Paget’s Disease or Erosive Adenomatosis of the Nipple?

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Sir.

I read with interest the intriguing case report by Wolf et al. [1] concerning an erosive lesion of the nipple. The authors do not consider in their differential diagnosis the possibility of erosive adenomatosis of the nipple. Such a disorder, also called florid papillomatosis of the nipple, was identified in the fifties [2-4]. It is a benign lesion that clinically mimics Paget’s disease. The histopathologic features of erosive adenomatosis of the nipple may resemble an acantholytic disease with the presence of only one or two rows of epithelial cells. Awareness of the existence of such a benign lesion is important because some cases have been mistaken in the past for a malignant neoplasm [5, 6] and led to unnecessary mastectomies.

The identification of Paget’s cells in the nipple is also subtle in some cases. As stated by Wolf et al. [1], immunohistochemical techniques may be difficult to perform in some laboratories. Moreover, the existence of Toker’s cells [7] in the nipple should always be considered, and other cells such as lymphoid cells may accumulate singly or in nests in the epidermis, giving the false impression of the presence of Paget’s cells.

In short, the clinical and histological pictures and description provided in the article of Wolf et al. [1] pushed me to consider erosive adenomatosis of the nipple as a possible diagnosis. Perhaps the authors have other arguments that could convince me that I am wrong. The matter under discussion should at least incite the clinicians to use discretion in the final diagnosis and treatment of an erosive nipple.

References


In Reply
We thank you for your interest and comments on our article. Your letter raises an important point and I fully agree that erosive adenomatosis of the nipple should be one of the considerations in the differential diagnosis of every case with erosive lesion of the nipple, and that overlooking this may lead to unnecessary mastectomy. However, in our patient, this was definitely not the case, as we performed a fourth very large biopsy from the nipple area which confirmed the diagnosis of Paget’s disease, and this was subsequently reconfirmed on examination of the amputated breast.

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