



Case Report

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Bilateral Breast Lymphoma in a Developing Community



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Breast lymphoma is a rare entity more so when they are bilateral; usually single case reports are available. Some examples have come from countries as far apart as Iran, Turkey, Pakistan, and India. Therefore, 3 cases dealt with at a Reference Pathology Laboratory in Nigeria are deemed to be worthy of documentation.

Keywords: Breast; Lymphoma; Bilateral; Nigeria

Introduction

The lymphoma occurs rarely in the breast. Thus, individual or few cases have been reported recently from countries as far apart as Iran, Pakistan, India, Turkey and USA [1-5]. As local epidemiological data were recorded personally, this paper documents pertinent information concerning the Igbo ethnic group in Nigeria [6]. The series was facilitated by the institution in Nigeria of a histopathology data pool as was recommended by a Birmingham (UK) group [7].

Case Reports

Case 1

NO. A 24-year-old woman consulted Dr Anyaeze at the Charles Borromeo Hospital, Onitsha, with the history of rapidly growing, painless lumps in the left breast. It had 3 weeks earlier been biopsied and proved to be lymphoma. This time, the other breast was involved. There were 2 mobile masses each in the upper outer and lower outer quadrants about 5cm across. Biopsy was performed and the material was submitted to the senior author (WO). This proved to be typical malignant lymphoma.

Case 2

AC. 36-year-old woman, complained to Dr. M. Molloy at the Mater Hospital, Afikpo, Nigeria, of lumps in both breasts of 9 months' duration. Both were large mobile masses. At operation, both underwent excision biopsy. Carcinoma was queried on submission to The Reference Laboratory. The specimens

measured up to 8 cm across. Microscopy revealed breast tissues being replaced by sheets of mitotically active tumor with the classical appearance of the lymphoid type. Reed-Sternberg cells were not discerned. Therefore, malignant lymphoma was diagnosed.

Case 3

OG. A girl aged 18 years, consulted Dr. Andrew Kalk at the NONA Hospital, Enugu, Nigeria. She complained of bilateral tumors of the breasts. The growths showed remarkable speed. Both measured 6.0 cm and 4.0cm across respectively. Microscopy revealed background fibro sclerosis and adenosis as well as small, round, hyperchromatic, mitotically active, tumor cells displaying no differentiation. Malignant lymphoma was diagnosed.

Discussion

A question that crops up in bilateral tumors is whether the appearance was synchronous or metachronous [5]. In this series, Case 1 showed a gap of 3 months thereby indicating the latter type. It is noteworthy that all 3 patients attended Missionary Hospitals, thereby signifying the role played by such institutions in a developing community [8]. In particular, it disproves the one-time debate in the UK as to whether a central laboratory could be useful to distant hospitals [9]. The common impression is that the affected patients are generally young. This is true of our series. Diagnosis has resulted from fine needle aspiration biopsy [10]. However, excision biopsy is the vogue which was

Global Journal of Reproductive Medicine

practiced in this locality. Occasionally, the examination reveals multiple, firm, hard lumps filling all quadrants of both breasts [11]. This picture did not obtain here.

References

- Poureisa M, Daghighi MH, Mazaheri-Khameneh R, Ghadirpour A (2013) Bilateral primary breast lymphoma in a teenage girl with multi-organ involvement. Acta Med Iranica 51(8): 572-576.
- Bano R, Khan AI, Shahraf A, Abid M (2016) Primary bilateral breast lymphoma: A review of literature and report of four cases from a single centre. J Cancer Allied Specialties 2(2): 1-2.
- 3. Gupta R, Bhardwaj S (2012) Bilateral primary non Hodgkin's lymphoma of the breast: A rare case report. JK Sci 14(1): 43-44.
- 4. Yetim I, Yetim TD, Ozkan OV (2011) Bilateral primary breast lymphoma: A rare case. J Breast Hlth 7(3): 185-186.



- Shapiro CM, Mansur D (2001) Bilateral primary breast lymphoma. Am J Clin Oncol 24(1): 85-86.
- 6. Basden GT (1966) Niger Ibos. Cass, London, UK.
- 7. Macartney JC, Rollaston TP, Codling BW (1980) Use of a histopathology data pool for epidemiological analysis. J Clin Pathol 33: 351-353.
- 8. Onuigbo WIB, Mbanaso AU (2005) Urban histopathology service for a remote Nigerian hospital. Bull Roy Coll Pathol 132:32-34.
- 9. Lilleyman J (2012) From the president. Bull Roy Coll Pathol 117: 2-3.
- Maounis N, Ellina E, Papadaki T, Ioannides G, Kiale K, et al. (2005) Bilateral primary lymphoma of the breast: A case report initially diagnosed by FNAC. Diagn Cytopathol 32: 114-118.
- 11. Pankaj S, Shalini S (2007) Bilateral primary breast lymphoma: A case report with review of literature. Inter J Oncol 5(2): 1-4.

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