Microdochectomy for Single-duct Nipple Discharge
L Wong,†MBBS, MRCOG, Y F A Chung,‡MBBS, FRCS, C Y Wong,¶MBBS, FRCS

Abstract

Introduction: Isolated single-duct nipple discharge is worrying and poses a surgical dilemma. Factors predicting malignancy are controversial. Materials and Methods: Retrospective review of 92 consecutive microdochectomies for single-duct nipple discharge in a tertiary referral centre over 8 years. Results: The commonest causes were ductal papilloma (52%) and fibrocystic diseases of the breast (21%). Five (5%) patients had breast carcinoma, of whom only 1 had an invasive component. The median age of these patients was 43 years (range 26 to 72 years) which was similar to median age of the whole cohort. Sixty-seven (73%) patients presented with blood-stained nipple discharge. The 5 patients with breast carcinoma had blood-stained discharge. Mammography was abnormal in 1 out of 4 patients in the carcinoma group. Conclusions: The incidence of breast carcinoma in patients presenting with isolated single-duct nipple discharge was low (5%) among Singaporean women. There was no reliable predictors of malignancy, though all patients with carcinoma presented with blood-stained discharge. Microdochectomy still remains an effective treatment for nipple discharge both for cure and diagnosis.

Key words: Breast carcinoma, Ductal papilloma, Mammography

† Registrar
Department of Obstetrics and Gynaecology
‡ Senior Registrar
§ Senior Consultant
Department of Surgery
Singapore General Hospital
Address for Reprints: Dr Wong Lisa, Department of Obstetrics and Gynaecology, Singapore General Hospital, 1 Hospital Drive, Singapore 169608.