

IMAGES AND VIDEOS

Primary breast fibromatosis in a male

Fibromatosis mamaria en un hombre

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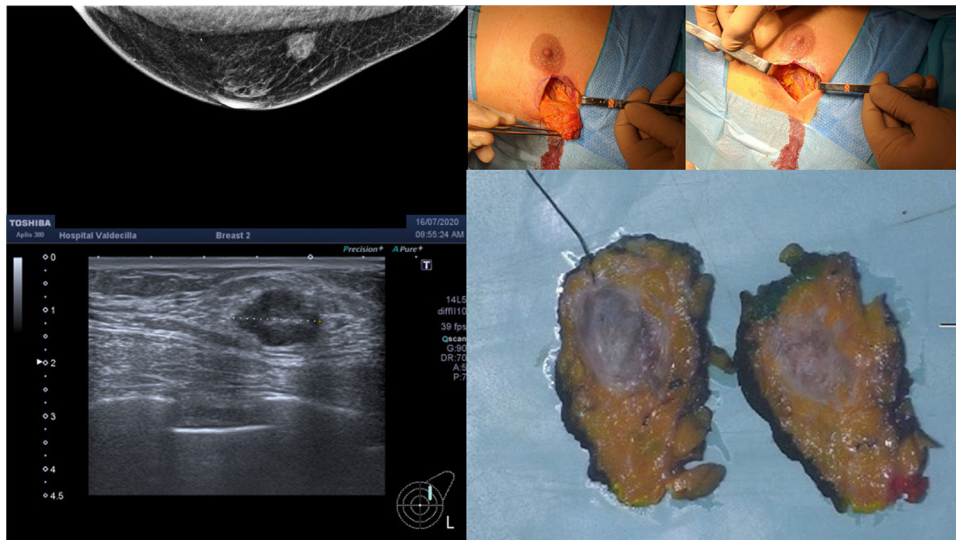


Figure 1 Radiological (mamography and mammary echography), surgical procedure (lumpectomy) and macroscopical aspect of surgical specimen.

A 41-year-old man presented with a painless left breast lump. Mamography with a core needle biopsy (immunohistochemical study) and axillary echography ruled out carcinoma and enlarged lymph nodes; the histologic study suggested a breast fibromatosis. He was operated on and a tumorectomy was carried out.

Fig. 1 demonstrates a composition of images: radiological (mamography and mammary echography), surgical

procedure (lumpectomy) and macroscopical aspect of surgical specimen. The definitive pathological diagnosis was breast fibromatosis.

Mammary fibromatosis is a bizarre clinical entity, rarely reported in men,¹ but poses significant diagnostic and therapeutic challenges.² It usually presents with a palpable, firm, and painless mass that is difficult to differentiate from breast carcinoma based solely on the imaging approach.²

The optimal management is unknown owing to its rarity, a wide local excision with negative margins is considered the treatment of choice. There is a significant risk of local recurrence, but no metastasis potential, therefore there should be a strict follow-up of patients for at least three years.

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Ethical approval

All procedures performed in studies involving human participants were in accordance with the ethical standards of the institutional and/or national research committee and with the 1964 Helsinki Declaration and its later amendments or comparable ethical standards. The Human Investigation Committee (IRB) of University B approved this study.

Informed consent was obtained from all individual participants included in the study.

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Conflict of interest

All authors declare that they have no conflict of interest.

References

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