

Date: 6 June 2019 . 98/4/15.

Patient's Name: P.N.

Responsible Physician: Dr.Sedighi.

Patient Presentation:

-A 48 year old female with right breast cancer 14 years ago(1384)underwent MRM. Pathology examination reported IDC, T=4.5cm, G2, LVI +, 4 involved LNs, ER+, HER 2-,P53+.

-She received adjuvant chemoRT followed by Tamoxifen which after 2 years changed to Letrozole plus Diphereline and Osteomed.

-7 years ago(1391) she presented with bone pain and lumbar spine metastases was diagnosed. She underwent laminectomy, lumbar RT, BSO, and administered Aromasin plus Zolena (4 mg monthly for one year then every 3 months).

-Her follow up bone scans(1396,1397,1398) showed disease progression.

-Now she has presented with fracture of right and left femurs.

Question: What is the best therapeutic plan? Can Zometa be continued?

Recommended Plan: Fractures seems to be stress fractures rather than pathologic fractures. Zometa can be continued, although there are no enough evidences.



The left femur x-ray after surgery which shows shaft fracture.