



Time to revise classification of phyllodes tumors of breast? Results of a French multicentric study

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OBJECTIVE: To assess prognostic factors of recurrence of phyllodes tumors (PT) of the breast.

METHODS: We performed a retrospective, multicentric cohort study, including all patients who underwent breast surgery for grade 1 (benign), 2 (borderline) or 3 (malignant) PT between 2000 and 2016 in five tertiary University hospitals, diagnosed according to World Health Organisation classification.

RESULTS: 230 patients were included: 144 (63%), 60 (26%) and 26 (11%) with grade 1, 2 and 3 PT, respectively. Recurrence occurred in 10 (7%), 7 (12%) and 5 (19%) patients with grade 1, 2 and 3 PT, respectively. In univariate analysis, moderate to severe nuclear stromal pleomorphism (HR 8.00 [95% CI: 1.65-38.73], $p < 0.009$) was correlated with recurrence in all groups including grade 1 (HR 14.3 [95% CI: 1.29-160], $p = 0.031$). In multivariate analysis, surgical margin >5 mm, (HR 0.20 [95% CI: 0.06-0.63], $p = 0.013$) were significantly correlated with less recurrence in all PT grades. For grade 1 PT, there was also significantly less recurrence with surgical margin >5 mm, (HR 0.09 [95% CI: 0.01-0.85], $p = 0.047$) in multivariate analysis.

CONCLUSION: The surgical margin should be at least 5 mm whatever the grade of PT. Moderate to severe nuclear stromal pleomorphism identified a subgroup of grade 1 PT with a higher rate of recurrence. This suggests that the WHO classification could be revised with the introduction of nuclear stromal pleomorphism to tailor PT management.

Résumé en anglais

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