

Study Simulation MCQs

1. Which breast lesion is most strongly associated with an increased risk of subsequent breast carcinoma?

- A. Fibroadenoma
- B. Fibrocystic change without proliferation
- C. Proliferative disease with atypia
- D. Papilloma without atypia
- E. Sclerosing adenosis

Answer: C. Proliferative disease with atypia

2. A 24-year-old woman presents with a freely mobile, well-circumscribed breast mass. Histology shows proliferation of intralobular stroma compressing ducts into slit-like spaces. What is the diagnosis?

- A. Phyllodes tumor
- B. Fibroadenoma
- C. Invasive ductal carcinoma
- D. Intraductal papilloma
- E. Fat necrosis

Answer: B. Fibroadenoma

3. Which feature best distinguishes phyllodes tumor from fibroadenoma?

- A. Estrogen sensitivity
- B. Presence in reproductive-age women
- C. Leaf-like architecture with hypercellular stroma
- D. Well-circumscribed borders
- E. Absence of epithelial elements

Answer: C. Leaf-like architecture with hypercellular stroma

4. Which statement regarding ductal carcinoma in situ (DCIS) is correct?

- A. It invades lymphovascular spaces early
- B. It always presents as a palpable mass
- C. It is confined by the basement membrane
- D. It originates from stromal cells

E. It commonly metastasizes to bone

Answer: C. It is confined by the basement membrane

5. The most important prognostic factor for invasive breast carcinoma without distant metastasis is:

- A. Tumor location
- B. HER2 expression
- C. Estrogen receptor status
- D. Axillary lymph node status
- E. Presence of LCIS

Answer: D. Axillary lymph node status

6. A breast carcinoma diffusely infiltrates dermal lymphatics producing peau d'orange appearance. Which diagnosis is most likely?

- A. Medullary carcinoma
- B. Invasive lobular carcinoma
- C. Fibroadenoma
- D. Inflammatory carcinoma
- E. Mucinous carcinoma

Answer: D. Inflammatory carcinoma

7. HER2 amplification contributes to breast carcinoma primarily by:

- A. Inhibiting angiogenesis
- B. Activating tumor suppressor genes
- C. Promoting proliferation and reducing apoptosis
- D. Increasing estrogen production
- E. Blocking tyrosine kinase signaling

Answer: C. Promoting proliferation and reducing apoptosis

8. Which breast carcinoma is most commonly bilateral or multicentric?

- A. Invasive ductal carcinoma
- B. Medullary carcinoma
- C. Secretory carcinoma
- D. Invasive lobular carcinoma
- E. Inflammatory carcinoma

Answer: D. Invasive lobular carcinoma

9. **Atypical ductal hyperplasia (ADH) is best described as:**

- A. A nonproliferative lesion with no cancer risk
- B. A malignant stromal neoplasm
- C. A clonal proliferation resembling DCIS but lacking all diagnostic features
- D. A subtype of invasive carcinoma
- E. A lesion unrelated to breast cancer risk

Answer: C. A clonal proliferation resembling DCIS but lacking all diagnostic features

10. **The most common site of breast carcinoma within the breast is the:**

- A. Lower inner quadrant
- B. Lower outer quadrant
- C. Upper inner quadrant
- D. Central portion
- E. Upper outer quadrant

Answer: E. Upper outer quadrant

Exam Simulation MCQs

1. **All of the following are features of fibroadenoma EXCEPT:**

- A. Most common benign breast tumor
- B. Estrogen sensitive
- C. Freely mobile "breast mouse"
- D. Highly cellular stroma with leaf-like architecture
- E. Occurs commonly in reproductive-age women

Answer: D. Highly cellular stroma with leaf-like architecture

2. **All of the following are characteristic of phyllodes tumor EXCEPT:**

- A. Leaf-like morphology
- B. Hypercellular stroma
- C. Tendency for local recurrence
- D. Commonly affects younger women in adolescence
- E. May rarely metastasize in high-grade lesions

Answer: D. Commonly affects younger women in adolescence

3. All of the following are components of fibrocystic change EXCEPT:

- A. Cyst formation
- B. Adenosis
- C. Apocrine metaplasia
- D. Stromal sarcoma formation
- E. Fibrosis

Answer: D. Stromal sarcoma formation

4. All of the following are proliferative breast lesions without atypia EXCEPT:

- A. Sclerosing adenosis
- B. Papilloma
- C. Epithelial hyperplasia
- D. Atypical ductal hyperplasia
- E. Mild polyclonal hyperplasia

Answer: D. Atypical ductal hyperplasia

5. All of the following genes are associated with familial breast carcinoma EXCEPT:

- A. BRCA1
- B. BRCA2
- C. TP53
- D. PTEN
- E. APC

Answer: E. APC

6. All of the following are true regarding HER2-positive breast carcinoma EXCEPT:

- A. HER2 is a receptor tyrosine kinase
- B. HER2 amplification promotes proliferation
- C. HER2-positive tumors are highly proliferative
- D. HER2-targeted therapy improved prognosis
- E. HER2 overexpression is associated with increased apoptosis

Answer: E. HER2 overexpression is associated with increased apoptosis

7. All of the following are features of ductal carcinoma in situ (DCIS) EXCEPT:

- A. Malignant epithelial proliferation
- B. Confined by basement membrane
- C. Invades lymphovascular channels
- D. Arises within duct-lobular system
- E. Considered a noninvasive carcinoma

Answer: C. Invades lymphovascular channels

8. All of the following are characteristic of invasive lobular carcinoma EXCEPT:

- A. Often bilateral or multicentric
- B. Associated with LCIS
- C. HER2 overexpression is common
- D. Tumor cells infiltrate individually
- E. Frequently express hormone receptors

Answer: C. HER2 overexpression is common

9. All of the following are features of inflammatory carcinoma EXCEPT:

- A. Peau d'orange appearance
- B. Dermal lymphatic obstruction
- C. True inflammatory infiltrate is prominent
- D. Poor prognosis
- E. Breast erythema and swelling

Answer: C. True inflammatory infiltrate is prominent

10. All of the following are important prognostic factors in breast carcinoma EXCEPT:

- A. Tumor stage
- B. Axillary lymph node involvement
- C. Hormone receptor status
- D. HER2 expression
- E. Breast quadrant involved

Answer: E. Breast quadrant involved

BACKGROUND

- * UNCONTROLLED GROWTH of CANCEROUS CELLS ORIGINATING FROM DUCTS of BREAST TISSUE
~ aka INFILTRATING DUCTAL CARCINOMA or IDC
- * MOST COMMON INVASIVE BREAST CANCER
~ 50-70% of BREAST CANCER DIAGNOSES

RISK FACTORS

- * MUTATIONS in BRCA GENES
- * INDIVIDUALS ASSIGNED FEMALE at BIRTH
- * PERSONAL and/or FAMILY HISTORY of BREAST or OVARIAN CANCER
- * ↑↑ EXPOSURE to HORMONES (e.g., ESTROGEN, PROGESTERONE)
- * ADVANCED AGE

TREATMENT

- * ↓↓ CHANCE of RECURRENCE
- * ↓↓ RISK of METASTASIS
- * REMOVAL of LESION
~ LUMPECTOMY
~ MASTECTOMY
~ LYMPH REMOVAL
- * RADIATION THERAPY
- * SYSTEMIC TREATMENT OPTIONS
~ CHEMOTHERAPY
~ HORMONAL THERAPIES
~ TARGETED THERAPIES

SIGNS & SYMPTOMS

- * MOSTLY ASYMPTOMATIC
- * PALPABLE LUMP if > 2 cm
- * VISIBLE BREAST CHANGES
~ SWELLING of 1 BREAST
~ THICKENING of BREAST SKIN
~ NIPPLE DISCHARGE
~ NIPPLE INVERSION
~ "PEAU D'ORANGE"

HEALTHY

Lesion	RR	AR
Fibrocystic Changes	1	3%
Proliferative - {atypia}	1.5 - 2	5% - 7%
Proliferative e atypia	4 - 5	13% - 17%
Carcinoma in situ	8 - 10	25% - 30%

EARLY SIGNS OF BREAST CANCER

- Lump in the breast or underarm
- Unusual or persistent pain in the breast
- Redness or flaky skin in the nipple area or the breast
- Change in breast size and shape
- Swelling, redness or darkening of the breast
- Nipple discharge that starts suddenly

WAYS TO REDUCE YOUR BREAST CANCER RISK

- Do not smoke
- Control your weight
- Limit or avoid alcohol
- Breastfeed
- Be physically active
- Avoid exposure to radiations

World Health Organization #Cancer

يقول الله عز وجل:

{يُدَبِّرُ الْأَمْرَ مِنَ السَّمَاءِ إِلَى الْأَرْضِ ثُمَّ يَعْرُجُ إِلَيْهِ فِي يَوْمٍ كَانَ مِقْدَارُهُ أَلْفَ سَنَةٍ مِمَّا تَعُدُّونَ}

السجدة/ 5 .

الله سبحانه يدبر أمرك بينما أنت تحارب قلقك..
يدبر أمرك بينما أنت غارق في أفكارك..
يدبر أمرك بينما تخشى وقوع مخاوفك..
يدبر أمرك بينما أنت مكتفٍ بعجزك..
يدبر أمرك لأنه أعلم منك بحالك..
يدبر أمرك لأنه سبحانه حكيم خبير عليم..
توكل على الله دائماً وأبداً ، وفوض أمرك كله إليه ، فهو سبحانه نعم
المدبر والوكيل.