RESULTS

In the period between October 1978 to May 1979 study was performed on 70 cases of benign lumps of female breast. All cases are subjected to excision biopsy.

In 47 cases the main presenting symptom was a painless lump or mass which was discovered accidently or during routine examination of the breast, and this constitute 67% of total cases. In 13 cases the main presenting symptom was a painful lump or tender mass and constitutes 18.7% of total cases, while nipple discharge constitutes 14.3% of total cases and it was the main presenting symptom in 10 cases.

The presenting symptoms	No. of cases	% of total
Painless lump	47	67 %
Painful lump	13	18.7%
Nipple discharge	10	14.3%

Table (1) : Relative incidence of main presenting features.

The incidence of the presenting feature varies according to the age from table (2) we notice.

In the first age group (below 20 years) there were 17 cases. In 7 cases the main presenting feature was a painful lump while in 11 cases a painless lump was the main presenting feature. Non of patients of this age group had nipple discharge as a presenting features.

In the second age group (21-30 years) there were 25 cases. In 5 cases a painful lump was the main presenting feature, while in 20 cases the main presenting feature was a painless lump. Also non of patients of this age group had nipple discharge as a presenting feature.

In the third age group (31-40 years) there were 15 cases. In 9 cases painless lump was the presenting feature while in 6 cases nipple discharge was the main presenting feature.

In the fourth age group (41-50 years) there were 12 cases. 7 cases with painless lump, 4 with nipple discharge and one with painful lump as a presenting feature.

Age group	Presenting features		
	Painful lump	Painless lump	Nipple discharge
Below 20	7	11	-
21 - 30	5	20	-
31 - 40	-	9	6
41 - 50	1	7	4

Table (2) : Incidence of the presenting features according to the age.

The 70 cases included in this present series were subjected to excision biopsy. Sixty two cases were subjected to lumpectomy, 46 cases with painless lump as a presenting

feature of these 62 cases. There were 25 cases with fibroadenoma, 16 cases with fibrocystic disease, 2 cases with duct ectasia, one case with duct papilloma, one case with cystosarcoma phylloides, and one case with fat necrosis. Ten cases with painful lump. There were 6 cases with fibrocystic disease, 3 cases with fibroadenoma and one case with duct ectasia. Six cases with nipple discharge as a presenting symptom. There were 3 cases with fibrocystic disease one case with duct papilloma and two cases with duct ectasia.

In 4 cases with nipple discharge as a presenting feature the involved area was excised to ensure removal of affected duct and breast tissue adjacent to it. Three cases with intraduct papilloma and one case with duct ectasia.

Sector mastectomy was done in 3 cases with painful lump as a presenting feature. The 3 cases with fibrocystic disease.

Radical mastectomy was performed in one case on the wrong assumption of being malignant, then by biopsy the case proved to be cystosarcoma phylloides.

Presenting feature	Operative procedure			
	Lumpectomy	Excision to affected part of breast	Sector mastectomy	Radical mastectomy
Painful lump	10	-	3	-
Painless lump	46	-	-	1
Nipple discharge	6	4	-	-
Total	62	4	3	1

Table (3) : Operative procedure as a function of the presenting features.

The relative incidence of different pathological lesions was in the following order :

1. Fibroadenoma was proved by histopathological examination in 28 cases (40% of total cases).
2. Fibrocystic disease was proved by histopathological examination in 28 cases (40% of total cases).
3. Duct ectasia was proved by histopathological examination in 7 cases (10% of total cases).
4. Duct papilloma 4 cases were proved by histopathological examination and constitute 5.7% of total cases.
5. Cystosarcoma phylloides 2 cases were proved by histopathological examination and constitute 2.9% of total cases.
6. Fat necrosis : we have only one case which proved by histopathological examination and constitute 1.4% of total cases.

Pathological lesions	No. of patients	% of total
Fibroadenoma	28	40%
Fibrocystic disease	28	40%
Duct ectasia	7	10%
Duct papilloma	4	5.7%
Cystosarcoma phylloides	2	2.9%
Fat necrosis	1	1.4%
Total	70	100%

Table (4) : Relative incidence of different pathological diagnosis.

The incidence of the various pathological lesions in different age group in the present series were as follows :

In the first age group (below 20 years) there were 17 cases. Ten cases with fibroadenoma, 6 cases with fibrocystic disease and one case with cystosarcoma phylloides.

In the second age group (21-30 years) there were 21 cases, nine cases with fibroadenoma, 11 cases with fibrocystic disease and one case with cystosarcoma phylloides.

In the third age group (31-40 years) there were 17 cases. Four cases with fibroadenoma, 7 cases with fibrocystic disease, 3 cases with duct ectasia and 3 cases with duct papilloma.

In the fourth age group (41-50 years) there were 15 cases. Five cases with fibroadenoma, 4 cases with fibrocystic disease, 4 cases with duct ectasia, one case with duct papilloma and one case with fat necrosis.

Age group	No. of cases	Fibro-adeno-ma	Fibro-cystic disease	Duct ectasia	Duct pap-illoma	Cysto-sarcoma phyllo-ides	Fat nec-rosis
Below 20	17	10	6	-	-	1	-
21 - 30	21	9	11	-	-	1	-
31 - 40	17	4	7	3	3	-	-
41 - 50	15	5	4	4	1	-	1
Total	70	28	28	7	4	2	1

Table (5) : Incidence of the various lesions in different age groups.

From table (6) we noticed that the maximum incidence of fibroadenoma occur in the first age group (below 20) 10 cases (35.7% of total cases) and in the second age group (21-30 years) 9 cases (32.1% of total cases). The youngest patient with fibroadenoma in this present series was 14 years old and the oldest one was 50 years old. From that we can say that the maximal age incidence of fibroadenoma was between 14-30 years and constitute 67.8% of total cases.

Age group	No. of cases with fibroadenoma	% of total
Below 20	10	35.7 %
21 - 30	9	32.1 %
31 - 40	4	14.3 %
41 - 50	5	17.9 %
Total	28	100 %

Table (6) : Incidence of fibroadenoma in different age group.

From table (7) we notice that the maximum incidence of fibrocystic disease occurs in the second age group (21-30 years) 11 cases which constitute 39.3% of total cases, followed by the third age group (31-40 years) 7 cases which constitute 25% of total cases. The youngest patient with fibrocystic disease in this present series was 18 years old and the oldest patient was 50 years old.

Age group	No. of cases of duct ectasia	% of total
Below 20	6	21.4%
21 - 30	11	39.3%
31 - 40	7	25 %
41 - 50	4	14.3%
Total	28	100 %

Table (7) : Incidence of duct ectasia in different age group.

From table (8) we notice that each of these lesions had a characteristic symptom complex.

There were 28 cases with fibroadenoma, 25 cases with a presenting symptom of a very mobile, firm, regular painless tumour, in the other 3 cases the mass was associated with pain in the breast which was exaggerated before and during menstruation due to associated fibroadenosis.

There were 28 cases with fibrocystic disease, in 9 cases the mass is associated with pain and tenderness. In 4 cases there were an increase in the size of the lump in the premenstrual phase. Three cases with nipple discharge as the main presenting symptom while 16 cases with non-tender mass as a presenting symptom.

There were 7 cases with duct ectasia, in 4 cases sticky brown nipple discharge were the presenting symptom while in 2 cases the presenting symptom was subareolar mass. In one case a red, painful subareolar mass with purulent discharge. The abscess was incised and proved to be superficial and contain a small amount of pus, excision biopsy was done later and the lesion proved by histopathological study to be duct ectasia.

Four cases with intraduct papilloma, 3 cases with nipple discharge as the main presenting symptom and one case with a breast mass.

Two cases with cystosarcoma phylloides where the presenting symptom was a rapidly growing mass in a short period of time.

One case with fat necrosis which presented by a hard painless mass and diagnosed as carcinoma but proved by histopathological examination to be fat necrosis.

Presenting symptom	Number of cases					
	Fibro-adenoma	Fibrocystic disease	Duct ectasia	Duct papilloma	Cystosarcoma phylloides	Fat necrosis
Painful lump	3	9	1	-	-	-
Painless lump	25	16	2	1	2	1
Nipple discharge		3	4	3	-	-
Total	28	28	7	4	2	1

Table (8) : The main presenting symptoms in different benign breast lesions.

From table (9) we notice the ages of patients with nipple discharge. Below 30 years we had no patient. Between 31-40 years we had 6 patients. Between 41-50 years we had 4 patients.

Age in year	No. of patients with nipple discharge
Below 30	-
31 - 40	6
41 - 50	4
Total	10

Table (9) : Ages of 10 patients with nipple discharge

From table (10) we notice the type of discharge in different benign breast lesion. 4 cases with serous discharge which is a faintly, yellow, thin clear secretion that dries as a yellow stain on the patients brassiere. One case with duct ectasia, one case with intraductal papilloma and two cases with fibrocystic disease. One case of duct ectasia with serosanguinous discharge which was thin clear discharge with a pink tinge. 5 cases with bloody discharge two cases with duct ectasia, 2 cases with intraductal papilloma and one case with fibrocystic disease.

Types	Number	Ectasia	Intra-ductal papilloma	Fibrocystic disease
Serous	4	1	1	2
Serosangunous	1	1	-	-
Bloody	5	2	2	1
Total	10	4	3	3

Table (10) : Type of nipple discharge in different benign breast lesions.