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Case Report

# Rare Case of Invasive Lobular Carcinoma in Male

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## Abstract

Invasive lobular carcinoma of the male breast is a very rare subtype of a rare disease in men (1% of all breast cancers), which is likely related to the lack of lobular development in the male breast. It is a pathology little known to the general public and the diagnosis is most often late, making the prognosis worse. The management of cancers in men is similar to that of women with certain particularities for surgical treatment.

***Keywords:*** *Breast Cancer; Male; Lobular Carcinoma*

## Introduction

Lobular breast carcinoma is exceptionally rare, accounting for only 1% of all breast cancers. Only a few cases have been reported in the literature. Here we report a case of lobular carcinoma of the male breast in a man.

## Case Presentation

A 60-year-old man presented with swelling and induration of the left breast. There was no history of hormonal treatment or family history of cancer. Physical examination of the breast revealed a firm, fixed and painless mass posterior to the nipple, associated with ulceration and skin retraction, the overlying skin was hyperpigmented (Figure 1A). Breast ultrasound shows a mass in the retro-areolar region, irregular, heterogeneous, non-attenuating, classified BI-RADS 5 by the ACR (Figure 1B). The histological study was in favor of a carcinomatous tumor proliferation made of single-celled sections with a single file appearance (HEx200), revealing invasive lobular carcinoma (Figure 1C). The extension assessment by CT TAP did not reveal secondary remote locations (Figure 1D). The patient underwent radical mastectomy with lymph node dissection.

## Discussion

Lobular carcinoma of the male breast is an extremely rare entity, accounting for 1 - 2% of all cases of male breast cancer, due to the lack of development of lobular structures in the normal male breast. The average age at diagnosis is around 65 years old. The exact

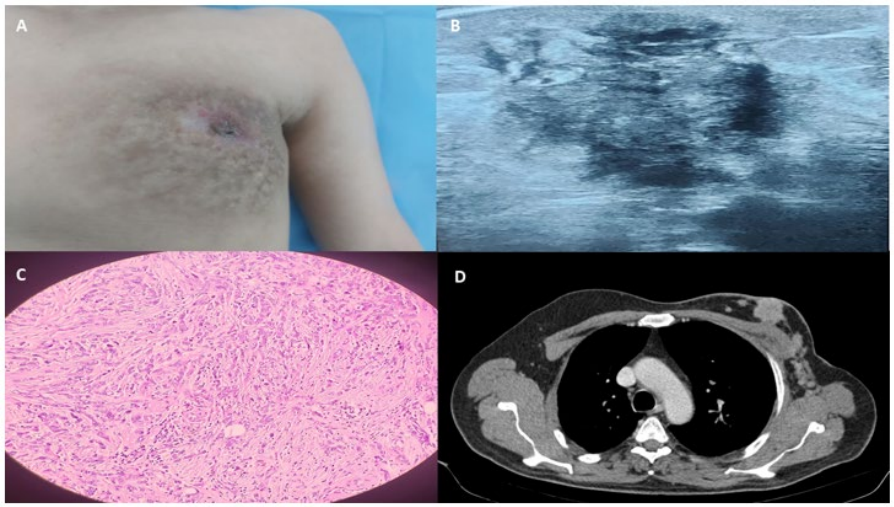


***Figure 1:*** *(A) Ulceration and nipple retraction with skin hyperpigmentation. (B) Focused ultrasound of the left breast demonstrates an irregular hypoechoic mass with spiculated edges located eccentrically to the nipple. (C) Histopathology with hematoxylin and eosin staining shows the classic invasive lobular carcinoma growth pattern of linear files of dyscohesive cells. (D) Axial CT chest section shows well-circumscribed soft tissue density in the left breast.*

etiopathogenesis of lobular carcinoma remains unknown, but numerous risk factors have been elucidated, such as family history, previous thoracic radiotherapy, genetic risk factors (BRCA2>BRCA1 mutations, Klinefelter syndrome), hormonal status. disrupted (increase in estrogen that comes from an endogenous or exogenous source) and testicular damage. Gynecomastia is not a risk factor in itself. If a breast mass is clinically suspected, mammography is the initial modality of investigation, followed by ultrasound and other techniques as needed, including MRI. Any suspicious breast mass is the objective of a histological test with dosage of hormonal receptors [1,2]. Carcinomas of the male breast have a higher rate of hormone receptor positivity than those of the female breast. Radical mastectomy with lymph node dissection is the optimal local treatment. Chemotherapy and hormonal therapy can be used in the adjuvant setting especially when the prognosis is poor [3].

## Conclusion

Lobar carcinoma in the male breast is a rare subtype of a rare disease, this is due to the lack of lobular proliferation seen in normal male breast tissue. Breast cancer remains a largely treatable disease in both men and women, but its treatment depends on the stage of the disease at diagnosis and the hormone receptor status of the tumor.

## Conflict of Interest Statement

No conflict of interest.

## Bibliography

1. IS Fentiman., *et al*. "Male breast cancer". *Lancet* 367.9510 (2006): 595-604.

2. Nguyen C., *et al*. "Male breast disease: pictorial review with radiologic-pathologic correlation". *Radiographics* 33.3 (2013): 763-779.

3. LA Korde., *et al*. "Multidisciplinary meeting on male breast cancer: summary and research recommendations". *Journal of Clinical Oncology* 28.12 (2010): 2114-2122.

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