

Case 101 A woman with a sore nipple

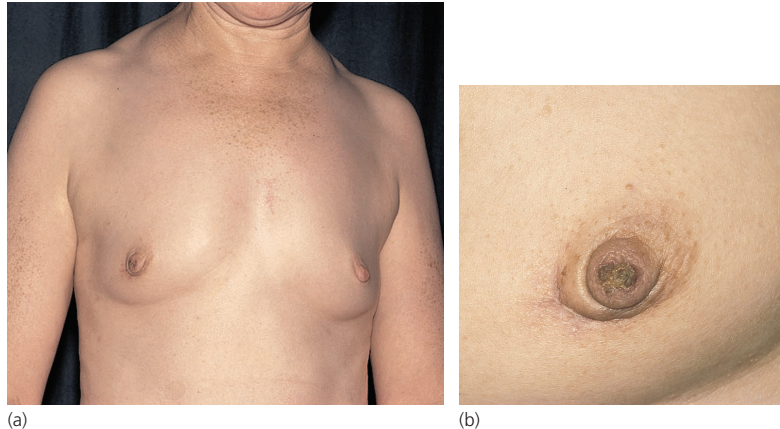


Figure 101.1

Figure 101.1a shows the chest wall and breasts of a 66-year-old housewife, who was referred urgently to the breast clinic by her family practitioner. She stated that her right nipple had become discoloured and thickened over the past year and recently she had noticed some slight blood staining of her brassiere and nightdress. The lesion was slightly sore but not really painful. Figure 101.1b shows a close-up of the affected nipple. She was otherwise well. She had had two children, both girls and both breastfed. Her periods had stopped when she was about 50 and she had not had any hormonal replacement therapy. As far as she knew, there was no history of breast disease in any of the female members of her family.

On examination, the right nipple had the appearance shown in Fig. 101.1b. It was thickened and slightly tender to touch, but no masses could be felt in either breast and the axillae were clear. There were no other relevant findings.

What is your clinical diagnosis?

This has the typical appearance of Paget's disease of the nipple.

Describe the typical features of this condition

A unilateral, red, bleeding eczematous condition of the nipple, which is eventually destroyed by the disease. There may or may not be an underlying carcinoma to feel.

There are two other diseases that bear this surgeon's name; what are they?

Sir James Paget* also described Paget's disease of bone (osteitis deformans), which is common and still of unknown aetiology, and Paget's disease of the glans penis, a rare condition but similar in appearance to the nipple disease and which may also develop into a frank carcinoma.

*Sir James Paget (1814–1899), surgeon, St Bartholomew's Hospital, London.

Part 2: Cases

A biopsy was taken of this lesion. What are the typical microscopic findings?

The deep layers of the epithelium contain multiple clear large Paget cells with small dark nuclei (Fig. 101.2, arrowed in the inset). The underlying dermis contains an inflammatory cellular infiltrate. As is usually the case, the specimen in Fig. 101.2 also shows an associated invasive ductal carcinoma.

What is the commonly held theory of the aetiology of this disease?

Paget's disease probably represents invasion of the nipple by malignant cells that arise in a mammary duct and that also give rise to the associated solid breast tumour when this develops.

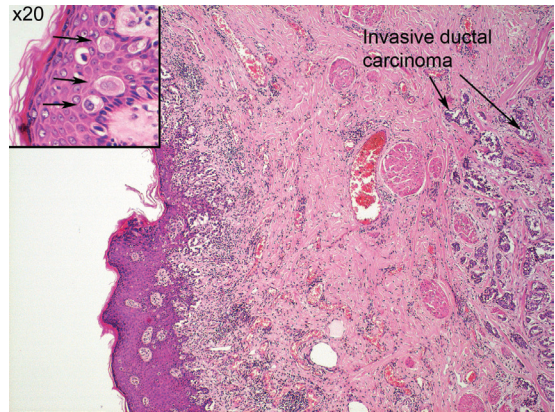


Figure 101.2 Invasive ductal carcinoma (magnification $\times 4$ (inset $\times 20$), haematoxylin and eosin stain).