Malignant Phyllodes Tumor of the Breast: A Case Study

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Malignant phyllodes tumors of the breast are rare, fast-growing tumors that can be difficult to diagnose. A case study is featured about a young adult patient who lacked insurance and received a delayed diagnosis of malignant phyllodes tumor of the breast. This article includes pertinent clinical and age-specific considerations for comprehensive management.

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Phyllodes tumors of the breast (PTB) are generally rare tumors and represent less than 0.5 percent of all breast tumors (Reinfuss et al., 1996). Those neoplasms are most commonly diagnosed between 35–55 years of age, with reports of cases in both adolescents and among older adult women (Khosravi-Shahi, 2011; Reinfuss et al., 1996). PTB are classified as benign, borderline, or malignant based on the degree of atypia in the stroma and overall mitotic rate (Kraemer et al., 2007). The five-year survival rate for malignant PTB is reported to range from 66%–82% (Khan & Badve, 2001). Ultrasound findings also include a heterogeneous echo pattern and can be oval, round, or lobulated (Telli, Horst, & Chen, 2002).

Diagnostic Evaluation

In general, PTB tend to be large, fast-growing, and difficult to differentiate from benign fibroadenoma in clinical presentation, and radiologic and pathologic findings (Kraemer et al., 2007). PTB are usually palpable and appear as mobile dominant masses in physical examinations (Khan & Badve, 2001). These tumors often exhibit a period of rapid growth even after being stable for months or longer (Telli, Horst, Guardino, Dirbas, & Carlson, 2007). On mammogram, PTB appear well defined and can be oval, round, or lobulated (Telli et al., 2007). Ultrasound findings also include a heterogeneous echo pattern and absent microcalcification (Chao, Lo, Chen, & Chen, 2002).

The diagnosis of malignant PTB is based on histopathologic evaluation. Like their...