Papillary Carcinoma of the Male Breast, A Case Study

Kristi Dikranis DO, General Surgery PGY-3

Introduction

Male breast cancer is rare, accounting for 0.8% of all breast cancers. Furthermore, intracystic papillary carcinoma is extremely rare, representing 5-7.5% of all male breast carcinomas. It generally occurs in older populations, with a median age at diagnosis at 68, which is 5 years older than in women. Risk factors include advanced age, radiation exposure, and conditions affecting estrogen and androgen balance. Prognosis is generally good compared with other histopathologic subtypes.

Demographics

- 71-year-old male with past medical history of hypertension, hyperlipidemia
- Past surgical history of open right inguinal hernia repair with mesh
- Family history of colon cancer in paternal uncle
- Denies alcohol or drug use but admits to 35-pack-year smoking history

Presentation

Patient underwent outpatient lung cancer screening with a Chest CT and was found to have an incidental left breast retroareolar mass in addition to small bilateral lung nodules. Upon further inquisition, patient admits to noticing a small left breast mass since high school with occasional clear and brown-tinged nipple discharge. He was ultimately referred to Breast Oncology. Vital signs at outpatient visit were within normal limits. On exam, the patient was found to have a firm but nontender left breast mass.

Imaging

The patient underwent a diagnostic mammogram which revealed a high density macrolobulated mass seen in the central left breast, BI-RADS 5. Ultrasound demonstrated a complex cystic and solid multilobulated mass measuring 3.5 x 2.5 x 2.5cm. He subsequently underwent a core needle biopsy and clip placement which revealed ER/PR positive encapsulated papillary carcinoma, HER-2 not assessed.

Treatment

The patient underwent a left breast lumpectomy without sentinel lymph node biopsy. He initially tolerated the procedure well but subsequently did develop a surgical site infection with abscess requiring surgical drainage. Final pathology demonstrated multiple smaller foci of DCIS which did not involve the surgical margins. The patient declined genetic testing and radiation therapy but is considering tamoxifen treatment.

Discussion

This case represents the importance of early detection of breast cancers in both women and men. The majority of inherited breast cancers in men are associated with BRCA2 mutations rather than BRCA1, highlighting the importance of genetic screening. Most male breast cancers present late, often with more than 40% of individuals having stage III or IV disease.