

Pt. Name:	نور غالب ناجي سالم	Lab Number:	2006-2026
Pt. Age:	Adult.	Gender:	Female
Received date:		Reported date:	2026-04-11
Referred By:	د/ أحمد ثابت الزماني		

PATHOLOGY REPORT

Clinical Information.	Excision of breast cyst and hematoma.
Nature of specimen.	Excision biopsy

GROSS:

Two specimens were received:

- Designated as 1: fibrofatty tissue measured 3 x 2.5 x 2 cm, showed a cyst measuring 1.8 cm, totally embedded.
- Designated as 2: fibrofatty tissue measured 3.5 x 3 x 2.3 cm, totally embedded.

MICROSCOPIC:

Tissue sections from sample No. (1) show dilatations of breast ducts which are the seat of multiple papillary tumors with complex structure. Papillae are covered by ductal and myoepithelial cells. Tumors show fibrotic cores entrapping hyperplastic ductal structures with related focal sclerosis of the ducts. However, no evidence of invasion of surrounding breast tissue in the examined sections. Lining cells show evidence of mild to moderate atypia manifested by focal enlargement of the nuclei and acquisition of prominent nucleoli.

Tissue sections from sample No. (2) show ducts are distended by hyperplastic cells (usual ductal hyperplasia, UDH). Rest of breast tissue shows preserved normal lobular pattern with stromal fibrosis and cystic change. Some breast ducts are dilated with dense periductal infiltration by lymphocytes, plasma cells, macrophages and neutrophils. No evidence of specific granulomas. No evidence of malignancy and excision looks complete.

DIAGNOSIS:

Breast lesions, excision:

- Multiple intraductal papillomas atypia.
- Fibrocystic mastopathy with usual ductal hyperplasia (UDH).
- Duct ectasia with periductal mastitis (non-specific).
- No evidence of malignancy and excision looks complete.
- Recommended for follow up.

COMMENT:

These lesions are associated with relative increase in the risk of developing subsequent breast carcinoma (relative risk for lesions devoid of atypia is 3.3-3.9). This risk is more in lesions exhibiting atypia, in peripheral than in central papillomas, as well as in breasts harboring multiple tumors. The current case show all these three risk factors, hence careful follow up (mammographically and clinically) is strongly advised.

Pathologist

Prof. Dr. Neveen Tahoun, MD, PhD
11-04-2026

Nerveen Tahoun

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