Mucinous Mamari Carsinoma and Mammary Adenoma in Young Cat

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INTRODUCTION

Cat mammary tumors commonly occur in female cats above 9 years of age. The 85% mamae tumor in cats is malignant, characterized by rapid growth and spread. The cat race that has the highest presdiposis factor is Persian, followed by Siamse, and Mancoon. Mamae's tumor in Mimika cat occurs at the age of 6 months, Mimika is a female cat with a Maincoon race.

MATERIALS AND METHODS

Cat named Mimika, Maincoon race, female, gray, and 6 months old. The cat came on January 26, 2018 to the clinic with complaints of swollen and red mamae after a day of bathing. Previously on January 15, 2017, Mimika estrus about 1 week. Mimika will not eat and not active.

The physical examination showed that Mimika was still active, the temperature was 38°C, skin turgor <3, capillary refil time (CRT) <2, mucosa rose, and visible swelling in 2, 3 and 4 right and left quarters mamae. Mamae experienced red swelling, her consistency hard, and when palpated there was a sick reflex.

Investigations performed were CBC (Complete Blood Count), blood chemistry, x-ray, and biopsy. Deferential diagnosis of Fibroadenoma, Mammary Adenoma, Squamocus cell carcinoma, and Mucinous Mamari Carsinoma. Diagnosis obtained from biopsy Mucinous Mamari Carsinoma and Mammary Adenoma. Therapy given to Mimika are surgery, Ceftriaxone, Cystaid®, urdafalk®, and Transfer factor ®.

DISCUSSION

Mimika first came on January 26, 2018 with a swollen mamae complaint after being bathed the day before. On physical examination was found magnification of mamame on quarters 2,3, and 4 right and left, when palpation there is pain, consistency is chewy and not attached to muscle and skin, skin around red mamae (hemorrhage), and when disqueeze no fluid out of mamae. At that time, Mimika was not an appetite and inactive. Then performed blood tests and x-ray taking.

Results of CBC examination no significant value changes. The results of blood chemistry

showed an increase in creatinine, AST, and total protein, but the increase was not significant. In addition, from blood chemistry results showed the bilirubin value and Gamma-glutamyl total transferase (GGT) increased. This indicates the presence of inflammation in the bile duct / chest that can be caused by bacterial infections such as Escherichia coli, gallstones, or disorders of the pancreas (Indrawati 2011). This increase in Mimika can occur because there is an infection of Escherichia coli bacteria which is a normal bacteria in the digestive system, but when the condition of the body in bad condition can cause the bacteria to grow more and uncontrolled as normal flora that can infect the tract/gallbladder. X-ray examination results show radiopaque images on the mammary glands, this may indicate a solid mass (tumor) or fluid inside in mamae. In addition, observations were made to Mimika for 1 week at the clinic, during which time mamae grew rapidly. Based on anamesa, investigation and observation in the clinic, Mimika was diagnosed with a mamae tumor.

Mamae tumor is a degenerative disease due to excessive and uncontrolled mammary cell division. These tumors can be benign (benign) or malignant (malignant). Mamae tumors usually attack older cats (> 9 years) and 80-90% are malignant. This tumor is most commonly found in female cats compared to male cats, especially in non-sterile female cats (Tilley et al 2011). The cat race that has the highest presdiposis factor is Persian, followed by Siamse (34%), and Mancoon. Mimika is a female cat with Mancoon race so race factor can also support her Mimika mamae tumor event even though still young.

The cause of the mamae tumor is not yet known, but according to Fossum (2002), the tumor is related to the hormones estrogen and progesterone, both of which are mitogenic to mamae cells because of their ability to bind to esterogen receptors and progesterone in mamae cells. In addition, long-term progesterone-based drugs such as progestin may also cause tumor mammary (Misdrop 2002). Clinical symptoms of cats that have mamae tumors that do not want to eat, look lethargic, mamae increasingly swelled unilaterally or bilaterally with the onset of disease, and bleeding or ulceration in the mammary gland. Some tumors can produce clear fluid, milk, and bloody fluids. Benign tumors rarely experience wound or injury, while malignant tumors often experience injury. This is because malignant tumors have rapidly enlarging properties will suppress the blood supply to surrounding tissues resulting in degeneration, inflammation, and infection that cause pain. The tumors on Mimika are bilateral on the 2, 3 quarters, and the 4 right and left . Clinical symptoms are inactive, do not want to eat, did not find any fluid coming out of milk duct, but seen inflammation and swelling in mamae quarters 2, 3, and 4.

Mamae tumor action and therapy can be performed by surgery that is by removal of tumor mass by mastectomy method (simple, regional, unilateral, and radial) or even lumpectomy. The choice of method can be considered based on the size, quantity, and location of the tumor (Fossum 2002). Other treatments that can be done are chemotherapy, immunotherapy, radiotherapy, and hormonal therapy. The action on Mimika is surgery with regional masectomy method that is only the 3rd and 4th left mamae quartiles although in handling the mamae tumor should be done radial masektomi. However, during the surgery, Mimika's condition is not possible that respiration occurs a rest, decreased heart rate, and oxygen saturation also decreases with the operation.

Before a masectomy, the first stage is ovarihisterectomy. The action is done to avoid the emergence of mamae tumor again, because according to Fossum (2002), one of the factors causing mamae tumor is the hormone estrogen and progesterone that produces by ovaries, so that by removal of the genital tract, including ovaries as a producer of ovum will reduce the chances of mamae tumor . According to Beth et al (2005) ovarihysterectomy may reduce the risk of developing a mamae tumor, ie, if done under 6 months reduced the risk of 91%, 6-12 months reduced risk 86%, and 12- 24 months reduced risk 11%.

The tissue of mamae is then biopsied to determine the type of tumor. The results of the biopsy are Mucinous Mamari Carsinoma. These tumors are classified as mucin-producing malignant tumors and are rarely reported in cats, often difficult to distinguish from benign lipoma tumors. This tumor metastasis is very difficult to predict the level of invasiv through lymphovascular. Detection of tumor cell type metastasis can be done on the circulation of blood vessels bundles in the area of the tumor.

Dated March 12, 2018, Mimika came back to with mamae complaints swelled back, but eating is still good and still active. In the examination, the left and right 2 quartil mamae were enlarged compared to the first examination, especially the right and left mamae quadrant. Therefore a blood test is done in preparation for the second operation.

The second stage of surgery was carried out on all mamae, different from the first operation, in the second operation the active mammary glands appeared in the mamae tumor. The tissue is then removed and biopsy is performed. The thing from a biopsy is Mammary Adenoma, a benign tumor that can be infiltrative. Metastasis from adenoma tumors is rarely reported but it is difficult to distinguish between cysts and mammary ductectasia, which is a physiological process related to hormonal effects.

Different biopsy results in the first and second surgery can be caused bv ovarihisterectomy performed on the first operation. At the time of ovarihosterektomy actually will not affect the network that is already cancer, but can affect the network that is hyperplasia, which makes the division or development of abnormal cells to be halted (regeresi and disappear). The possibility of mamae tumor cells in quartiles 1 and 2 has not been cancerous but has undergone hyperplasia, so the cleavage or development of mammary tumor cells in quadrant 1 and 2 stopped after the first ovarihisterectomy was performed, hence the hormone that causes the tumor to occur and affect the mamae tumor no longer, therefore the result of mammary tumor biopsy that operated on the first operation is malignant while the second is benign.

Two months after the second phase of surgery, x-ray thoracic is done to determine the presence or absence of mamaeare tumor metastasis. In the case of mamae tumors, metastasis is often found in the lungs. Mimika x-ray results show no metastases, the lungs appear radilusent.

CONCLUSION

Mimika cat is exposed to a mamae tumor with two different types of Mucinous Mamari Carsinoma and Mammary Adenoma. Mamae tumors can occur in young cats especially in races that have presdiposis factors such as Maincoon and not yet sterilize. Ovarihysterectomy is one step that can be done to prevent the occurrence and development of mamae tumor.

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