

**Date:** 13 June 2019. 98/4/22.

**Patient's Name:** R.G.

**Responsible Physician:** Dr. Omranipour.

**Patient Presentation:**

- A 52 year old female presented with left breast mass which was diagnosed as breast cancer(IDC, ER+, PR+, HER2 2+, Ki67 8-10%, FNA of left axillary LN: Positive for malignancy).

-Her Bone scan showed increased uptake in T8, T10, L2, L3, L5, S1, right iliac crest, right hip, and mid shaft of right humerus in favor of multiple bone metastases.

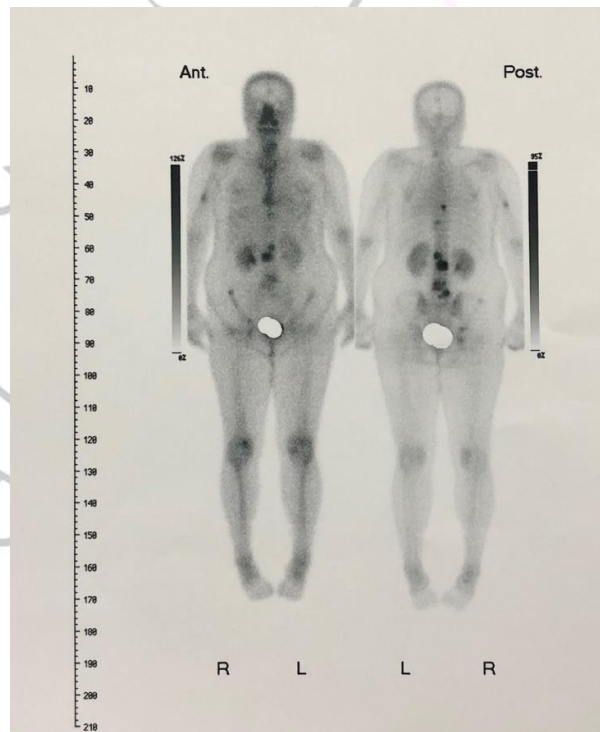
-Thoracic CT scan reported a 7mm nodule in RLL and lytic lesion in lower thoracic spines.

-Abdominopelvic CT scan showed multiple lytic bony lesions of the axial skeleton (lumbar spines and right ischium) in favor of metastases.

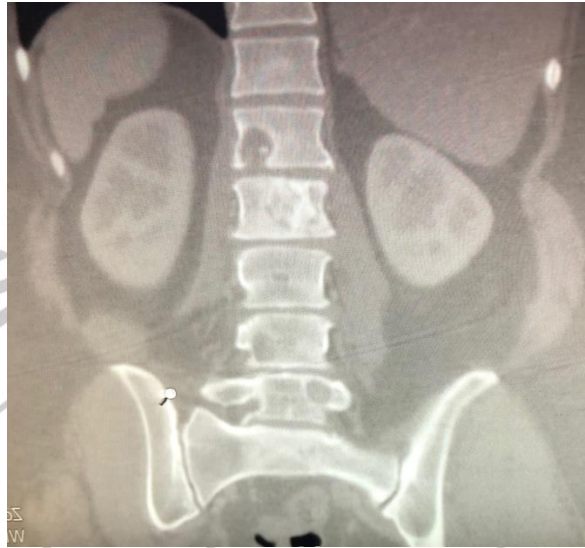
-Brain CT scan showed a meningioma in the falx (20\*18mm).

**Question:** Is local treatment is justified? What kind of systemic treatment is recommended?

**Recommended Plan:** No local treatment now; lumbar spine RT plus hormone therapy is recommended.



Bone scan of the patient which shows increased uptake in T8, T10, L2, L3, L5, S1, right iliac crest, right hip, and mid shaft of right humerus in favor of multiple bone metastases.



Abdominopelvic CT scan shows lytic bony lesions of the axial skeleton in favor of metastases.

Breast Disease Research Center