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PRIMARY BREAST HYDATID CYST: CASE REPORT AND LITERATURE REVIEW

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ydatid disease is a parasitic infection caused by the larval form of *Echinococcus granulosus*. Breast hydatid cyst is extremely uncommon accounting for only 0.27% of all cases of hydatid disease and can be easily confused with other malignant and benign breast lesions and therefore missed until an operative diagnosis is made. We report a case of breast hydatid cyst diagnosed pre-operatively in an 80 years old patient who presented with a right breast nodule. Mammograms revealed three well circumscribed lesions. The final diagnosis was obtained by using breast needle core biopsy with pathological examination showing typical hydatid laminated membranes. Abdominal ultrasound and chest roentgenogram revealed no similar or obviously cystic lesions. Hydatid disease can occur in many organs, among them the liver (60% of hydatid cases), the lungs (30%), the kidneys (2.5%), the heart (2.5%), the bone (2%), the spleen (1.5%), the muscle (1%), and in the brain 0.5%. Hydatic cyst occurs in the breast in only 0.27% of all cases. Fine needle aspiration and core needle biopsy help establish a preoperative diagnosis. Total surgical excision of the cystic lesion is the standard treatment. Despite its rarity, it should be included in the differential diagnosis of breast lumps for patients living in endemic areas.

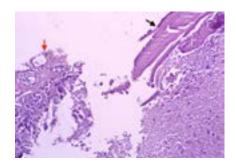


Figure 2: Microphotography showing the presence of a laminated membrane (black arrow) with occasional residual terminal ductulo-lobular units (red arrow).

Biography

Miry Achraf is a second year Pathology resident, he has completed his PhD from Oujda medical faculty.

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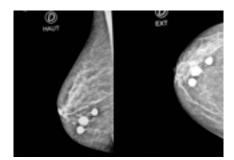


Figure 1: Mammogram scan showing three well-circumscribed, homogenous smooth nodules of the right breast.