

**Bilateral Breast Carcinoma after Treatment with Immunosuppressant**

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Bilateral breast cancer developed in a 45-year-old woman who received a renal transplant followed by immunosuppression with Cyclosporine. She underwent a left modified radical mastectomy, and right breast conserving surgery, with both axillary lymph nodes being dissected. Few cases have been reported on breast cancer associated with renal transplantation. Although a causal relationship with immunosuppression therapy and breast carcinoma was not implied, a heightened awareness of the possible coexistence of immunosuppression therapy and breast carcinomas are necessary. (J Korean Surg Soc 2002;63:163-166)

**Key Words:** Bilateral breast cancer, Renal transplantation, Immunosuppressive agent

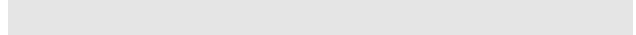
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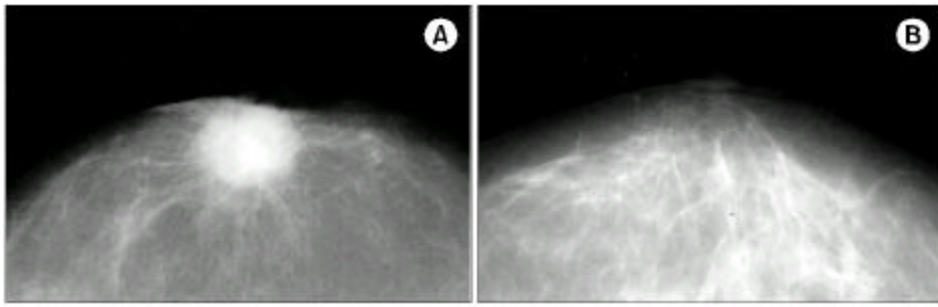
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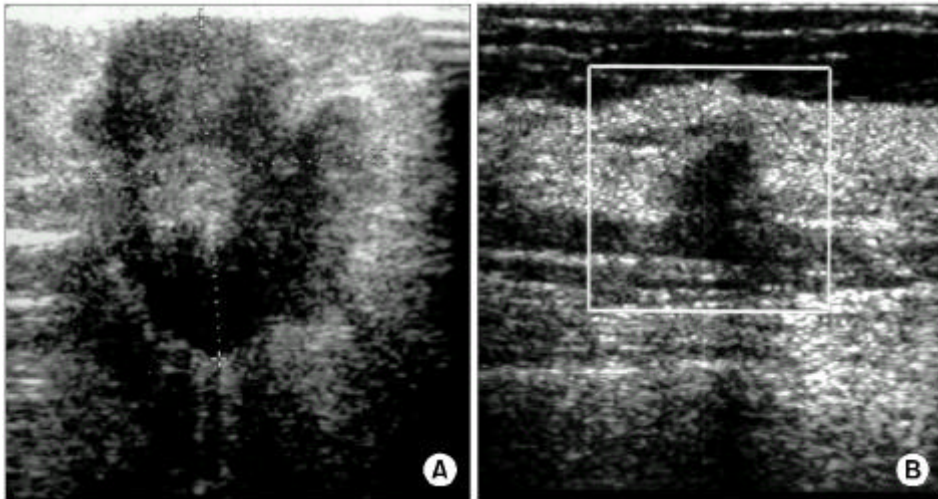
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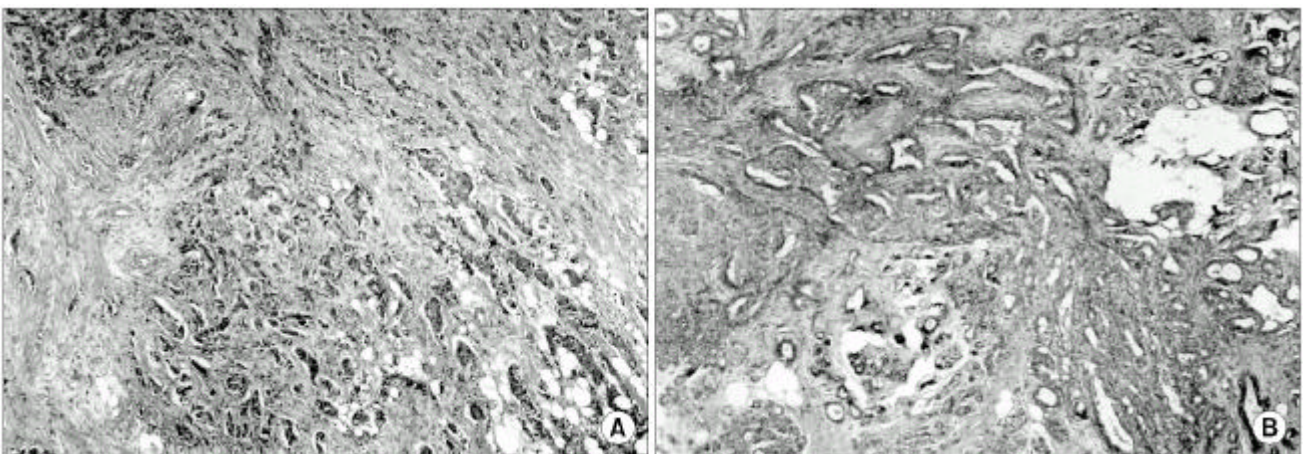
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**Fig. 1.** A: Irregular spiculated round mass with overlying thickening in the left breast inferolaterally, B: No visible abnormal mass.



**Fig. 2.** A: Lobulated, hypoechoic mass with central isoechoic area in left breast is noted, B: Ill defined echolucent lesion with shadowing in lateral aspect of right breast.



**Fig. 3.** A: The microscopic finding show nests and cords of tumor cells infiltration adjacent stroma (Left breast)(H&E stain,  $\times 40$ ), B: The microscopic finding show nests infiltrating adjacent stroma (Right breast)(H&E stain,  $\times 40$ ).

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3×3×2.5 cm 가 2 , 4

#2: 9

#3: 5×1×1 cm . Baildam (6) 29

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#1: 4×4×5 cm 9

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