Ductal in situ cancer in non-palpable breast lesions

KEYWORDS: Breast Neoplasms; Carcinoma In Situ; Carcinoma, Infiltrating Duct

Background: Great importance in detecting in situ cancer is in the fact that epithelial layer is deprived of the blood and lymph vessels, so metastases can develop only when basal membrane has been broken.

Methods: The paper included 40 operated women in whom preoperatively suspect non-palpable lesion had been verified. Preoperative diagnostics included use of high-resolution mammography, aimed mammography, palpation examination of surgeon-oncologist, as well as fine-needle aspiration (FNA) biopsy and cytology analysis of the sample. Methodology of the work implied the use of stereotaxic marking, specimen mammography and extempore histopathology analysis.

Results: From 40 investigated patients, the breast malignant tissue lesion was diagnosed in 18 patients (45%). Two of these lesions (11.1%) were histopathologically verified as ductal in situ cancer (DCIS), seven (37.9%) as DCIS with present invasive component, and in the remaining nine patients (50%) other cancer types were found.

Conclusion: Comparing our results with data from the hospital registry of the Institute of Oncology and Radiology of Serbia (IDRS) for 2001, where 1173 patients with the malignant lesions were registered of whom 13 (1.1%) patients with DCIS, we may conclude that there is statistically significant difference in number of detected cancers in this early stage. This further limits surgical intervention to tumorectomy in DCIS, and in DCIS with present invasive component it enables conserving operation in majority of cases. In both cases, disease prognosis is good, what speaks in favor of screening examination and routine application of the most contemporary procedures.

Data of colorectal cancer in the Hospital cancer registry, Clinic of Oncology in Niš, in the period 1998 - 2002

KEYWORDS: Breast Neoplasms; Antineoplastic Agents, Hormonal; Neoplasm Metastasis; Aminoglutethimide; Menopause; Aromatase

Background: Colon and rectal cancers (CRC) accounted for 783.000 new disease cases (9.7% of the world total), and was a cause of 437 000 deaths (8.4% of the world total). Unlike the situation with most disease sites, incidence and mortality were not much different between men and women (ratio 1.05:1.00). In terms of incidence, CRC rank third in frequency in men (after prostate and lung) and third in women (after breast and lung).

Methods: In the Hospital Cancer Registry of the Clinic of oncology Niš, for the period 1998-2002 there were 7873 registered new cancer cases. The authors searched the registry with aim to establish the number of patients affected with colorectal cancer for the observed 5-year period, to establish the most frequent cancer site, histopathologic diagnosis, age distribution of the disease, and tumor burden in the registered cases.

Results: CRC participates with 10.24% of all cancers cases. There were 1329 gastrointestinal cancer cases, out of which 806 (61%) colorectal cancer cases. CRC ranks first in frequency in men (11% at all cancers in men), and fifth in women (5.96% at all cancers in women). The disease was predominant in male population (504/806 men and 302/806 women; ratio 1.67:1.00). The youngest two cases were in the group of patients aged from 20 to 24 years. The number of CRC increases with age for both genders (66 men and 39 women, aged 50-54 years), and the highest number of patients were observed among persons aged from 65-69 years (95 men and 52 women). Colorectal cancers most frequently arise in the rectosigmoid colon portion (49 cases; 22%), then in the colon transversum (72 cases; 18%), colon ascendens (73 cases; 18%), cecum (48 cases; 12%), sigmoid colon (31 cases; 7.7%), hepatic flexure (26 cases; 6.5%), linear flexure (12 cases; 3%) and colon descendens (8 cases; 2%). The most common histopathologic diagnoses are: adenocarcinoma 685 (85%), Ca papillare 69 (8.6%), Ca mucinosum 43 (5.3%), Ca planocellularare 8 (1%), Ca lucidocellularare 4 (0.5%), and sarcoma 2 (0.2%).

Conclusion: The analysis of the period showed the increase of the number of cases (133 patients in 1999 and 241 cases in 2002). CRC makes up 61% of all gastrointestinal cancers. The most frequent localization was rectum (393/806; 49%) These tumors most commonly occur in rectum and sigmoid colon (89/401). Colon descendens is rarely affected (8/401). The most predominant type was adenocarcinoma (685/806). CRC was 1.67 times more frequent among men then among women.