

A Sclerodermiform Breast Cancer

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Abstract

Cancer of the male breast is a rare disease in men. It composes less than 1% of all breast carcinomas and less than 1.5% of all malignant tumors in men [1]. Epidemiologic features, prognostic factors, survival by stages, patterns of metastasis, treatment and response to treatment in men are similar to that of women with breast carcinoma. However, breast cancers in men are more likely to respond to hormonal manipulation [2]. Metastases will occur in about one third of the patients; as in female breast cancer, the common sites are the lung, bone, brain, liver, lymphnodes and skin [3].

Skin involvement as a symptom, or even the presenting sign, of this cancer in men is not well known by dermatologists [4]. In fact, a review of the literature reveals few references about this subject.

The purpose of our work, through a case of breast cancer in humans and a literature review, is to describe the epidemiological, clinical and therapeutic aspects of breast cancer in humans.

Case Report

This is a 61-year-old patient with no significant pathological history. For 2 years, multiple lesions in the left hemithorax gradually increased in size, becoming indurated. On clinical examination, it was a sclerodermiform cupboard surmounted by multiple flesh-colored papules, surmounted in places by the meltileric crusts of the left hemithorax with disappearance (Figure 1).



Figure 1: Left hemithorax with disappearance.

Homolateral nipple associated with lymphoedema of the upper limb. The examination of ganglionic areas was delicate on the side of lymphoedema and found lenticular adenopathies on the right side. The rest of the somatic examination was without particularities. In front of this clinical picture we suspected: breast adenocarcinoma, squamous cell carcinoma, cutaneous metastasis, fungoid mycosis sclerodermiform, scleromyxedema.

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The cutaneous histology with immunofluorescence was in favor of a cutaneous infiltration by a non-specific grade I invasive mammary adenocarcinoma of Ellis and Elston, the hormone receptors were positive.

The extension assessment revealed lymph node and lung metastases. After a multi-disciplinary consultation meeting, the patient received chemotherapy and adjuvant radiotherapy.

Discussion

Carcinoma of the breast in men is associated with a less favorable prognosis than in women because of anatomic factors, clinical stage (tumor size and axillary node status), histopathologic type, or age of patient with an overall 5-year survival from 22% to 72% for all stages [2]. Cutaneous metastases often occurs after patients undergo mastectomy or receive radiotherapy [5,6]. In patients with breast carcinoma, the metastatic lesions usually spread to the overlying skin, largely through lymphatic channels [7].

The most frequently reported clinical aspect is that of a painless palpable mass under areolar. Other clinical signs that are indicative are changes in the nipple and involvement of the areolar and periareolar skin. A large clinical polymorphism is widely described in the literature causing a diagnostic and therapeutic delay.

Tianco et al [8] reported a female patient with multiple nodules reaching 900 not previously reported. The high number of nodules and our patient being male is an interesting point. In general, cutaneous metastase simply a poor prognosis; however, they do not always imply a fulminant course [9]. Kim et al [10] reported a man with breast cancer who had extensive, slowly progressive metastases to the skin. Raton et al [4]. Also reported two cases with skin metastases from male breast carcinoma.

Skin tumor invasion is more frequent and earlier in men than in women because of the small volume of the mammary gland. This is an element of poor prognosis, associated with a higher frequency of distant, lymph node or visceral tumor dissemination as in our case.

Conclusion

Breast cancer in humans remains rare but has a poor prognosis. The appearance of cutaneous signs is the main reason for consultation. We underline the role of the dermatologist in the early diagnosis of this cancer in order to improve the vital prognosis of patients.

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