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PRIMARY INVASIVE DUCTAL CARCINOMA OF AXILLARY ACCESSORY BREAST

Etienne El-Helou¹, Catalin-Florin Pop¹,², Ammar Shall¹, Manar Zaiter³, Jessica Naccour⁴, Huu Hoang⁵, Thi Hoa Nguyen⁶, Xuan Dung Ho⁵

¹Institut Jules Bordet, Department of Surgical Oncology – Brussels, Belgium.

²Université Libre de Bruxelles – Brussels, Belgium.

³Institut Jules Bordet, Department of Radiology – Brussels, Belgium.

⁴Hopital Erasme, Department of Emergency Medicine – Brussels, Belgium.

⁵Hue University, Hue College of Medicine and Pharmacy, Department of Oncology – Hue, Vietnam.

Danang Oncology Hospital, Department of Breast and Gynecologic Cancer – Danang, Vietnam.

Primary accessory breast cancer is an extremely rare pathology, representing less than 1% of all breast cancers, and it is found in more than 90% of cases in the axilla. The diagnosis of accessory axillary breast cancer (AABC) is often late and at an advanced stage, with an average delay of 40.5 months. Histological sampling and immunohistochemical results confirm the diagnosis. Most patients are diagnosed with stage II disease or higher, so it is considered to have a poor prognosis. There is no proper management for AABC; it follows the guidelines for orthotopic pectoral breast cancer. We therefore report the case of a 50-year-old woman diagnosed with grade II invasive ductal carcinoma found in accessory axillary breast, treated with neoadjuvant chemotherapy followed by a wide local resection and axillary lymph node dissection.

Keywords: Breast carcinoma. Invasive ductal carcinoma. Breast surgery. Case reports.