

INTERESTING CASE: ECTOPIC BREAST TISSUE

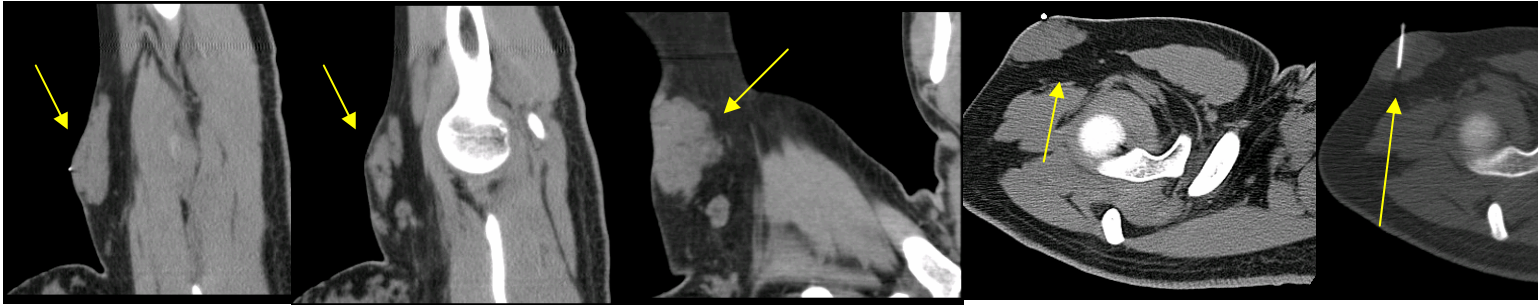


Fig. 1a (Sagittal)

Fig. 1b (Sagittal)

Fig. 2a (Coronal)

Fig. 3 (Axial)

Fig. 4 (Biopsy)



Fig. 5 (Ultrasound)

Clinical Presentation: This is a 29-year-old female who was referred to AIC for relatively large bilateral axillary masses growing after childbirth and lactation. An ultrasound was done and a CT-guided biopsy was performed at AIC.

Imaging Findings: Figs 1-4 are CT images (axial cuts and reformatted sagittal and coronal images). There is a 2 x 5 cm right axillary mass above the tail of the breast (arrows). In retrospect, the ultrasound (Fig. 5) demonstrates architectural texture similar to that of breast tissue (lactating breast in this case). A successful CT-guided biopsy was performed. Fig. 4 shows the biopsy needle within the mass.

Diagnosis: The pathology report showed benign breast tissue with lactational changes and negative for malignancy. These findings are compatible with **ectopic breast tissue** in the right axilla undergoing lactation.

Discussion: Ectopic breast tissue and/or nipples are a congenital anomaly with incidence of about 1%. Ectopic breast tissue is usually overlooked until dramatic hormonal increases occur during puberty or pregnancy. Ectopic breast tissue has been found in multiple locations along the “**milk line**” from the axilla to the vulva., which have been referred to as **accessory or supernumerary breasts**. Formation of a nipple without obvious underlying breast tissue is also common (supernumerary nipples). Ectopic breast tissue is subject to all disease process in a normal breast tissue, including fibrocystic disease and benign and malignant tumors (although very rare). The most common locations are underneath the normal breast and in the axilla (as in this case).

Treatment: Surgical excision is usually performed for cosmetic reasons as well as for eliminating the possibility of future breast cancer in the ectopic breast tissue. In a lactating woman, the ectopic breast tissue also undergoes lactation; however, due to lack of a proper drainage like in a normal breast, the tissue becomes more and more engorged, tender, and painful, facts that may favor surgery.

For more information or any concerns, please contact me directly.

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REFERENCE: A. Ganaraj, MD; et al.. Diagnosis and Treatment of Cancer Arising in Ectopic Breast Tissue. Vol. 58, 566, Nov. 2002, Contemporary Surgery.