# **Scholars Journal of Medical Case Reports**

Sch J Med Case Rep 2017; 5(6):376-378

©Scholars Academic and Scientific Publishers (SAS Publishers)
(An International Publisher for Academic and Scientific Resources)

ISSN 2347-6559 (Online) ISSN 2347-9507 (Print)

DOI: 10.36347/sjmcr.2017.v05i06.006

# Carcinoma En Cuirasses: metastasis from carcinoma breast: A Rare case report Dr. Sakshi Dahiya, Dr Shivani Dua, Dr Nitika Grover, Dr Saurav Chaudhary, Dr Ritesh Sheorain, Dr. Rajeev Sen

Department of Pathology, Pt B.D Sharma PGIMS(Post Graduate Institute Of Medical Sciences), Rohtak, Haryana, India

## \*Corresponding author

Dr. Sakshi Dahiya

Email: drsakshi2007@gmail.com

**Abstract:** Carcinoma en cuirasses a form of cutaneous metastasis in association with a lot of malignancies. This condition is rare if presenting with the primary or as an initial sign but it is more commonly associated with breast carcinoma having local Recurrence after mastectomy. Cutaneous metastasis presents most commonly afew months or years after the primary has been diagnosed. We report a case of carcinoma en cuirasses in a 60-year-old female who was already being treated for breast cancer. She presented with ill defined nodules and a warm indurated plaque over the operation site on the breast with the area extending to the left arm and back, almost 4 months after radiotherapy. Histopathological examination revealed cutaneous metastasis.

Keywords: Carcinoma en cuirasses, carcinoma breast, coetaneous metastasis

#### INTRODUCTION

Carcinoma en cuirasses is a dramatic presentation of metastasis from the breast, or less commonly from the stomach, kidneys, or lungs to skin, where carcinomatous lymphatics result in extensive thickening, oedema and fibrosis of dermis, and sub cutis of chest wall. [1] These metastases are often estimated at 0.7 to 9% and are the initial signs of the disease in 37% of men and six percent of women. [2] *Carcinoma en cuirasses* were first described by Velpeau in 1838, a description chosen because of its resemblance to the metal breastplate of a cuirassier. It has also been called scirrhous carcinoma, pachyderm and *Acarcineeburnee* by various authors. [3]

#### **CASE REPORT**

We are presenting the case of a 60 year old lady who was an old case of carcinoma breast.

Mastectomy was done more than one year back and radiotherapy was also given as a part of treatment protocol about 4-5 months back. Patient developed ill defined nodules and a warm indurated plaque over the operation site on the breast with the area extending to the left arm and back. A skin biopsy measuring 0.2x0.1x0.1 cm was sent to us from the dermatology OPD with the suggested clinical diagnosis of carcinoma en cuirasses and post radiation morphea. histopathological examination, the skin biopsy showed infiltration by dyscohesive carcinoma cells of small size occasional duct formation which morphologically consistent with infiltration/metastasis from carcinoma breast. On immune his to chemistry, the tumour cells were positive for CK and Her 2 Neu and there was no loss of E Cadherin. Unfortunately, the patient expired some days thereafter as her disease was in an advanced stage.

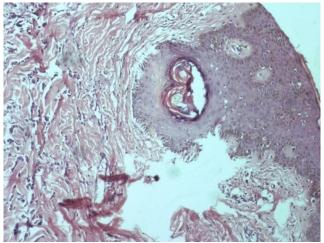


Fig-1: carcinoma en cuirasse 100x

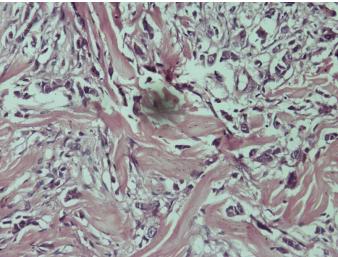


Fig-2: carcinoma breast metastasis in skin 200x

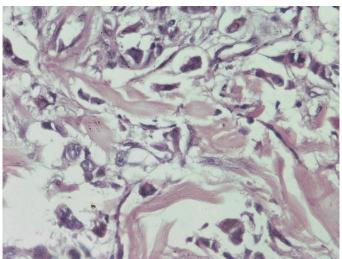


Fig-3: carcinoma breast metastasis in skin 400x

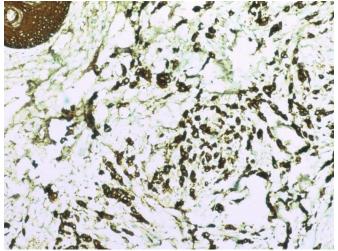


Fig-4: 100X:carcinoma breast metastasis seen on CK (IHC)

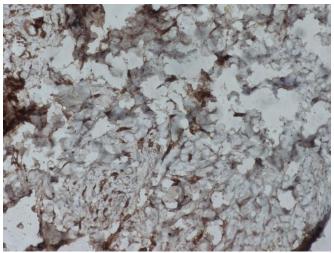


Fig-5: 100X: carcinomatous cells show Her 2 Neu positivity

#### DISCUSSION

Carcinoma en cuirasses are a form of metastatic cutaneous carcinoma. It is usually seen in patients with carcinoma breast who have undergone mastectomy, but rarely this can be the primary presentation of carcinoma breast. The incidence of cutaneous metastasis varies from. 6% to 10%. Cutaneous metastasis presents most often, a few months or years after the primary has been diagnosed. It is of diagnostic importance because it may be the first manifestation of hitherto undiscovered internal malignancy or first indication of an inadequately treated malignancy. [2] Breast carcinoma is the most common malignant tumour that metastasizes to the skin: 69%, followed by the large intestine (9%), melanoma (5%), ovaries (4%) and cervix (2%). [4]

Coetaneous breast cancer metastasis can be expressed with variable morphology: papulonodular lesions, erysipeloid or scleroderma form infiltration. The interval between diagnosis of cancer and resultant metastasis is variable, but in general, when detected, it occurs within the first three years. [5]

### **CONCLUSION**

As carcinoma breast with skin metastasis is usually associated with advanced cancer, it foretells poor prognosis and hence, carcinoma en cuirasses, too has bad prognosis. At times, it may be an early or sole manifestation of the malignancy. In such cases its identification may play an important role in prevention of further metastasis and initiation of treatment.

#### REFERANCES

- Bhat R, Khaitan BK. Skin manifestations in internal diseases. In: Velia RG, Velia AR, editors. IADVL Textbook of Dermatology. 3rd ed. Mumbai: Bhilani Publishing House; 2008. pp. 1347–409.
- Mahore SD, Bothale KA, Patrikar AD, Joshi AM. Carcinoma en cuirasses: A rare presentation of

- breast cancer. Indian J Pathol Microbiol. 2010;53:351–8.
- 3. Carlesimo M, Rossi G, Narcissi A, Cacchi C, Mari E, Persechino F, et al. Carcinoma en cuirasses of the breast. Eur J Dermatol. 2009; 19:289–290.
- McKee PH, Calonje E, Granter SR. Cutaneous metastases and Paget's disease of the skin. In: McKee PH, Calonje E, Granter SR, editors. Pathology of the Skin with Clinical Correlations. Philadelphia: Elsevier Mosby; 2005. pp. 1514–1518.
- Johnson WC. Metastatic carcinoma of the skin, Incidence and dissemination. In: Elder D, Elenitsas R, Jaworsky C, Johnson B, editors. Lever' Histopathology of the skin. 8th ed. Philadelphia: Lippincott Williams's e Wilkins; 1997. pp. 1011– 1018.