

A Retrospective study on incidence of male mammography in a tertiary care hospital.

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ABSTRACT

Background: Awareness of early breast cancer detection in women through mammography study (diagnostic as well as screening) for a diagnostic and direct approach to cross society (screening) with an early detection of breast cancer. But incidentally or coincidentally, so many males underwent the Mammography. **Methods:** A retrospective study was conducted with 45 males aged 15-75 years, who underwent mammography procedures co-incidentally, during well planned study of early detection of breast cancer for women through mammography for the duration of 6 months at the Lord Buddha Medical College, Saharsa. **Results:** Even though relatively seems to be small in number, is having lots of significance to that, as only a few researchers carry out this type of study and Men hardly go for Mammography and even Medical fraternity hardly refers male for mammography. A total of 45 patients that too Men underwent mammography (an X-ray base technique to detect early breast lesions and mainly breast cancer) along with high frequency Sonography of each and every patient was carried out. Our study of 45 patients nearly showed the 3 patients having very high suspicions of malignancy means nearly 8% (Even though breast cancer in male is usually of 1%). **Conclusion:** So this retrospective analytical study conclude that even though routine mammography screening (In female every year) is not required in the male, but definitely it will be an a useful tool in patients having any type of complain related with breast like pain, enlargement or both, may help a lot to diagnose breast lesions like calcification, gynecomastia and breast cancer in early stage.

Keywords: Mammography, Men, Breast lesion, Diagnosis.

INTRODUCTION

Gynecomastia is a benign enlargement of the male breast because of the proliferation of its glandular components. It is common in mild, transient form in 30%–50% of healthy male patients.^[1] Causes of gynecomastia are largely idiopathic. Identified causes of gynecomastia are hypogonadism (25%), hyperprolactinemia (9%), chronic liver disease (4%), and drug induced (4%).^[2] Gynecomastia is thought to result from several mechanisms, including increased androgen and leptin levels, human chorionic gonadotropin, and luteinizing hormone.^[3,4] The majority of male patients with gynecomastia are asymptomatic and referred for persistently tender breasts, palpable lump, or disturbed body image.^[5] Previous studies reported that new cases of gynecomastia accounted for up to 80% of male patients referred to hospitals with breast lesions.^[6]

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Even though it was planned study for women to detect breast cancer and other breast lesions and or diseases through Mammography. Therefore, this study was undertaken on male patients who underwent Mammography study coincidentally and were analyzed.

MATERIALS AND METHODS

This Retrospective study was conducted on male patients aged 15-75 years in the department of Radio diagnosis, Lord Buddha Medical College, Saharsa for 6 months. Around 45 men who underwent mammography procedures co-incidentally, during well-planned study of early detection of breast cancer for women through mammography in the last 6 months in a tertiary care hospital. Those findings were analyzed and hereby are presented.

RESULTS

A total of 45 patients that too Men underwent mammography (an X-ray base technique to detect early breast lesions and mainly breast cancer) along with high frequency Sonography of each and every patient was carried out. Most men belong to the age group 21 to 45 and out of that n=15 (31.52%) patients were in a very low age (26-35) group [Table 1].

Most of the men came of their own as they had some sort of breast enlargement that too one sided with or without pain. Nearly 25 patients had pain, lump or both (May be right or left or both). Nearly 20 patients had a very common complain painting both breast [Table 2].

When all the 45 men's findings their analysis they had a variety of findings like Benign nodule and or adenoma, Gynecomastia (12), Fibroadenomas (2), Calcifications (1), Mastitis (2) and to the extent

n=3 patients had a very high suspicion of Malignancy [Table 3].

Table 1: Age wise distribution.

Sl. No.	Age wise	No. Male	%
1	15-25	2	4.44
2	26-35	15	33.33
3	36-45	10	22.22
4	46-55	6	13.33
5	56-65	7	15.56
6	66-75	5	11.11
Total		45	

Table 2:Symptom wise distribution.

S. No.	Symptom wise	No. Patients	%
1	Both breast pain & / or lump	4	8.89
2	Pain, lump or both	5	11.11
3	Pain, lump or both complain in left breast	16	35.56
4	complain in both breast	20	44.44
Total		45	

Table 3:Finding wise distribution.

S. No.	Finding wise	No. of Patients	%
1	Benign Nodule / adenoma	1	2.22
2	Gynecomastia	12	26.67
3	Neoplasm etiology / Malignant	3	6.67
4	Fibro adenomas	2	4.44
5	Calcification	1	2.22
6	Mastitis	2	4.44
7	No significant findings	24	53.33
Total		45	

DISCUSSION

Even though Mammography and high frequency independently are not the standard or routine test to be performed for detecting breast lesions and or breast cancer in men, but if carried out in Men for any type of complaint by Male of any age is likely to prove of some help at least in few but that few findings may imitate further work-up and action planned in turn can save the life means to turn the family (as in most of the family's male is the key earner of the family).

So this retrospective study was carried out deliberately and dedication to come to some conclusions (May be useful for the few, but of utmost importance) and the findings were, even though some were common, but of rare nature like suspicion on the malignancy with high accuracy anticipation will help a lot of male and in turn of family.

Even though Breast cancer is found to occur most commonly in middle-aged or old aged men. But Breast cancer in males is relatively rare and this is in accord with the general rule that cancer seldom occurs in vestigial organs.^[7] Breast cancer is more

often hormone receptor-positive in men than in women. Breast cancer occurs in males at a relatively older age when compared to females and more often during the 5th to 7th decades of life,^[8-11] the main reason being late presentation and lack of self-awareness; men have more advanced disease at diagnosis and larger tumour size than women due to delayed diagnosis, resulting in a higher morbidity and mortality.

CONCLUSION

This retrospective analytical study conclude that even though routine mammography screening (In female every year) is not required in the male, but definitely it will be an a useful tool in patients having any type of complain related with breast like pain, enlargement or both, may help a lot to diagnose breast lesions like calcification, gynecomastia and breast cancer in early stage.

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How to cite this article: Badjate PAK. A Retrospective study on incidence of male mammography in a tertiary care hospital. *Ann. Int. Med. Den. Res.* 2016;2(2):81-2.

Source of Support: Nil, **Conflict of Interest:** None declared