



Idiopathic Granulomatous Mastitis: A 10-Year Review of Outcomes and Management Strategies in a Single UK Breast Unit

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Background

Idiopathic Granulomatous Mastitis (IGM) is a rare benign chronic inflammatory breast condition that predominantly affects young premenopausal women and may mimic breast cancer. Diagnosis is challenging, and there is no universally accepted treatment protocol and differential response to different therapeutic modalities.

Methods

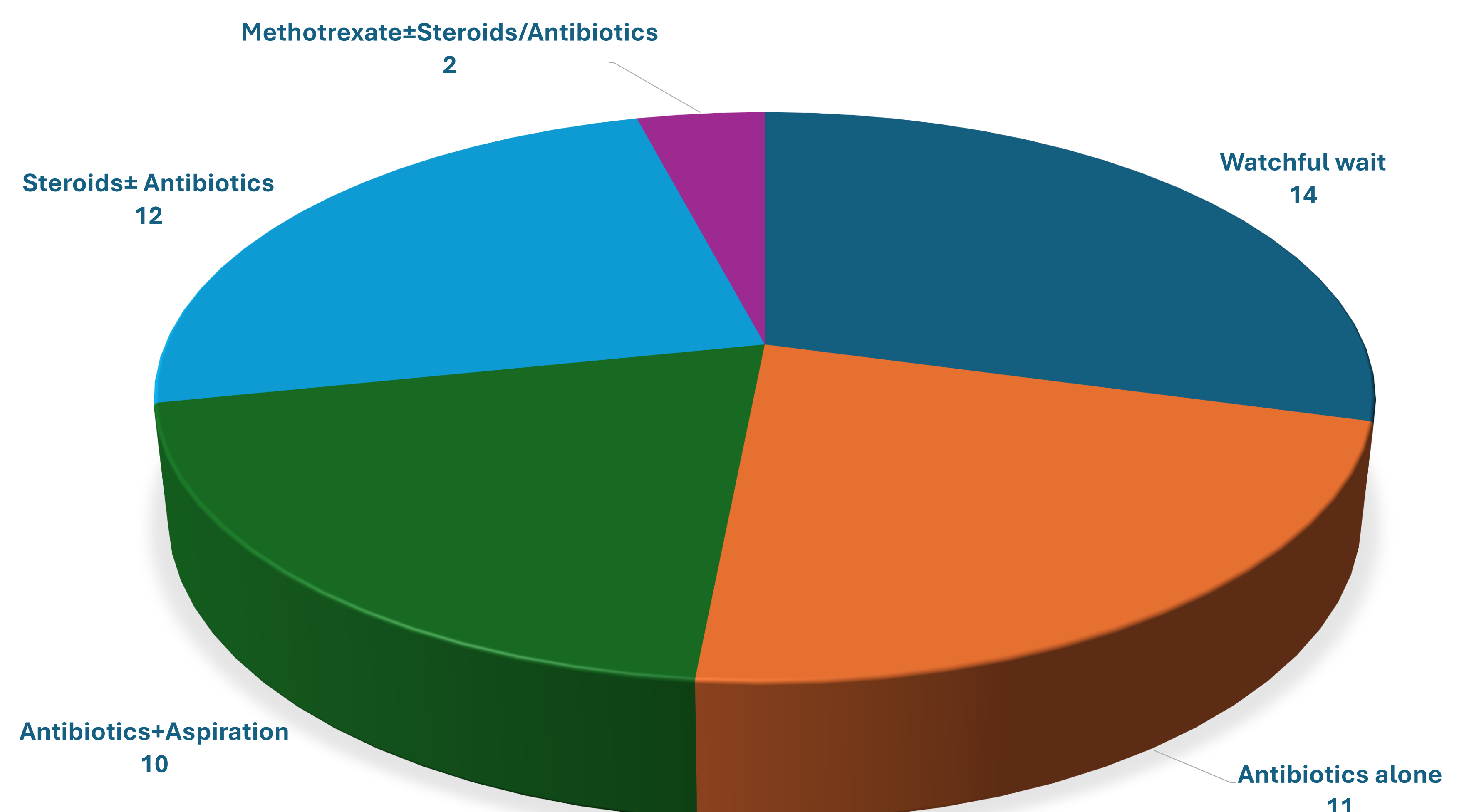
We retrospectively reviewed patients with histologically confirmed IGM presenting to North Manchester General Hospital between 2014 to 2024. Demographic and clinical data including treatment modalities and prognosis were collected from electronic records.

Conclusion

IGM appears to be more prevalent among patients of Asian background. Inflammatory presentation is associated with treatment escalation and worse prognosis. Patient's awareness of recurrent and contralateral presentation is crucial. We recommend establishing a regional registry to optimise care and guide future research.

Results

- 49 patients were included with a median age of 36 years. Majority of patients were females (98%), premenopausal (92%) and of Asian ethnicity (65%).
- Breast lump was the only presentation (\pm pain) in 53%, whilst 47% showed inflammatory signs including abscesses or discharging sinuses.
- Watchful waiting, image-guided aspiration or antibiotics resolved most isolated lumps within 6 months, whereas inflammatory presentation required prolonged treatment (average 18 months), often with corticosteroids \pm methotrexate. Interestingly, no organisms were isolated from cultures in all patients' aspirates.
- Recurrence occurred in 7 patients (14%), 4 of which had inflammatory signs in the first episode and 6 were of Asian ethnicity. 8 (16%) patients had delayed contralateral disease.



Different treatment modalities

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