

## Lobular carcinoma in situ with necrosis – does this indicate an underlying carcinoma?- Kirupakaran Silas Arun- University of Cambridge

**Kirupakaran Silas Arun**

University of Cambridge, UK

**Background:** Lobular carcinoma in situ (LCIS) is an unusual lesion of the breast that is a neoplasia rather than a carcinoma. Almost all cases of LCIS lack any pleomorphism or necrosis. A PubMed library search into cases of LCIS with necrosis found one valid result, which documents just 18 cases of LCIS with necrosis from the recent databases of six tertiary institutions in the US. When immunohistochemistry confirms LCIS with necrosis, the management plan shifts away from watchful waiting and more towards surgical intervention.

**Case report:** We report the case of a 43-year-old lady who presented with a right breast mass. An initial mammogram showed some microcalcification fibrocystic changes. Subsequent histology and immunohistochemistry confirmed LCIS with necrosis. Due to the atypical finding of necrosis in conjunction with LCIS, a decision was made to

perform further random core biopsies. This confirmed a more sinister underlying mixed lobular and ductal type carcinoma. Reassuringly, US and MRI excluded involvement of the other breast and metastatic disease. A nipple sparing mastectomy and sentinel lymph node biopsy plus immediate reconstruction on the right side was performed followed by adjuvant tamoxifen. 12 months on, the patient is well with no complications.

**Conclusion:** This case highlights the importance of utilising multiple diagnostic techniques and a prudent histologic examination when a breast lump is in question. LCIS associated with necrosis is rare, but should raise suspicions of an underlying cancer. One way of investigating this would be to perform further random core biopsies and other modalities of investigation with a view to finding further cancer.