



Research Article

INCIDENCE OF BREAST CARCINOMA IN A TERTIARY CARE HOSPITAL- A RETROSPECTIVE STUDY

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ABSTRACT

Breast carcinoma is the most frequent cancer in the women, following the lung carcinoma worldwide. Even in the India breast carcinoma has over taken cervical cancer in many parts. Significance of this study is to see the number of breast cancer patient in the tertiary care hospital.

Materials and Methods: This is a retrospective study for a period of 3 years 2010 June to 2013 June.

Results: Out of 279 cases of the breast lesion, 117 were of breast carcinoma with most presenting in the late stage due to lack of awareness and social stigma.

INTRODUCTION

International Agency for Research on Cancer (IARC) issued on world cancer report which tells us how cancer is increasing at an alarming rate. Cancer rate could be increased by 50% to 15 million new cases in the year 2020 (Pal and Mittal, 2004). Worldwide breast cancer is the second leading cause of cancer death in women following the lung cancer (Dumitrescu and Cotaria, 2005 and Chandra, 1979). Presently 75,000 new cases occurs in India every year (Chopra, 2001). Following the diagnosis, workup and staging, depending on the stage patient undergoes multimodal treatment surgery, chemotherapy, radiotherapy and hormone therapy. This study is to see the incidence of breast carcinoma in Patna Medical College.

MATERIALS AND METHODS

The present study is a retrospective study for a period of 3 years 2010 June to 2013 June. As this study was a retrospective study, no ethical issues or consent from the patient was needed. The breast biopsy sent to the pathology department between this period was taken into consideration. A total of 279 cases of the breast lesion presented during this period. Cut section from the lesion was taken.

Tissue was stained Haematoxylin and Eosin and viewed under microscope. Age of presentation was from 12 years to 79 years. Out of the 279 cases 117 were of breast carcinoma. The youngest patient of breast carcinoma was of 22 years and oldest of 79 years. Mean age was 49 years. 114 cases were of fibroadenoma breast. 9 had duct ectasia. 6 were reported as phylloid tumour. 30 cases were of chronic inflammation. 3 cases were of haematoma.

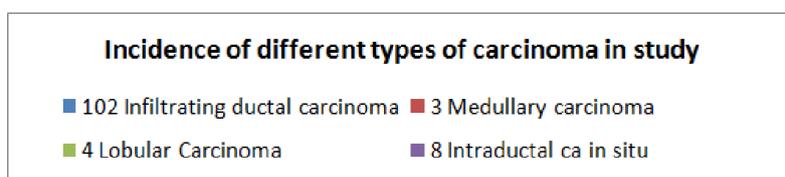
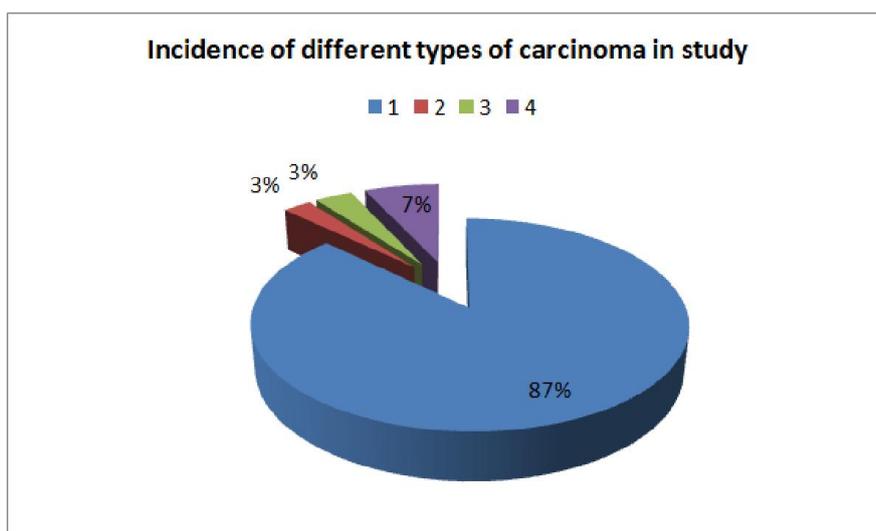
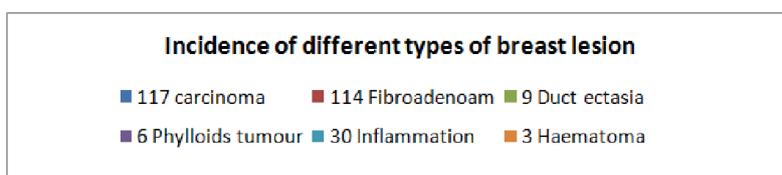
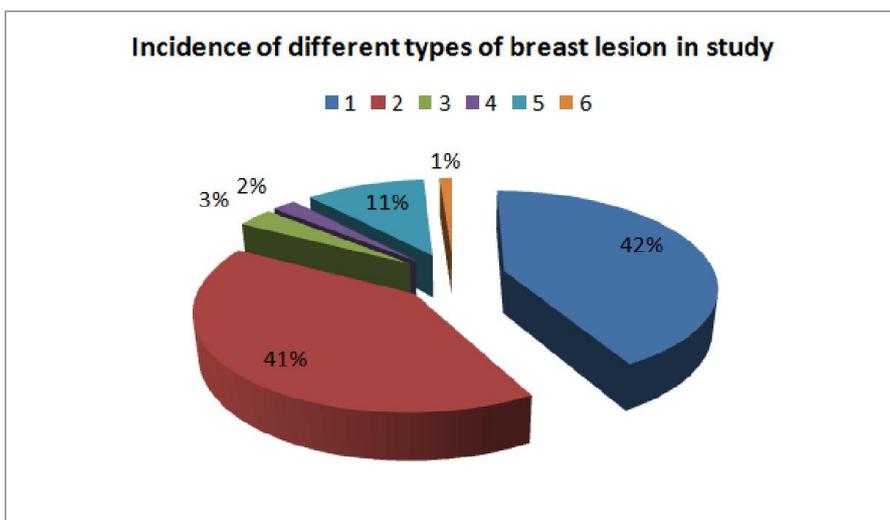
Out of 117 cases 102 were of infiltrative ductal carcinoma. 3 were medullary carcinoma. 4 were lobular carcinoma, 8 were intraductal carcinoma in situ.

RESULTS AND DISCUSSION

In India, prevention of breast cancer has become a priority due to its increasing incidence (Sexena *et al.*, 2005). Our study showed the average age of incidence to be 45- 50 years, similar to Indian Statistics (Sexena *et al.*, 2005; Sandhu *et al.*, 2010 and Pakseresht *et al.*, 2009). The peak age of breast cancer is 60-70 years in western countries (Leong *et al.*, 2010). In our study 29% were below 40 years of age while Saxena *et al.* (2005) has 22% and Nigam *et al.* (2011) had 31.69%. In comparison to developed countries in the Asia and the rest of the world, the incidence of breast cancer is lower, but mortality is significantly higher and patient are about a decade younger in developing countries than in developed nations (Agarwal *et al.*, 2007).

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Large tumour size, metastasis, lymph node involvement, high tumour grade, low survival rates are associated with younger patient (Mathew *et al.*, 2004 and Shavers *et al.*, 2003). In this study majority of the patients were post menopausal 52.1% followed by pre menopausal. In India the mortality is high due to late presentation because of lack of awareness, shyness on part of the patient, social stigma and many other cause.

Conclusion

India is experiencing an unprecedented rise in the number of breast cancer. Early detection can help to decrease mortality

and we can definitely detect breast cancer early and treat adequately.

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