPECIFICATION (775D89EE-4F2F-4854-8506F2BAC2EC) S$