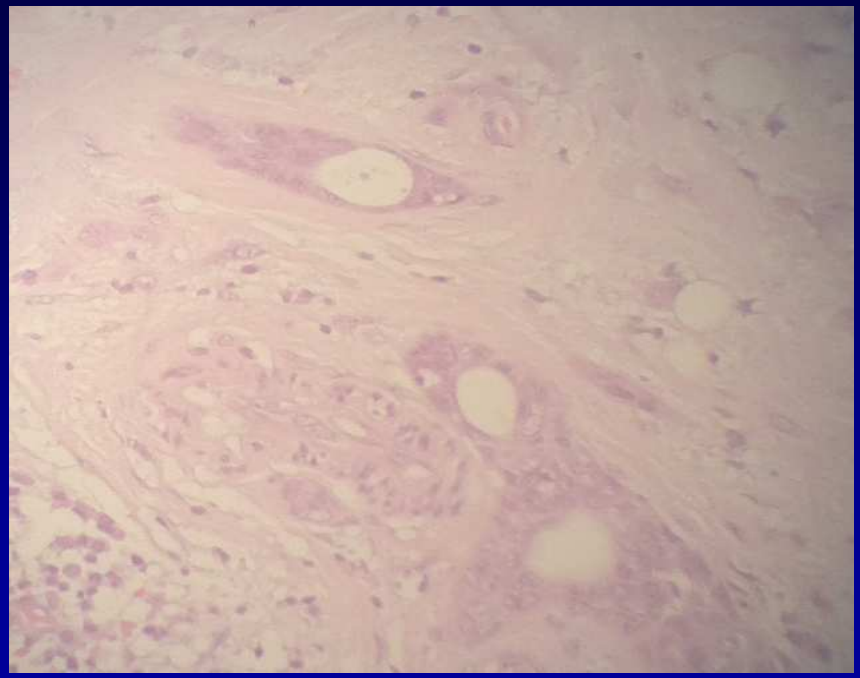
Núcleo de Especialidades - SBP

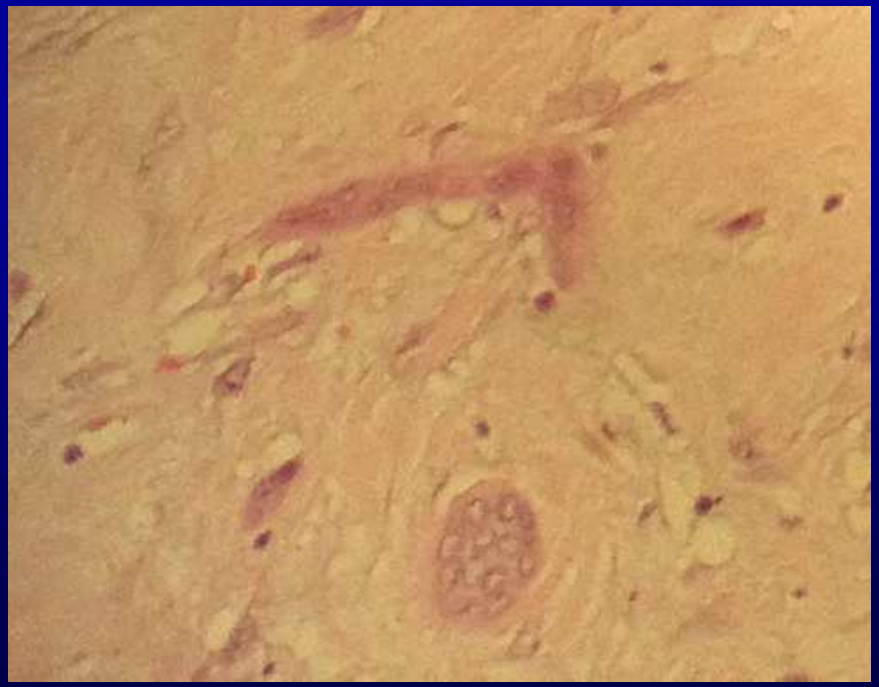
Leonard da Silva

SALOMÃO ZOPPI
DIAGNÓSTICOS

Feminino, 50 anos

Nódulo de mama esquerda





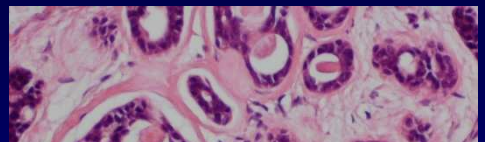
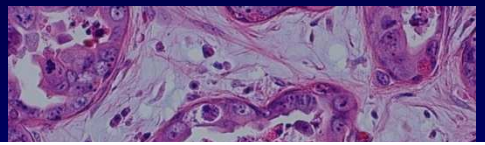
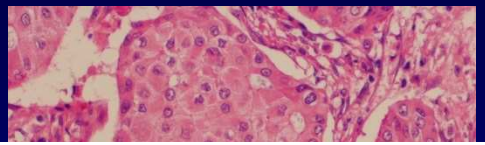
Diagnóstico ??

Low grade
Adenosquamous Carcinoma

Angel or Devil?

Dilemma for Patologists

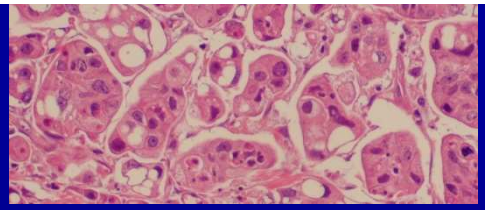
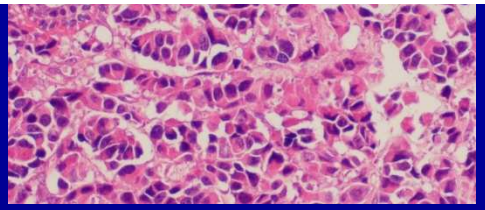
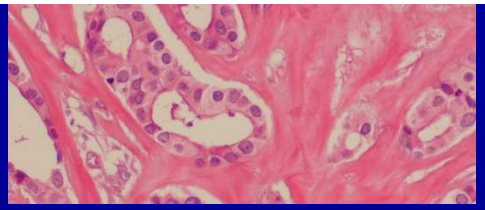
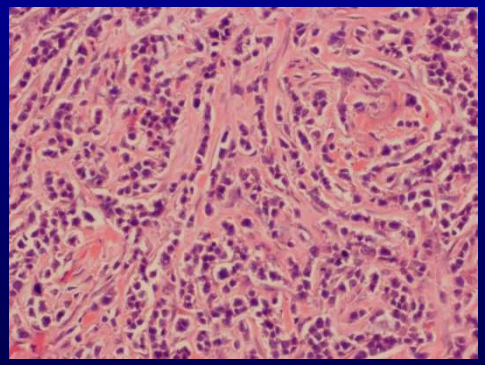
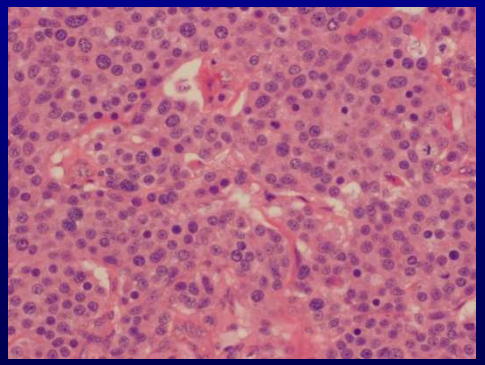
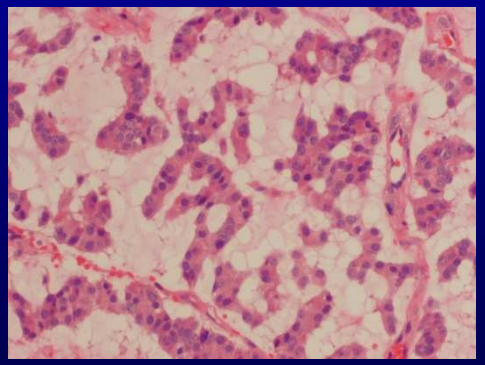
- ? low grade ductal carcinoma
- ? benign lesion
- ? ancillary tests

Journal of Pathology
J Pathol 2008; **216**: 141–150
Published online 14 July 2008 in Wiley InterScience
(www.interscience.wiley.com) **DOI:** 10.1002/path.2407

Original Paper

Refinement of breast cancer classification by molecular characterization of histological special types†

Prognosis

- excellent (>80% 10 year survival)

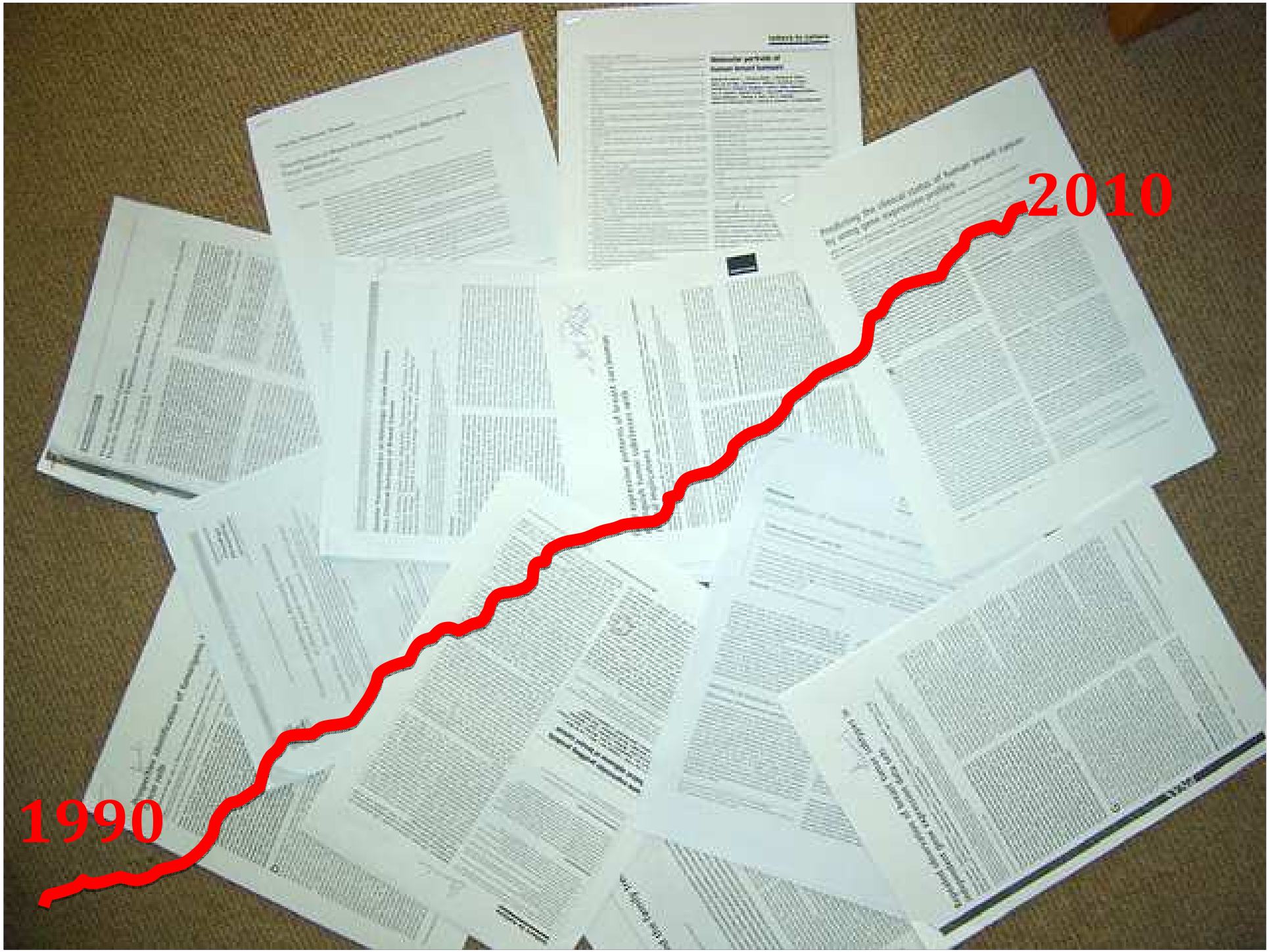
tubular, cribriform, mucinous

- average (50-60% 10 year survival)

mixed lobular, medullary-like carcinoma

- bad (<50% 10 year survival)

duct/NST, mixed ductal and solid lobular


2010
1990

The American Journal of Surgical Pathology *11(5): 351–358, 1987*

Low-Grade Adenosquamous Carcinoma

A Variant of Metaplastic Mammary Carcinoma

Paul Peter Rosen, M.D., and Debra Ernsberger

The American Journal of Surgical Pathology *17(3): 248–258, 1993*

Low-Grade Adenosquamous Carcinoma of the Breast

A Clinocopathologic Study of 32 Cases with Ultrastructural Analysis

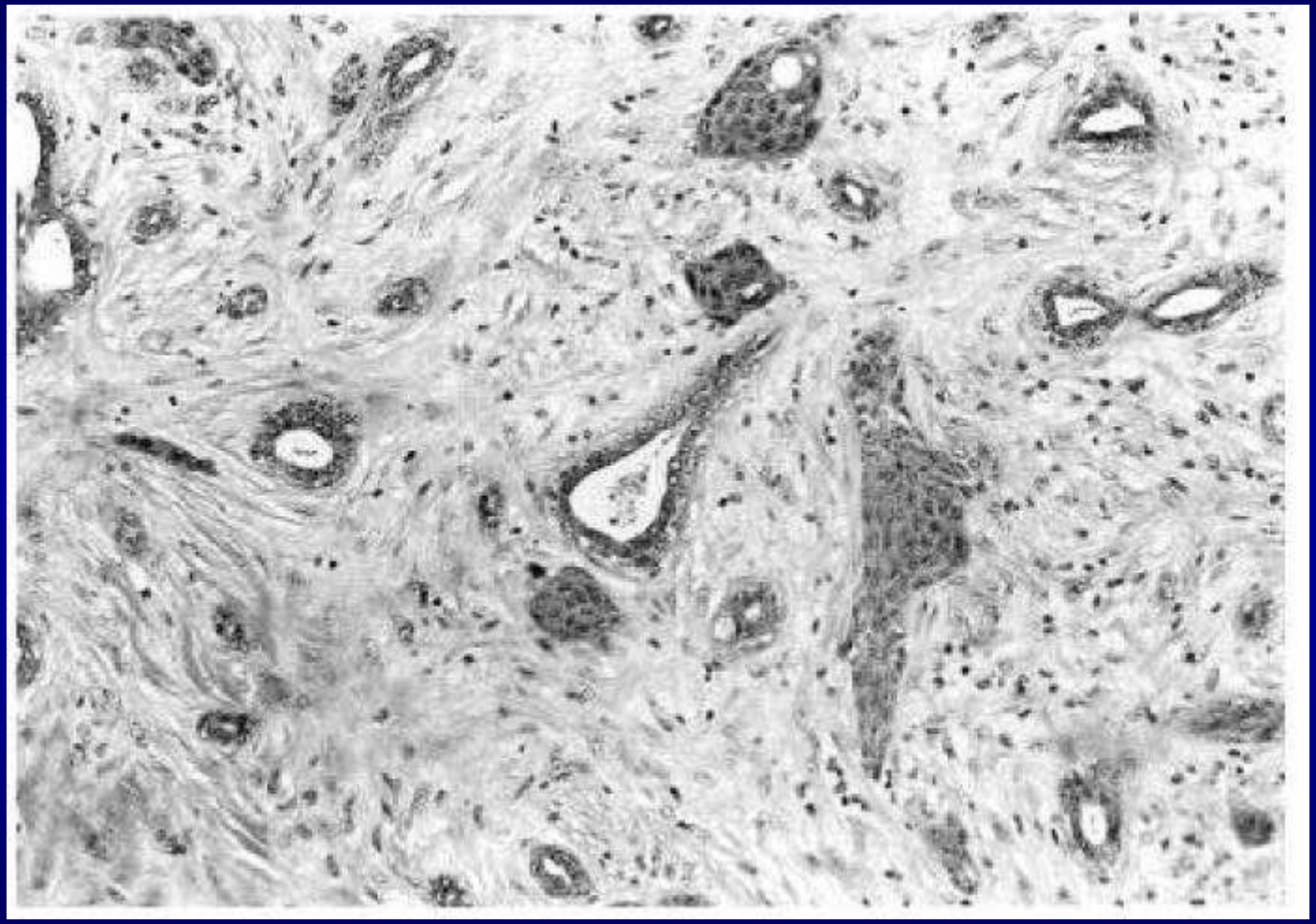
K.H. Van Hoeven, M.D., Teresa Drudis, M.D., Milicent L. Cranor, Robert A. Erlandson, Ph.D., and Paul Peter Rosen, M.D.

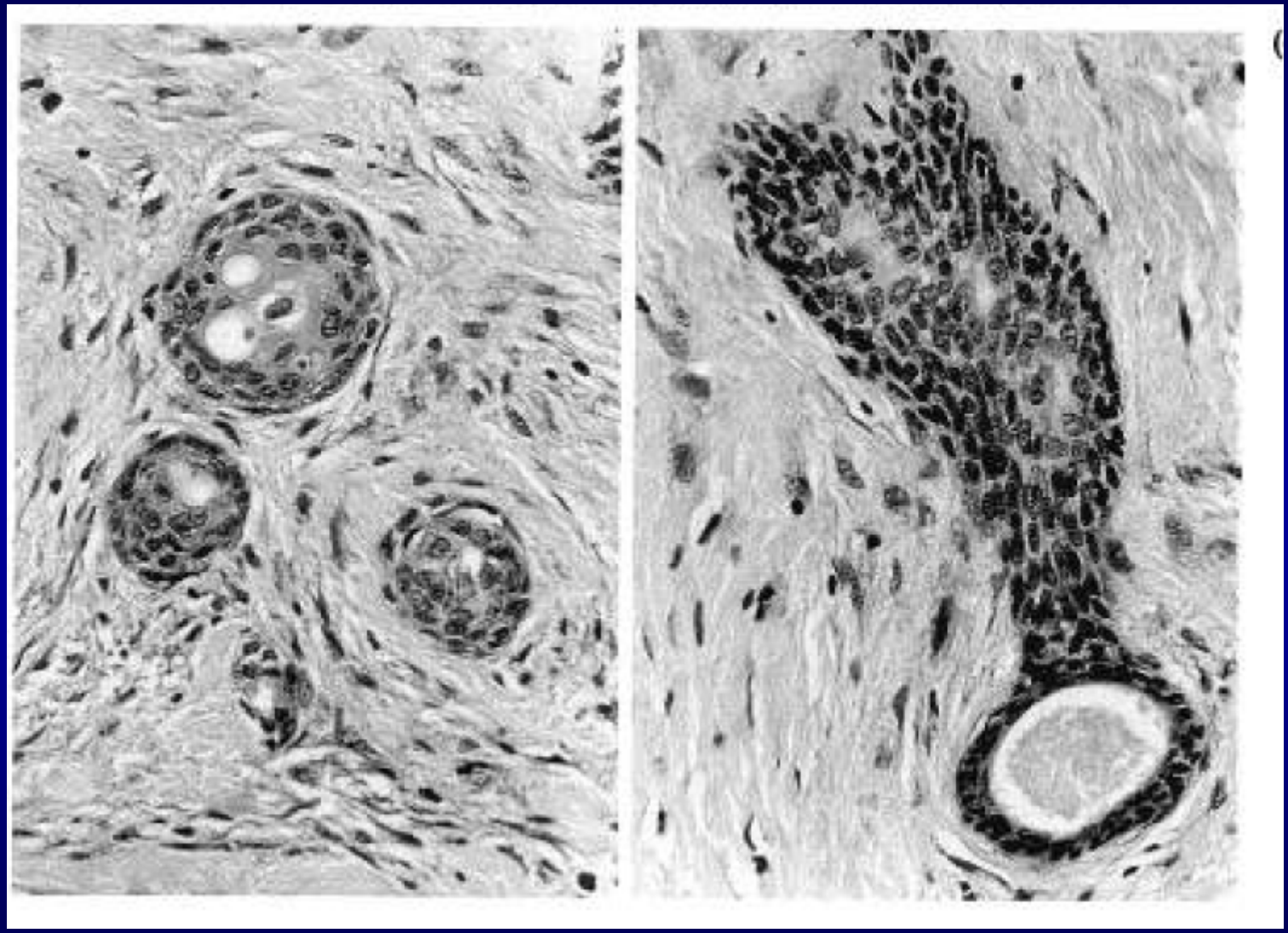
ORIGINAL ARTICLE

Immunohistochemical Staining Characteristics of Low-grade Adenosquamous Carcinoma of the Breast

Kathy Kawaguchi, MD and Sandra Jean Shin, MD

(*Am J Surg Pathol* 2012;00:000–000)





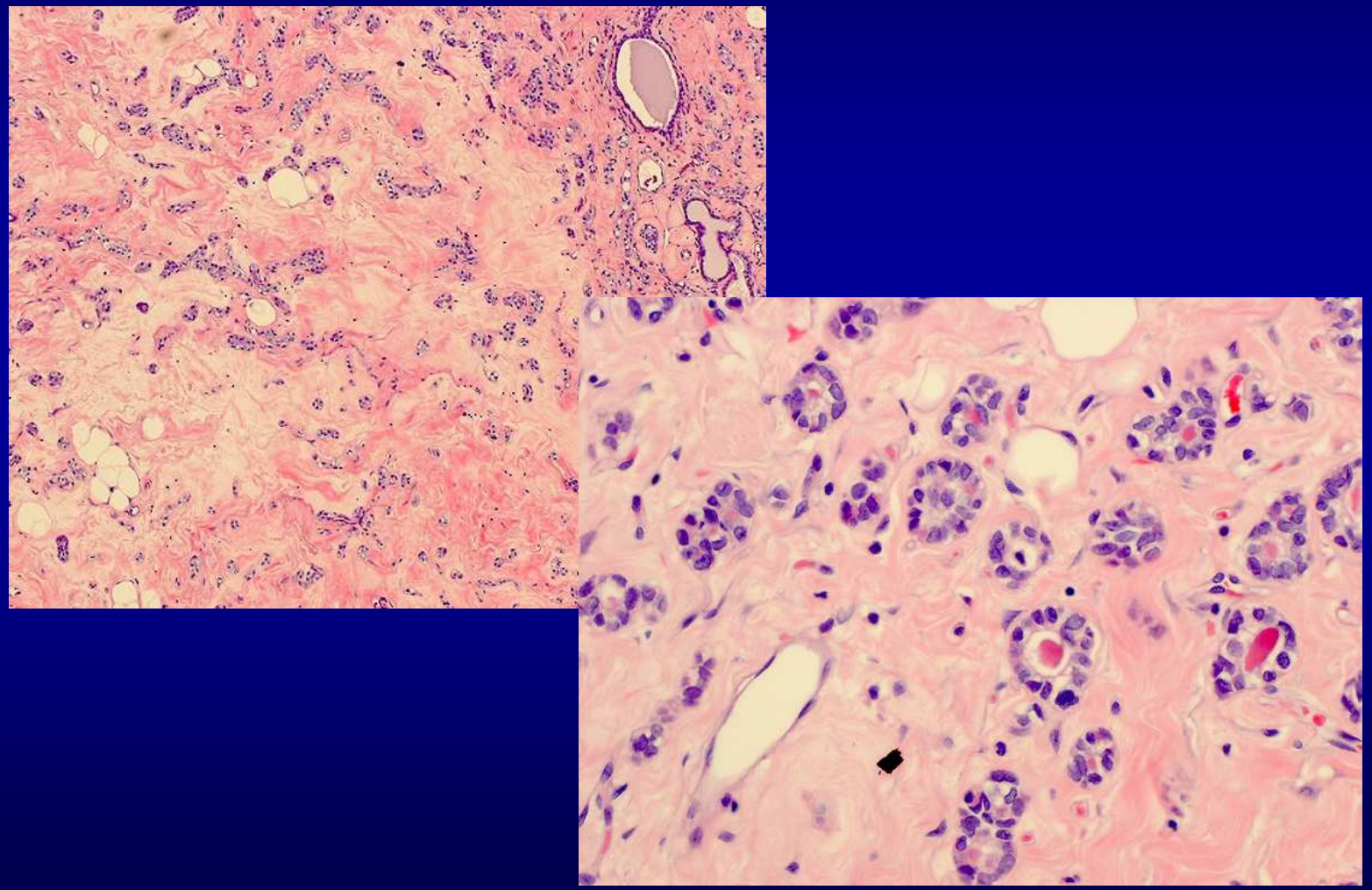
Low grade Adenosquamous Carcinoma

- uncommon variant of metaplastic carcinoma
- favorable prognosis

Microglandular Adenosis (MGA)

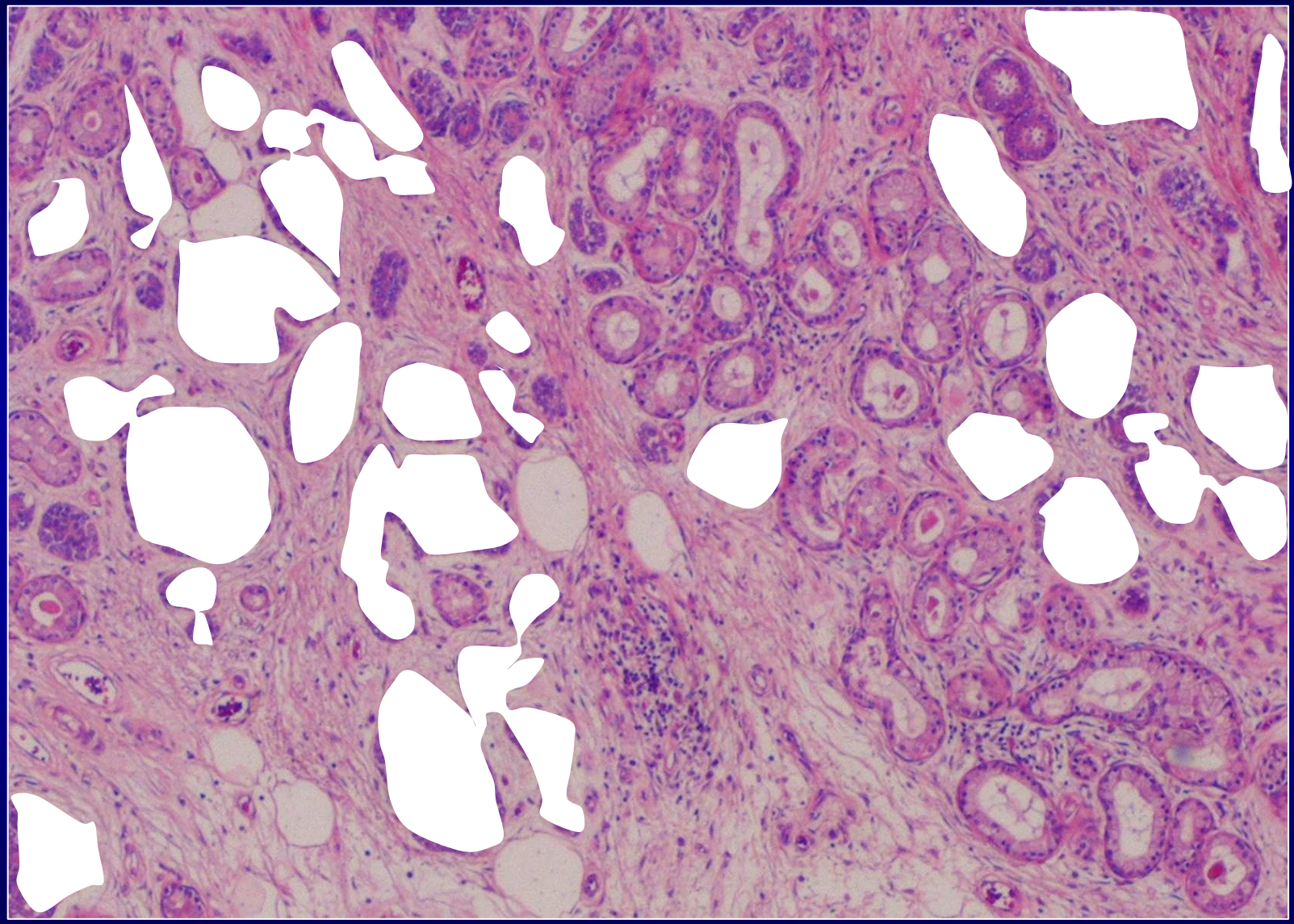
- Characterized by small uniform glands lined by a single layer of epithelium and thick, brightly eosinophilic luminal secretions
- Infiltrative growth pattern; chondromyxoid metaplasia
- Glands invested in basement membrane only
- ER/PR/HER-2 negative

MICROGLANDULAR ADENOSIS (MGA)

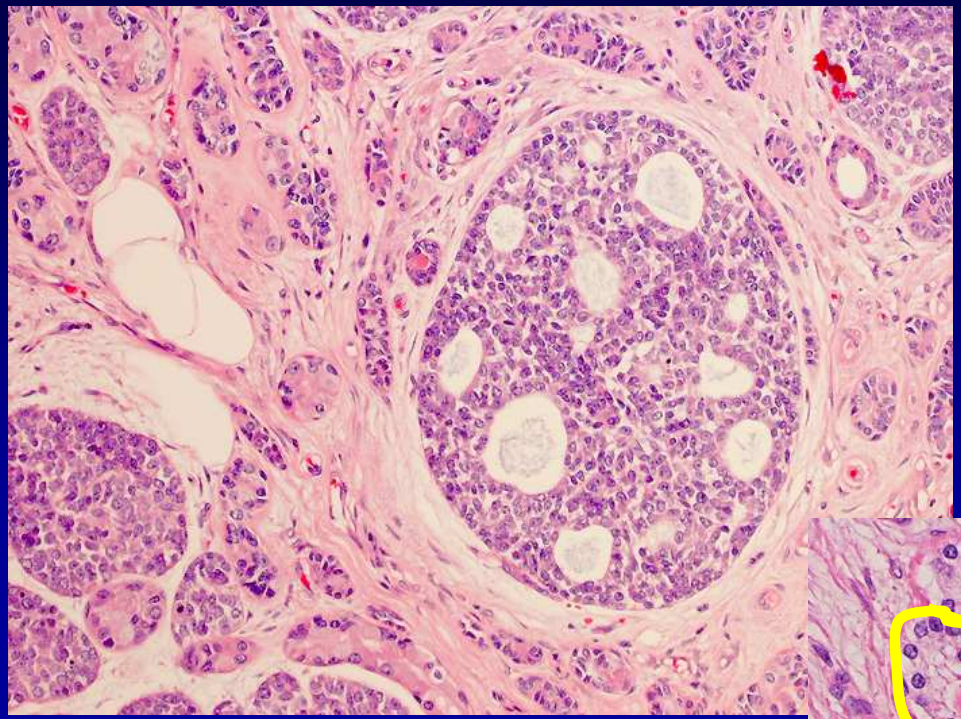


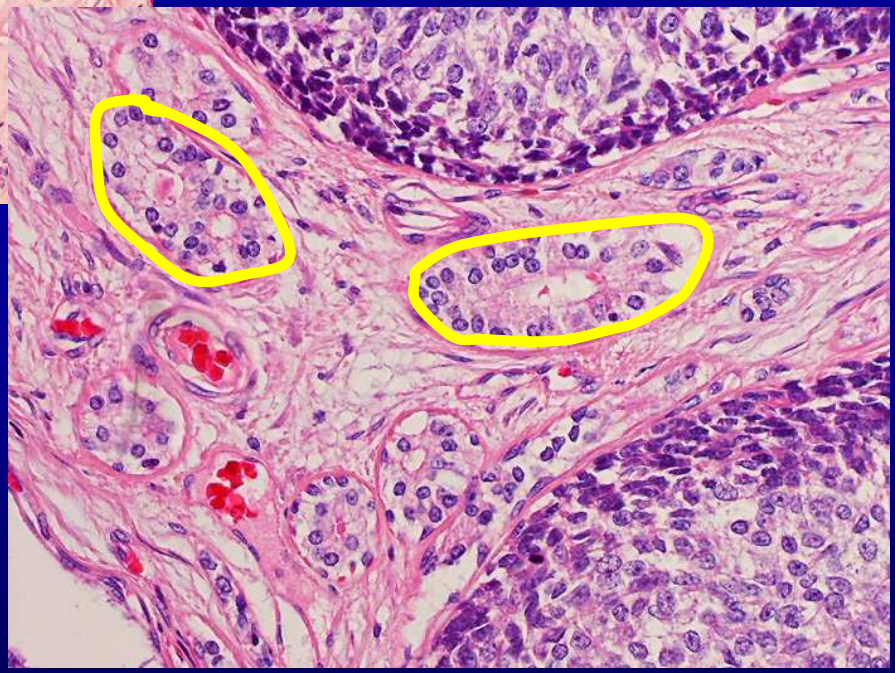
Shin et al, Am Journal Surgical Pathology, 2009

Tubular Adenosis

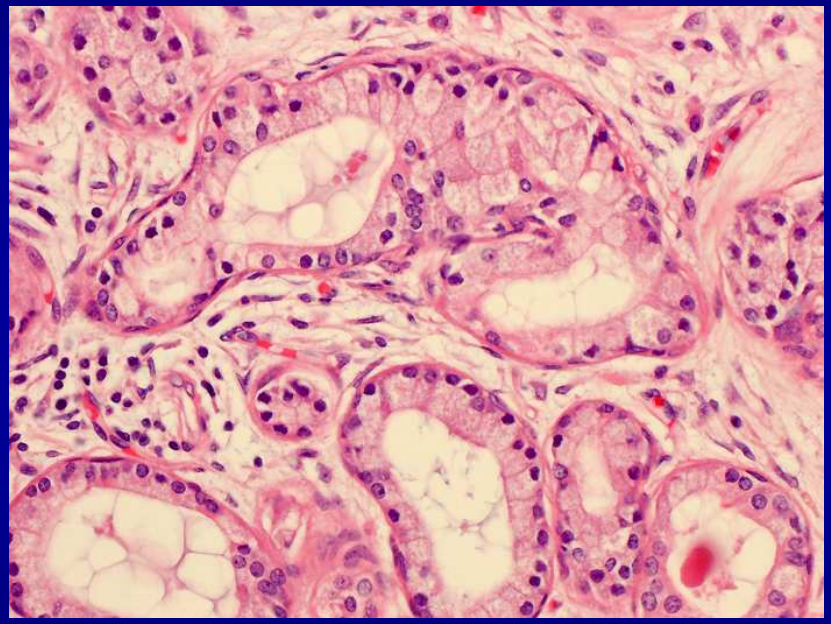


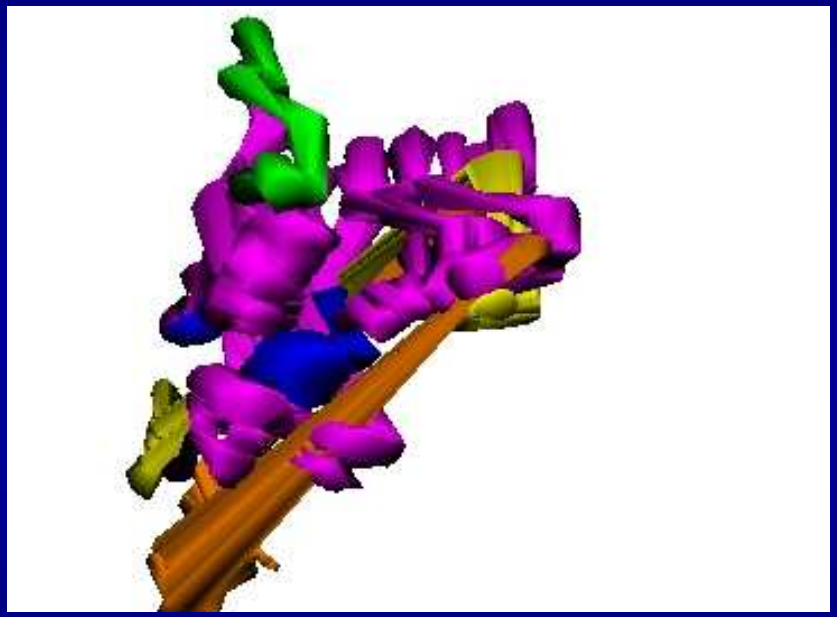
Da Silva et al, Virchows Archives, 2009



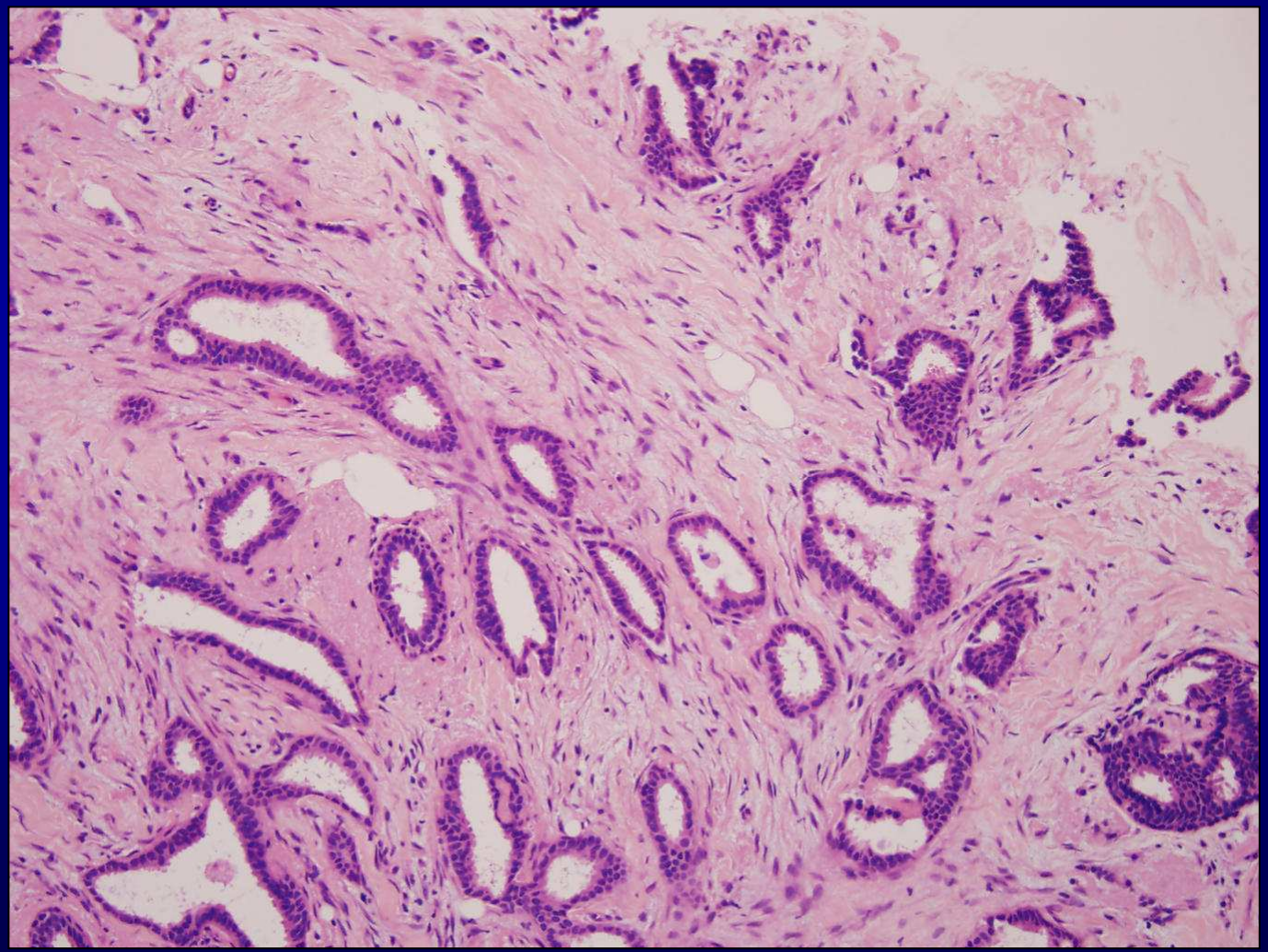


Tubular Adenosis

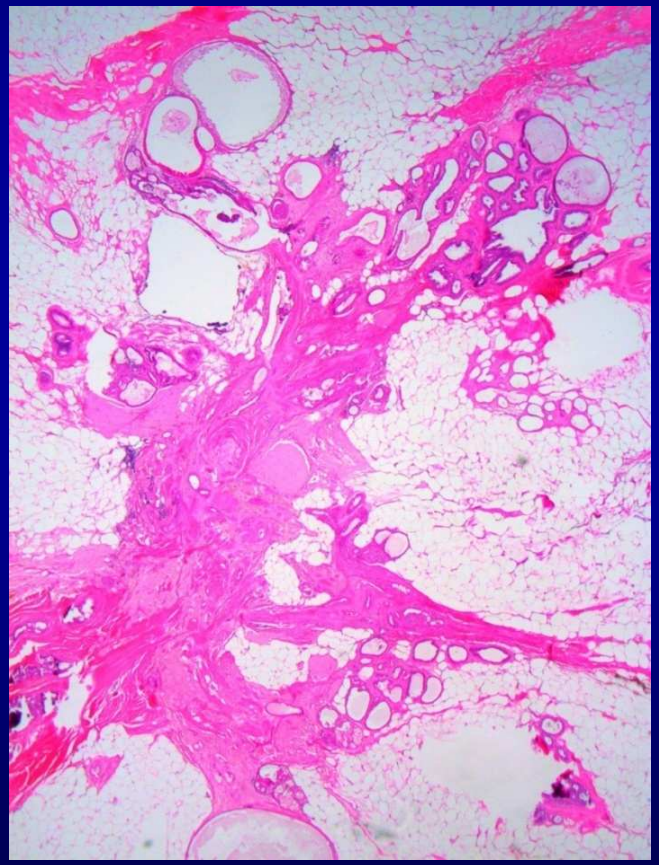


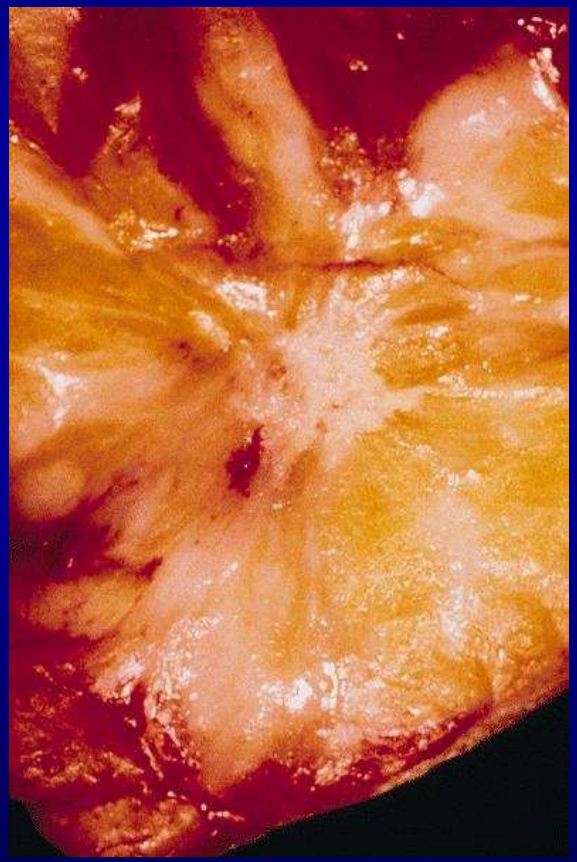


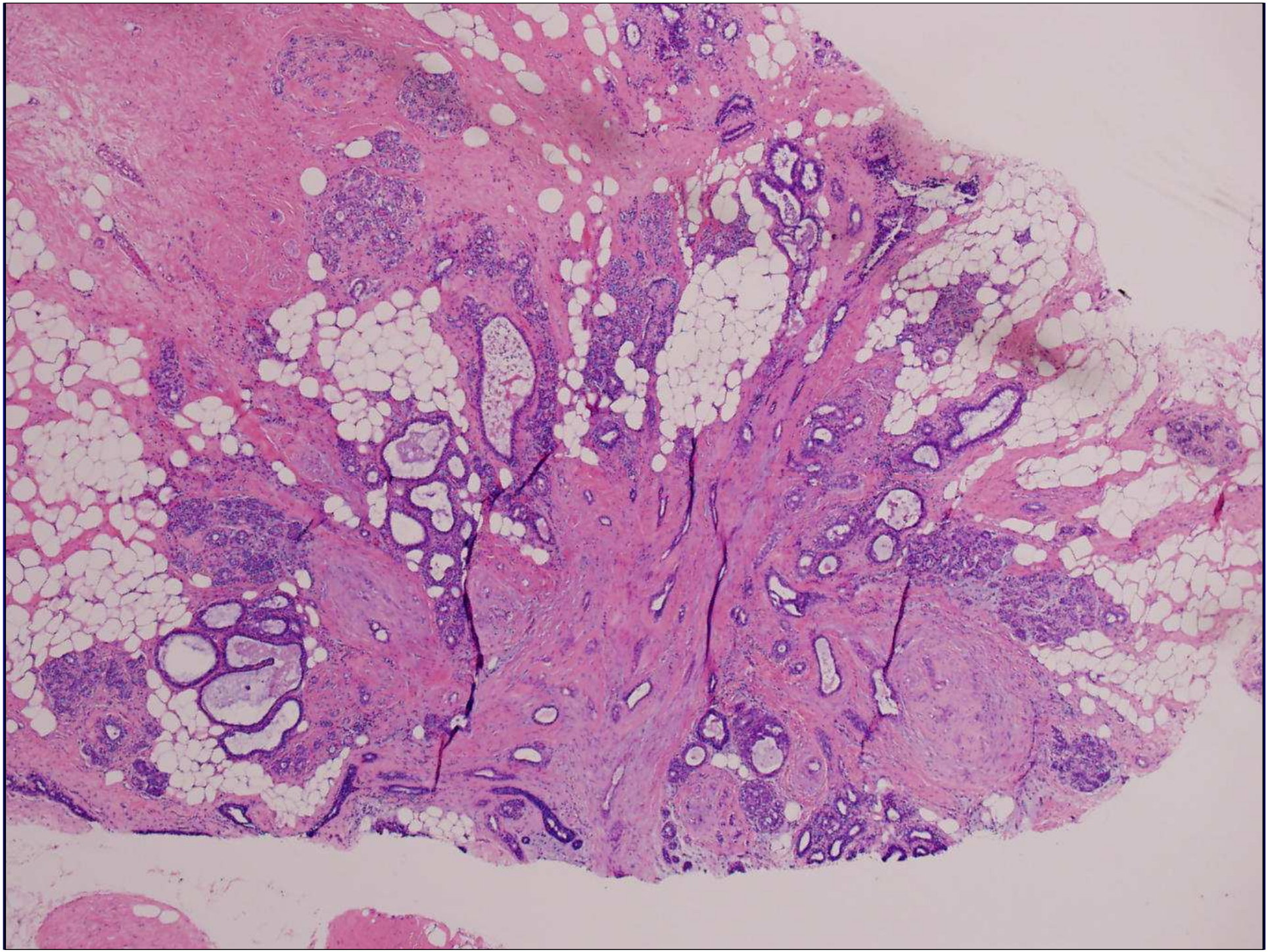
Tubular carcinoma

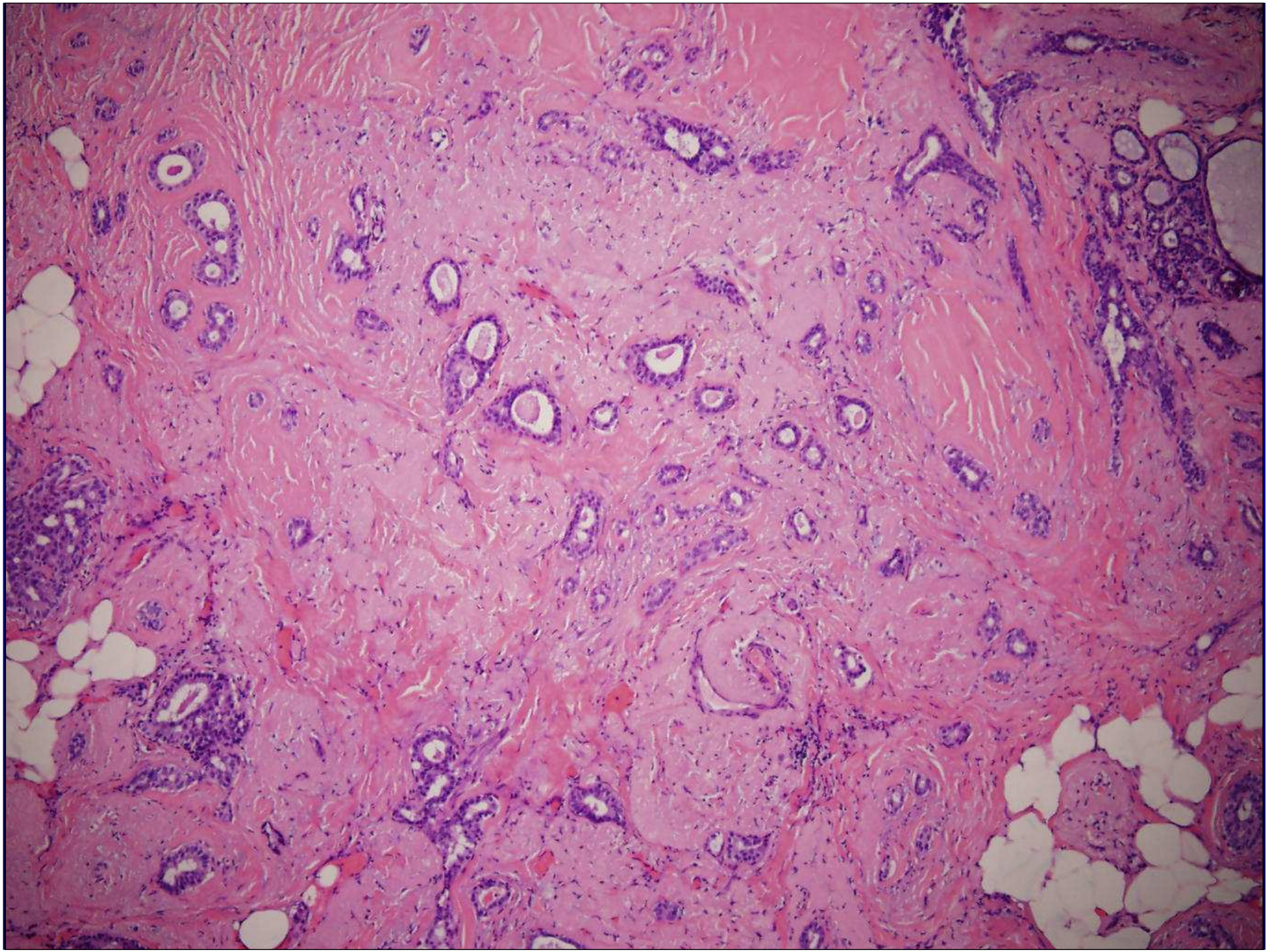


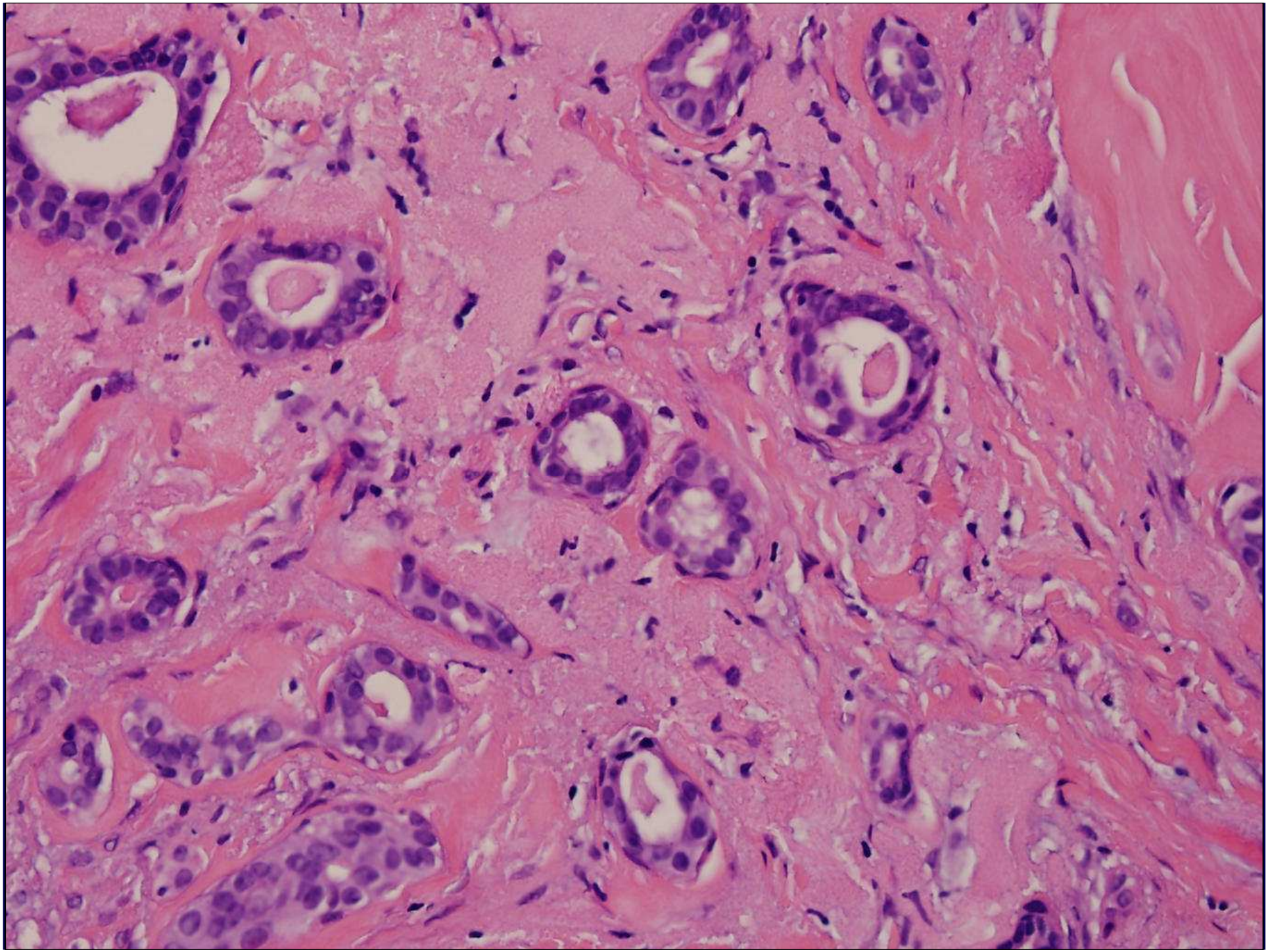
Radial Scar

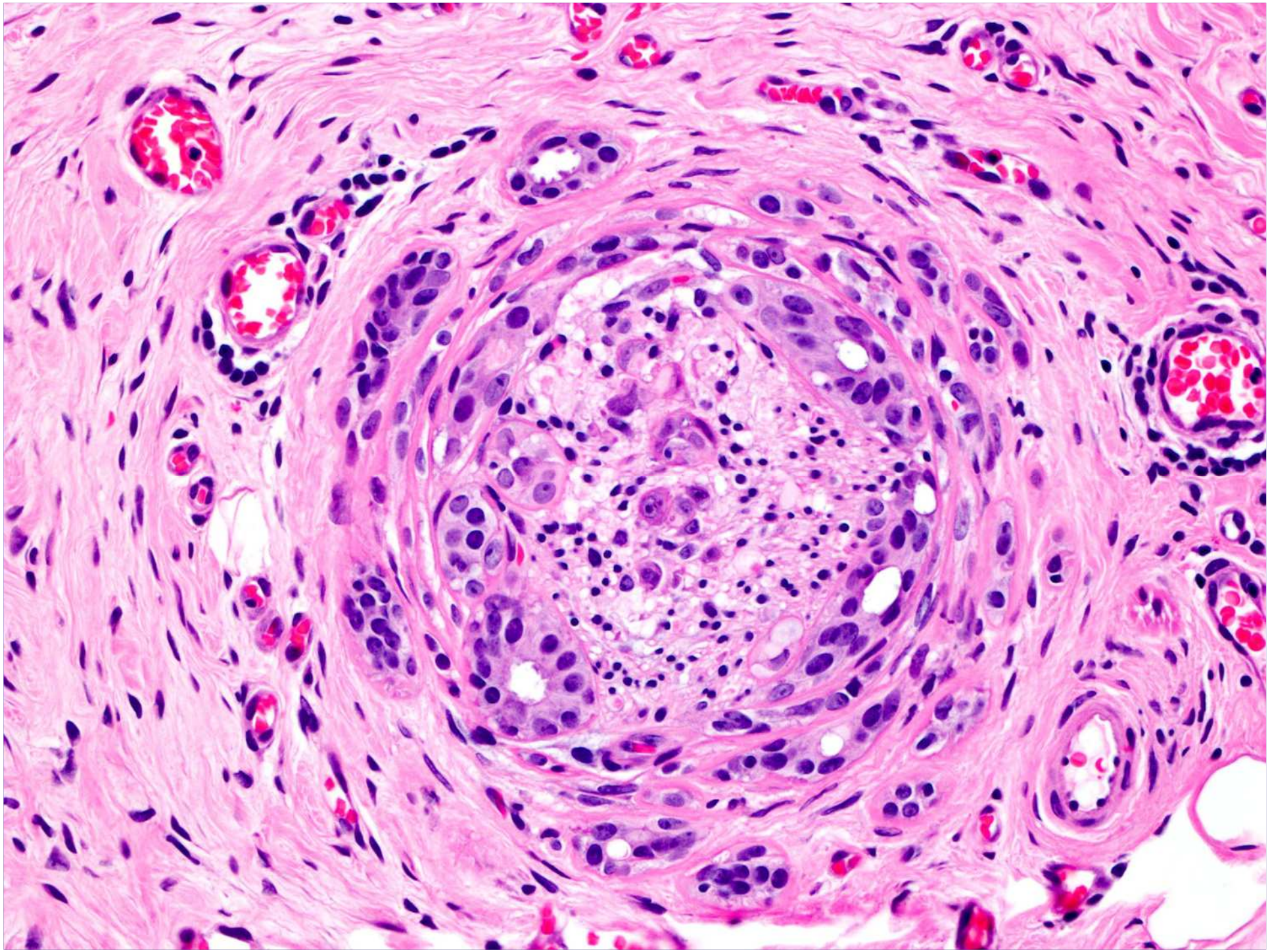




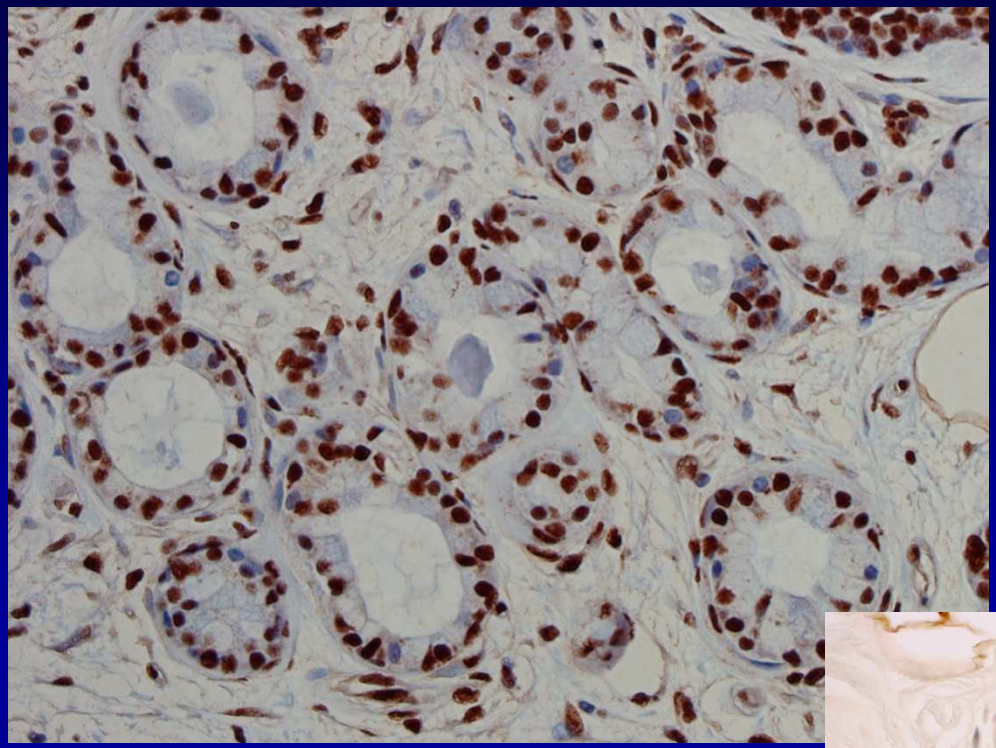




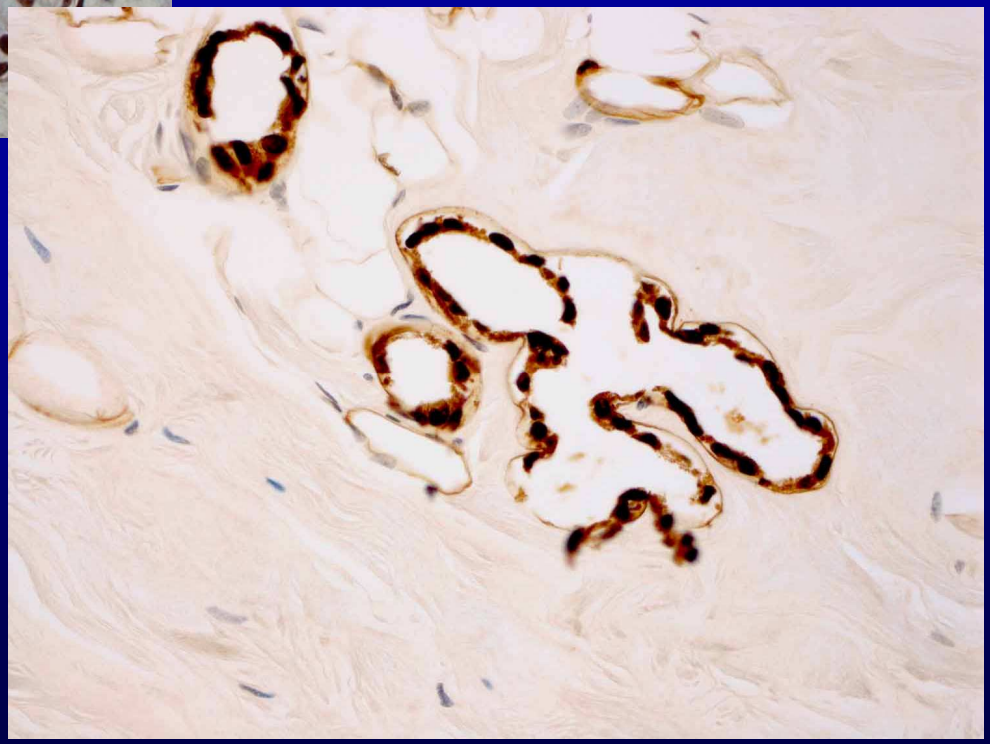




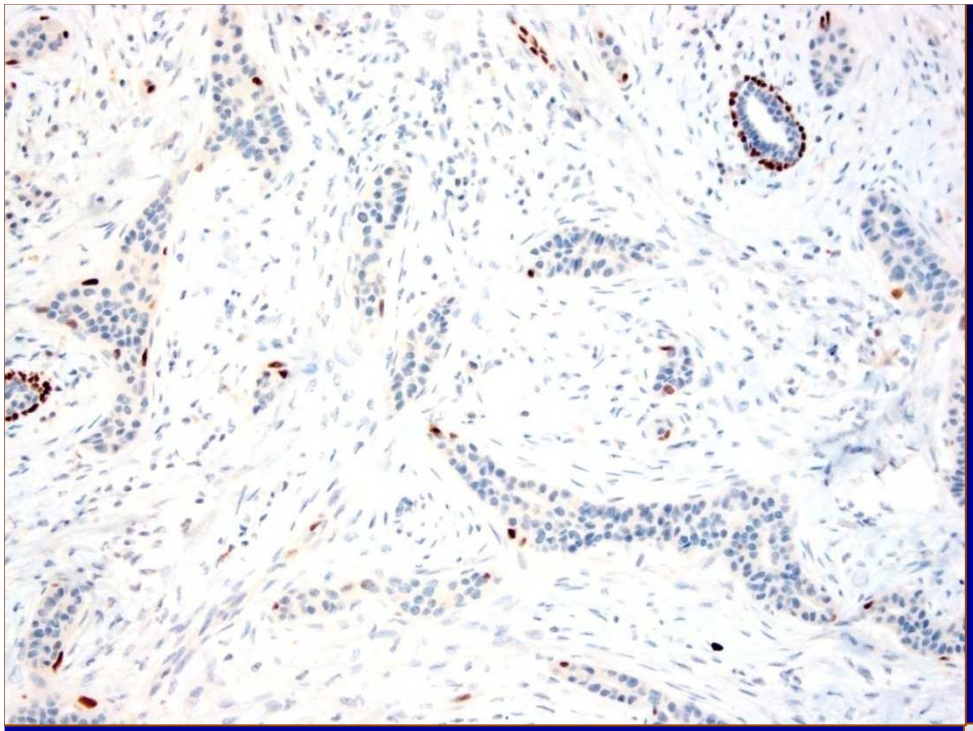
Mixed pattern of growth



Tubular Adenosis



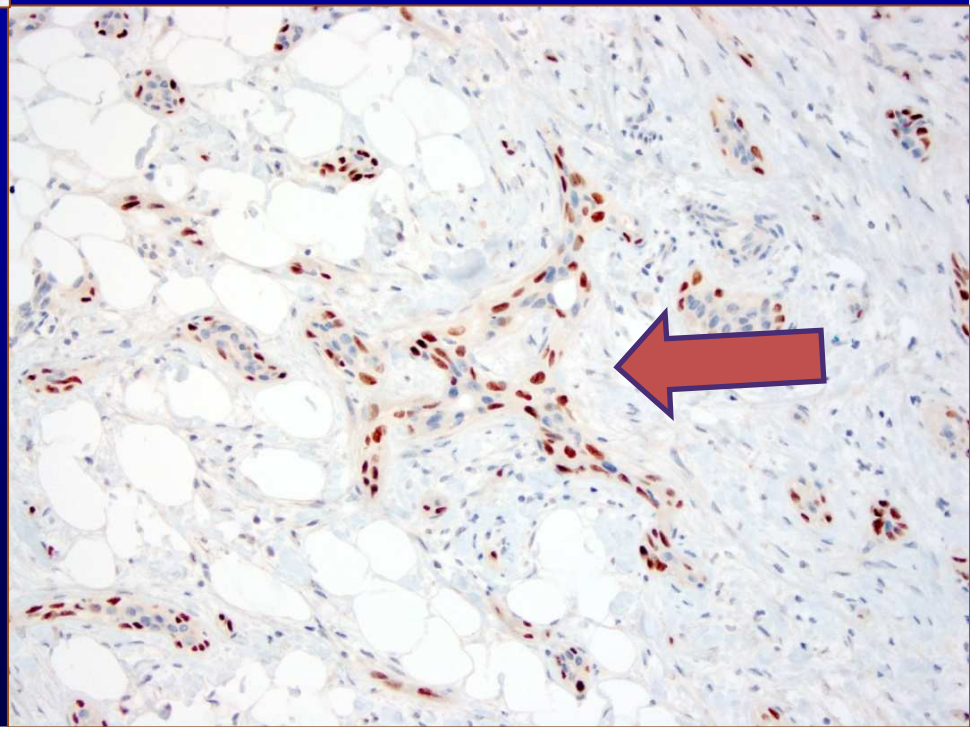
MicroglNdular Adenosis

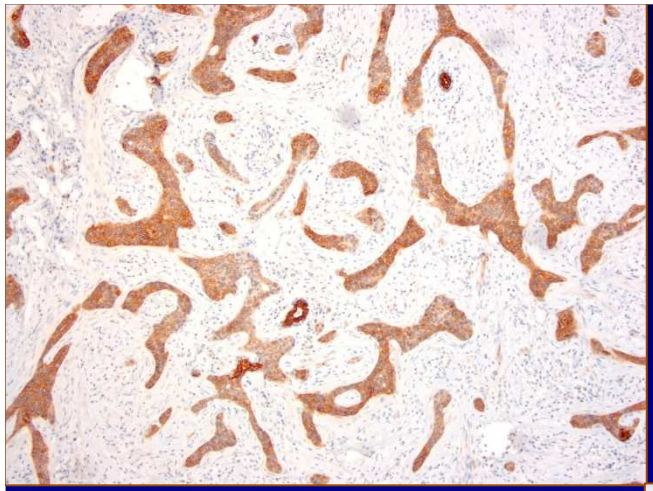


p63

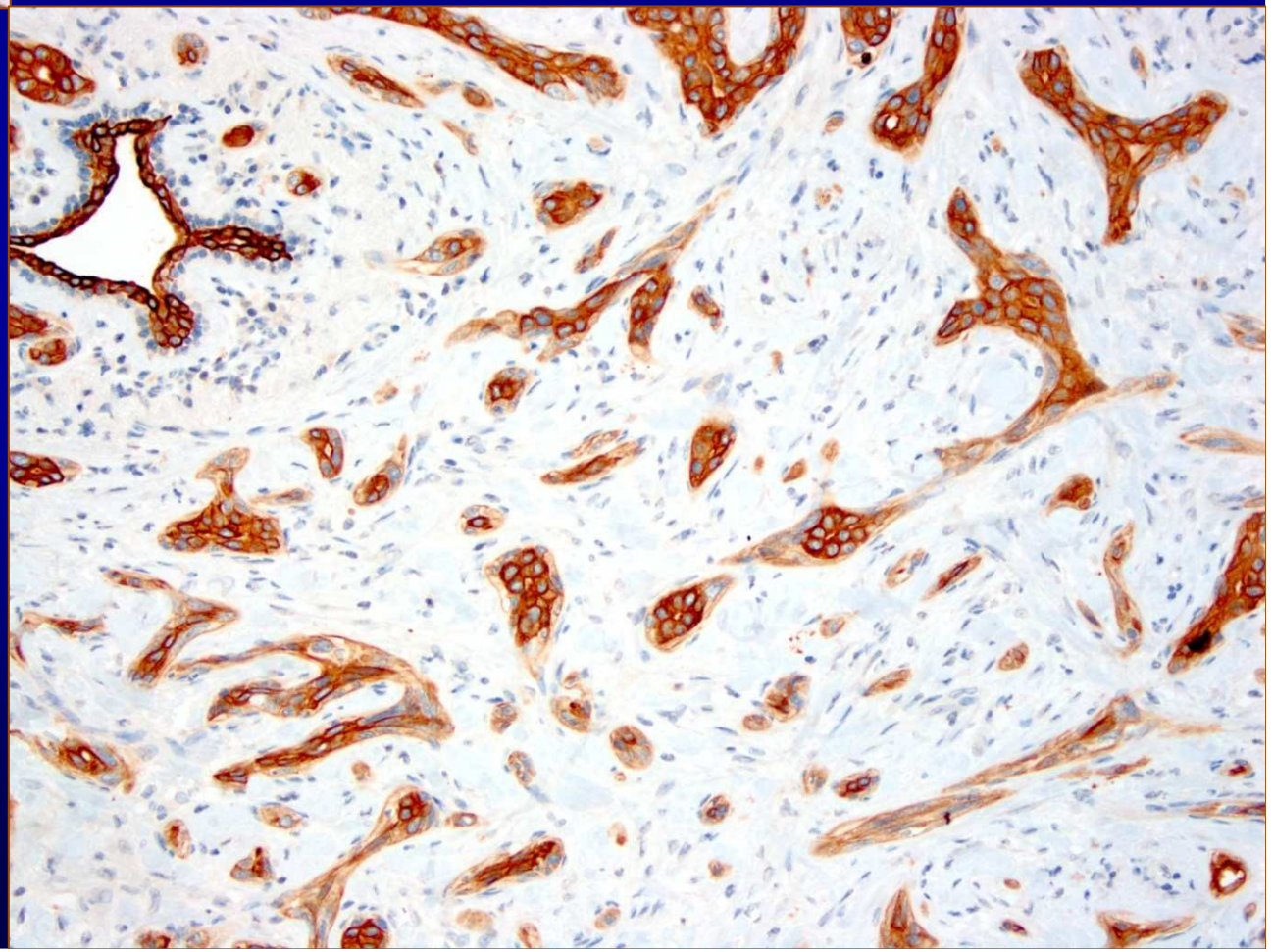
VARIABLY POSITIVE
IN BASALLY
LOCATED CELLS

LUMINAL CELL
STAINING

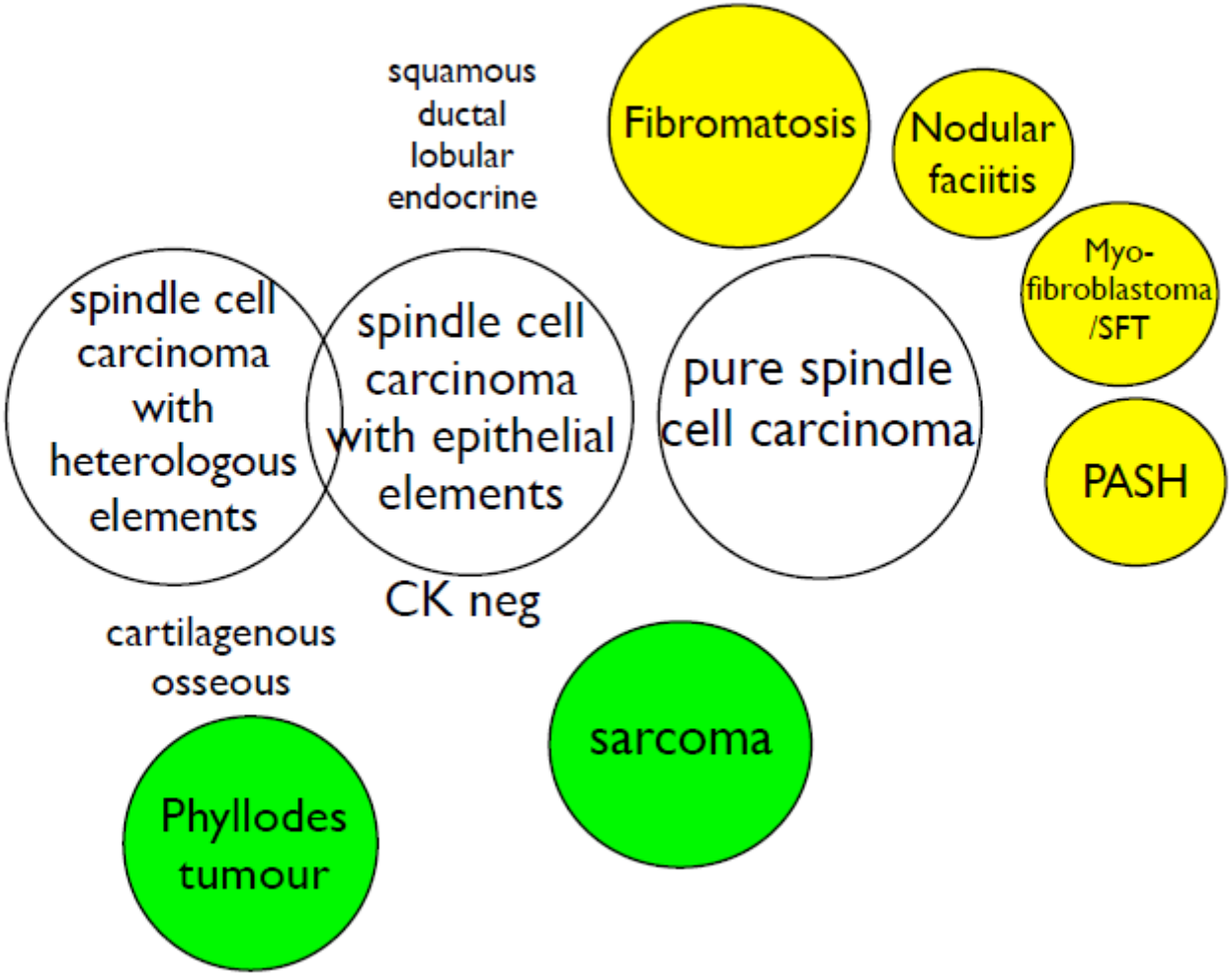




“CORE” STAINING PATTERN



ΔΔ spindle cell lesions



Summary

- important to recognise
- clinical team often do not appreciate differences in special type tumour outcome
- genomic basis demonstrate many similarities
- greater understanding may lead to targeted therapies

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