Case Report

44 year old male with breast mass

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History

• 44-year-old African American male presented for evaluation of a self-detected mass in his left breast

• Mass had been present for four months, and had undergone little growth since detection

• No history of trauma to the breast, erythema, or mastalgia, but did report a 30-year history of stable bilateral gynecomastia
History

- Additional symptoms: erectile dysfunction
- PMHx: mild hypertension (treated with ACE inhibitor)
- PSHx: repair of inguinal hernia
- FHx: mother died of lung cancer
- Social Hx: alcohol abuse until three years ago; current smoking habit of cumulative 50 pack-years; marijuana use
Physical Exam

• Notably tall stature with long, thin limbs and sparse body hair
• Mobile, non-tender, retroareolar mass (1.5x1cm) in the left breast, and moderate bilateral gynecomastia was present
• No overlying skin changes, nipple retraction, nipple discharge, or palpable axillary nodes
A highly suspicious spiculated left breast mass was visualized on mammography, and ultrasound of the corresponding area showed a hypo-echoic, irregular mass that measured 2.4 cm in its greatest diameter.
Pathology

- Core needle biopsy was performed
- After diagnosis was made, the patient was counseled for treatment
- Patient underwent surgery with sentinel lymph node biopsy
- Subsequently received chemotherapy and radiation to chest wall
Peripheral Blood
Cytogenetics
What is the diagnosis?