

Mini Review





# Clear cell carcinoma of the breast in a developing community: what if the kidney?

#### **Abstract**

The author in 2003 published the book, "Primary Pathology." Among the different diagnoses was the "clear cell type" that characteristically showed clear staining of the cytoplasm. Five cases of it were found among the Ibo/Igbos of South-eastern Nigeria on using the method of histopathology data pool that facilitates epidemiological analysis. These were then documented. Thereafter, it was theorized that, since the kidney was another seat of clear cell cancer, it was recognized as being researchable if the patients had been investigated from that direction! This side of the research will merit the bioinformatics approach when the opportunity arises.

**Keywords:** breast, cancer, clear cell, kidney, research, bioinformatics

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## Introduction

In my 2003 Primary Pathology,¹ the "clear cell type" of cancer of the breast was recognized on the basis that "The name is apt in that the carcinoma cells have little or no stainable cytoplasm." A search was made among the Ibo/Igbo community in South-eastern Nigeria.² It was done on the basis of epidemiologic analysis accruing from the establishment of the histopathology data pool.³ On the theoretical ground, the other definition of clear cell cancer refers to another organ. In that context, "They are typically found in the kidney where it is also called clear cell carcinoma".

# Double methodology

## **Breast type**

Factually, the 5 specimens of breast cancer were analyzed in terms of those submitted to me for analysis hereunder (Table 1).

Table I Epidemiological data on breast cancer in the community

S/No	Lab. no	Initials	Age	Side	Town	Doctor
1	1043/77	IE	30	-	Owerri	Marcillino
2	UH 3090/87	UN	55	R	Otukpo	Ede
3	940152	ОС	35	L	Umuahia	Mbanaso
4	960093	OE	40	R	Enugu	Ude
5	990391	OJ	45	-	Enugu	Obioma

#### Laboratory report

Microscopy—The breast is the seat of inflammation as well as infiltrating cancer cells with clear appearances and prominent nucleoli.

These cases were submitted by individual doctors. All were proved to be due to clear cell cancers. Data analysis followed. They included the rarity of the lesion and the age range of 30years to 55years (range 41years). The capital city, Enugu, provided 2 cases while the remaining 3 cases came from distant towns.

## Kidney type

Theoretically, the problem could have been different. Thus, what

of the lesion starting in the kidney and spreading to the breast? Indeed, metastases to the breast are well known to occur from the kidney. 4.5 Since this is a probability, the bioinformatics approach would have been involved from the kidney axis!

## **Discussion**

The clear cell cancer is almost a colossus in terms of both its breast and kidney origins. Presumably, the wellness of these particular patients was in terms of their abdomens, this ensuring the seeking of attention to the breast only. However, the possibility of the other direction of flow of the illness should be kept in mind, i.e., the kidney - breast axis! Be that as it may, much as there was debate in the UK at one time regarding the benefit or not of laboratories distant from the requesting hospitals, I am persuaded that, in a developing community, the research avenues are most welcome. They are to be kept open actively.

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#### **Conflict of interest**

The author declares no conflict of interest.

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