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Nipple discharge as a single symptom in elderly female patients

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Aim of the study

Proving on the basis of scientific evidence derived from a long lasting experience in the breast surgery field, how pathologic nipple discharge, as a single symptom, can hide more often in elderly women malignancies of the galactophorous ducts.

Materials and methods

Dept of General Surgery – Prof. Taffurelli from S. Orsola Malpighi Hospital, Bologna, holds in its database about ten thousand records in the breast surgery field going from 1975 until now, among which 966 cases of pathologic nipple discharge of variable nature (mainly serous, serous-bloody and bloody) in women of all ages were selected; of course these were all unilateral and single duct discharges and for these reason surgically appealing. All other causes, besides primary breast pathology, were excluded.

Results

Among all cases considered, we can distinguish 692 surgeries for benign pathology and 274 for malignancies (Table 1). It was demonstrated that of all women with benign lesions, those over 65 years of age represent only 15% of the total (n = 105), this is absolutely different from what was shown in women with malignant lesions where those over 65 years old, amounted to 37% (n = 101) of the 274 considered. Moreover we saw that only 18% of the cases were determined by squeezing the nipple, the rest of them were all spontaneous. Finally different kinds of discharge were studied among 187 of all the cases with malignancies for which the nature of the dis-

charge had been reported and we found out that in 43% of them it was a bloody discharge, serous-bloody in 28%, serous in 25% of the cases and 4% of them was of other nature (milky, green or yellow).

Conclusion

Our retrospective experience can hereby prove how important it is to keep a high alert about the symptom mentioned above, behind which, according to our evidence, a malignant lesion is often hidden, especially for women over 65 years of age, more than in younger ones. Moreover we want to remind how it is not necessarily a bloody discharge that has to drive the physician's attention, but also serous discharges can be symptom of galactophorous ducts malignancies.

Table I:

| | <55 yrs | 55 to 64 yrs | ≥65 yrs | Total patients (n) | |
|--|-----------|-------------------------------|---|--|--|
| | 478 (69%) | 109 (16%) | 105 (15%) | 692 | p < 0.001 |
| Malignant lesions with discharge in situ | 73 (49%) | 29 (19%) | 48 (32%) | 150 | |
| invasive | 46 (37%) | 25 (20%) | 53 (43%) | 124 | |
| | | 478 (69%) in situ 73 (49%) | 478 (69%) 109 (16%) in situ 73 (49%) 29 (19%) | 478 (69%) 109 (16%) 105 (15%) in situ 73 (49%) 29 (19%) 48 (32%) | 478 (69%) 109 (16%) 105 (15%) 692 in situ 73 (49%) 29 (19%) 48 (32%) 150 |

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