59 y/o female with history of left breast cancer s/p left mastectomy and reconstruction with a tender fluctuant 8:00 left breast mass

Ryan Joyce, MD
Breast Abscess
Hypoechoic fluid collection with internal debris.
Palp Area

Lt Breast  8:00-9:00  MEDIAL

Dist  2.39 cm
Dist  0.966 cm
Increased peripheral flow on Doppler
Breast Abscess

Localized pus collection within breast tissue

- On ultrasound – Hypoechoic, thick-walked, irregular, complex cystic mass with increased surrounding vascularity and edema, posterior acoustic enhancement
- On mammography – ill-defined, noncalcified mass or focal asymmetry, +/- trabecular pattern and skin thickening due to edema, possibly ipsilateral lymphadenopathy
Breast Abscess

Localized pus collection within breast tissue

- Staph. aureus is most common organism
- Risk factors: breast feeding, diabetes, smoking, HIV, steroids, recent surgery, radiation, nipple piercing
- Erythematous, indurated, painful lump
- Fever in 5-47% patients at diagnosis
- Systemic abx directed to target skin organisms
- US-guided drainage for diagnosis, treatment
- Aspiration and fluid analysis/culture confirms Dx.
References