ANIMAL MODEL
OF
HUMAN DISEASE

Breast Cancer

Animal Model: Feline Mammary Carcinoma

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Biologic Features

Mammary tumors are not uncommon in the cat, forming the third most frequent (17%) group of cancer disease after skin tumors and lymphosarcoma.¹ The annual incidence in California was estimated at 12.8 per 100,000 cats (male and female).² The great majority of mammary tumors, especially in older cats, are mammary carcinomas. The highest rate is in the 10–12-year-old group.^{1,3,4} Intact female cats were found to have in California approximately a sevenfold higher relative risk of developing mammary cancer than neutered females.²

The most important clinical sign is a nodule in a mammary gland that may also involve adjacent glands.^{3,4} The regional lymph nodes may be enlarged. Later in the course of the disease, dyspnea, due to pulmonary and/ or pleuritic metastases, often develops. Most cats with mammary tumors treated by surgery eventually die of recurrent disease or metastatic disease or both.^{3,4,5} The prognosis of cats treated by surgery alone is very poor, the average postsurgical survival period being 7.7 months.³ Factors associated with the prognosis, which was expressed in the 1-year survival rate, are tumor volume (P<0.01), lymphatic permeation (P<0.01), degree of differentiation (P<0.005), degree of pleomorphism (P<0.005), and number of mitoses (P<0.0001). The frequently encountered infiltration of lymphocytes and plasma cells was not found to be associated with the prognosis.³

Most carcinomas contain necrotic areas (Figure 1), and the growth is usually highly infiltrative. Lymph and blood vessels are frequently (25%)

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Figure 1—Papillary carcinoma showing extensive necrosis. Lymphoid foci in the stromal tissue. (With a photographic reduction of 56%)

involved.³ The degree of differentiation differs between carcinomas but often also within the same neoplasm.

The etiology of feline mammary cancer is still rather obscure. It has been reported that of a total of 7 intact female cats receiving semi-annual injections of progesterone, 3 developed a mammary adenocarcinoma.⁶ Virus-like particles have been detected in feline mammary carcinomas.⁷ In a later study⁸ C type (Figure 2) particles were found in 6 of 24 feline mammary carcinomas but not in benign mammary tumors or normal mammary glands. Of 51 mammary carcinomas, 11 showed fluorescence (Figure 3) with the antifeline leukemia virus serum but not with the antiserum against mouse mammary tumor virus, Mason-Pfizer monkey virus, and rat R35-mammary tumor virus (P). Recently the same group of workers⁹ reported on the finding of feline leukemia virus (FeLV) antigens



Figure 2—Glandular cavity with many C-type particles. Nucleoids are sometimes granular and irregular (*arrows*). (\times 60,000) (with a photographic reduction of 45%)

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Figure 3—Feline mammary carcinoma; cytoplasmic immune fluorence (IF) reaction with feline leukemia virus (FeLV) antiserum. (With a photographic reduction of 55%)

(35%) and of RD-114 virus antigens (55%) in feline mammary carcinomas. Intracisternal A particles (Figure 4), indistinguishable from those known to occur in some types of mouse mammary tumors, were found in 30% of feline mammary carcinomas tested by electron microscopy.

The injection of cell-free intraperitoneal homogenates in newborn kittens has not yet resulted in the development of either mammary carcinoma or lymphosarcoma.⁸

Comparison With Human Disease

Feline mammary cancer has many factors in common with the human disease. In both species surgery alone seems to be insufficient in a relatively large percentage of cases. Metastasis along lymph and blood vessels is frequent in cats and women.

The histologic features of feline mammary carcinoma are more similar to human mammary carcinoma than those of murine and canine mammary carcinomas.

Cats with mammary carcinoma are usually presented in a later stage of disease than women with breast cancer. Estrogen receptors in feline mammary carcinomas are very unusual (2/20¹⁰ and 0/40 [own data]), whereas

Figure 4—Intracisternal A particles in cisternae of endoplasmic reticulum. (×60,000) (with a photographic reduction of 55%)



in women in $\pm 70\%$ of mammary carcinomas estrogen receptors are detectable.¹¹

Usefulness of the Model

Feline mammary carcinoma, because of its biologic similarity to human mammary cancer, is a potential model for new modes of therapy, eg, immunotherapy.⁴ Etiologic studies (viruses, hormones) of feline mammary cancer, in comparison with those in other animals, may contribute to a better understanding of the possibly complex etiology of human mammary cancer.

Availability

Feline mammary cancer in not uncommon. The pooling of cases from private veterinary practices and veterinary medical schools may provide sufficient material for further studies.

References

- 1. Dorn CR, Taylor DON, Frye FL, Hibbard HH: Survey of animal neoplasms in Alameda and Contra Costa Counties, California: I. Methodology and description of cases. J Nat Cancer Inst 40:295–305, 1968
- 2. Dorn CR, Taylor DON, Schneider R, Hibbard HH, Klauber MR: Survey of animal neoplasms in Alameda and Contra Costa Counties, California: II. Cancer morbidity in dogs and cats from Alameda County. J Nat Cancer Inst 40:307-318, 1968
- 3. Weijer K, Head KW, Misdorp W, Hampe JF: Feline malignant mammary tumors: I. Morphology and biology: Some comparisons with human and canine mammary carcinomas. J Natl Cancer Inst 49:1697–1704, 1972
- 4. Hayes A: Feline mammary gland tumors. Vet Clin North Am 7:205-213, 1977
- 5. Brodey RS: Canine and feline neoplasms Adv Vet Sci 24:309-354, 1969
- 6. Hernandez FJ, Fernandez BB, Chertach M: Feline mammary carcinoma and progestogens. Feline Pract 5:45-48, 1975
- Feldman DG, Gross L: Electron microscopic study of spontaneous mammary carcinoma in cats and dogs: Virus-like particles in cat mammary carcinomas. Cancer Res 31:1261-1267, 1971
- Weijer K, Calafat J, Daams JH, Hageman PhG, Misdorp W: Feline malignant mammary tumors: II. Immunologic and electron microscopic investigations into a possible viral etiology. J Natl Cancer Inst 52:673-679, 1974
- 9. Calafat J, Weijer K, Daams H: Feline malignant mammary tumors: III. Presence of C-particles and intracisternal A particles and their relationship with feline leukemia virus antigens and RD-114 virus antigens. Int J Cancer 20:759-767, 1977
- Hamilton JM, Else RW, Forshaw P: Oestrogen receptors in feline mammary carcinomas. Vet Rec 99:477-479, 1976
- 11. Korsten CB, Persijn JP: A simple assay for specific oestrogen binding capacity in human mammary tumors. Z Klin Chem Klin Biochem 10:502-508, 1972