

Abstract

Introduction: The term phyllodes tumour represents a broad range of fibro-epithelial diseases and presence of an epithelial component with stromal components differentiates the phyllodes tumour from other stromal sarcomas. In 1981 the World Health Organization adopted the term phyllodes tumour and as described by 'Rosen' subclassified them histologically as benign, borderline, or malignant according to the features such as tumour margins, stromal overgrowth, tumour necrosis, cellular atypia, and number of mitosis per high power field. The majority of phyllodes tumours have been described as benign (35% to 64%), with the remainder divided between the borderline and malignant subtypes.

Aim of the Study: This work aims to explain phyllodes tumour and its recent management modalities.

Methodology: Phyllodes tumours are uncommon fibro-epithelial lesions, arise outside of the ducts and lobules, in the breast's connective tissue, called the stroma which includes the fatty tissue and ligaments that surround the ducts, lobules, and blood and lymph vessels in the breast. In addition to stromal cells, phyllodes tumours can also contain cells from the ducts and lobules. they account for a range of 0.3 to 0.5% of whole female breast tumours having peak incidence of about 2.1 per million among women aged 45 to 49 years uncommonly to be present in elderly and adolescents, they varies in size ranging from 1 cm to 15 cm.

Conclusion: Up to date, local recurrence rates ranging from 10% to 40% have been reported with an average of 15%. Local recurrence appears to be related essentially to the extent of the initial surgery and should be regarded as a failure of primary surgical treatment. The capability of malignant tumours to recur is unclear but when it does occur it is invariably seen earlier than with benign tumours.

Keywords: Recent Management, Phyllodes Tumour of the Breast.

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List of Abbreviations

BI-RADS	: Breast Imaging Reporting and Data System
CGH	: Comparative genomic hybridization
FNA	: Fine-needle-aspiration
FNAC	: Fine-needle aspiration cytology
MRI	: Magnetic Resonance Imaging
NCCN	: National Comprehensive Cancer Network
RI	: Resistance index

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Introduction





Aim of the Study





Anatomy of Female Breast





Pathology of Phyllodes Tumour of the Breast





Differential Diagnosis of Phyllodes Tumour





Diagnosis of Phyllodes Tumour





Management of Phyllodes Tumour





Summary and Conclusion





References





Arabic Summary

