Cutaneous Breast Cancer Masquerading as Pseudoxanthoma Elasticum

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In the United States, 214,880 women are diagnosed with breast carcinoma each year, with an overall 5-year survival of 90%. When cutaneous metastases are present, the 5-year survival is 24%. Invasive ductal carcinoma (IDC) comprises 80% of all breast cancers, with 30% of women having metastatic disease upon initial diagnosis. Cutaneous metastases of breast carcinoma occurs at a rate of 24% per primary breast malignancy with 70% of breast carcinoma cutaneous metastases being IDC subtype. A 55-year-old Caucasian female presented as clinically exhibiting features of pseudoxanthoma elasticum (PXE), a genetic disease affecting connective tissue in intertriginous areas, but upon pathologic examination revealed metastatic IDC. Review of the literature has not elicited other reports of PXE-appearing cutaneous breast carcinoma. Recognizing unusual presentations of cutaneous IDC metastases is vital to early detection and treatment.

The relative survival rate for IDC is dependent upon the stage at initial diagnosis. Our patient presented with the cutaneous findings that led to her biopsy. The subtle, skin-colored, and asymptomatic cutaneous lesions in our case contributed to delay in diagnosis. Age and risk appropriate mammography screening has also improved detection at earlier stages of disease, especially IDC. Our patient reportedly never had a mammogram. The prognostic factors for such patients can be supplemented with measurements of steroid hormone receptors, growth factors, and oncogenes. Due to the possibility of an underlying advanced breast carcinoma, early biopsy of clinical benign conditions with other signs of malignancy, such as weight loss or hypercalcemia, has the potential to significantly improve prognosis and outcomes for such patients.