

PROGNOSTIC FACTORS IN BREAST CANCER AND FACTORS PREDICTIVE OF LYMPH NODE INVOLVEMENT.

Belfalah Hajer, Zaydi Ahlem, Boudhraa Dorsaf, Ben ghalia Manel, Rouis Hadhemi.
Obstetrics and Gynaecology Department Ben Arous Hospital

Introduction :

Breast cancer remains the most common form of cancer in women worldwide. The aim of our study is to evaluate the relationship between axillary lymph node involvement and various clinical, anatomopathological and molecular factors associated with breast cancer.

Materials and methods :

This study, conducted over a two-year period, is both analytical and descriptive. 85 patients were examined to explore the correlation between several clinical and histological parameters and the presence of axillary lymph node metastases. Variables studied included patient age, tumour size, clinical lymph node involvement, histological type of tumour, histological SBR grade, hormone receptors, presence of vascular emboli, HER2 neu overexpression, Ki-67 level, molecular type and presence of peri-tumour carcinoma in situ.

Result :

Of the 85 patients studied, 51 (61%) had axillary lymph node involvement at initial diagnosis. Univariate analysis revealed a strong correlation between axillary involvement and the presence of vascular emboli ($p=0.0001$), tumour size ($p=0.015$) and SBR grade ($p=0.025$). However, no correlation was observed between lymph node involvement and other factors such as hormone receptors, HER2 neu overexpression, Ki-67 levels, molecular type or the presence of peri-tumour carcinoma in situ.

Conclusion :

These results suggest that tumour size, SBR grade and vascular invasion are crucial factors in the metastatic spread of breast cancer. These data could facilitate therapeutic decisions concerning axillary curage or the sentinel lymph node.