

**Date:** 2020/11/28 ;08/09/1399

**Patient's Name:** M.R.SH

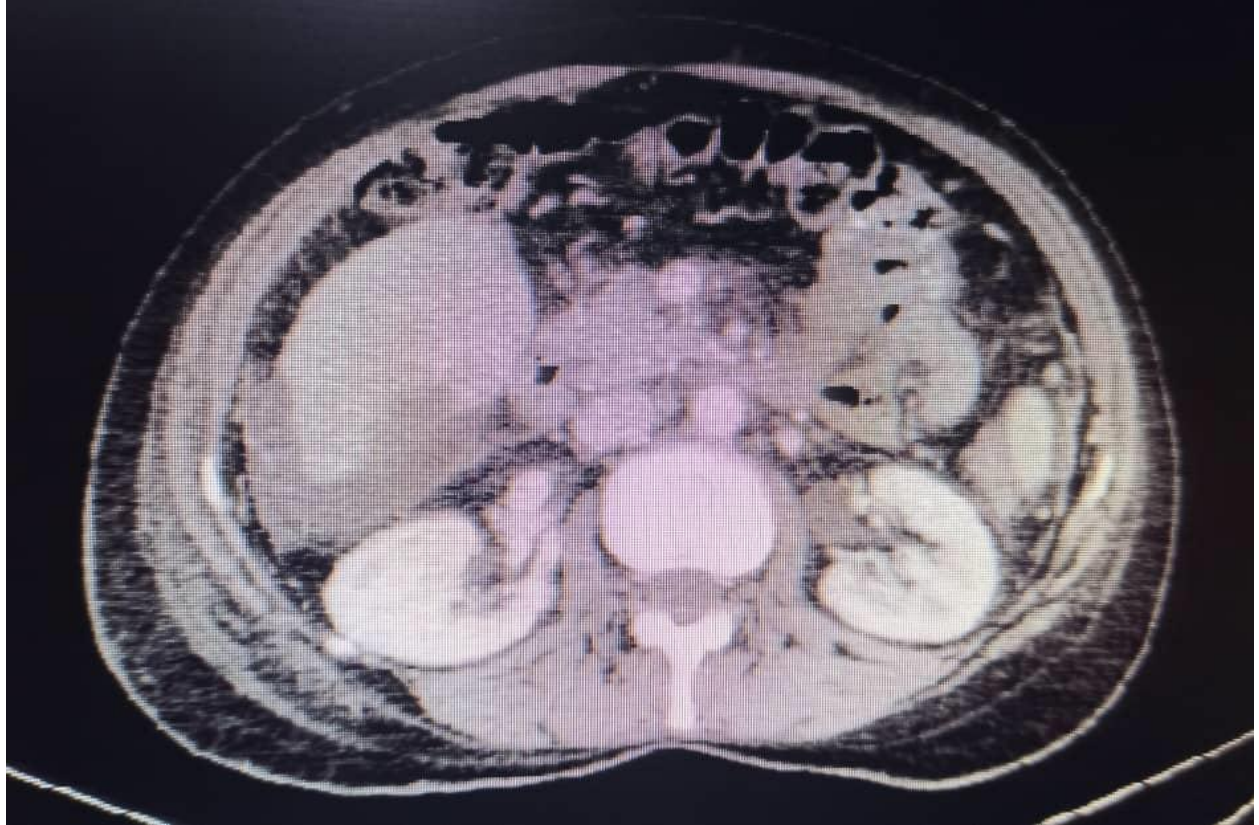
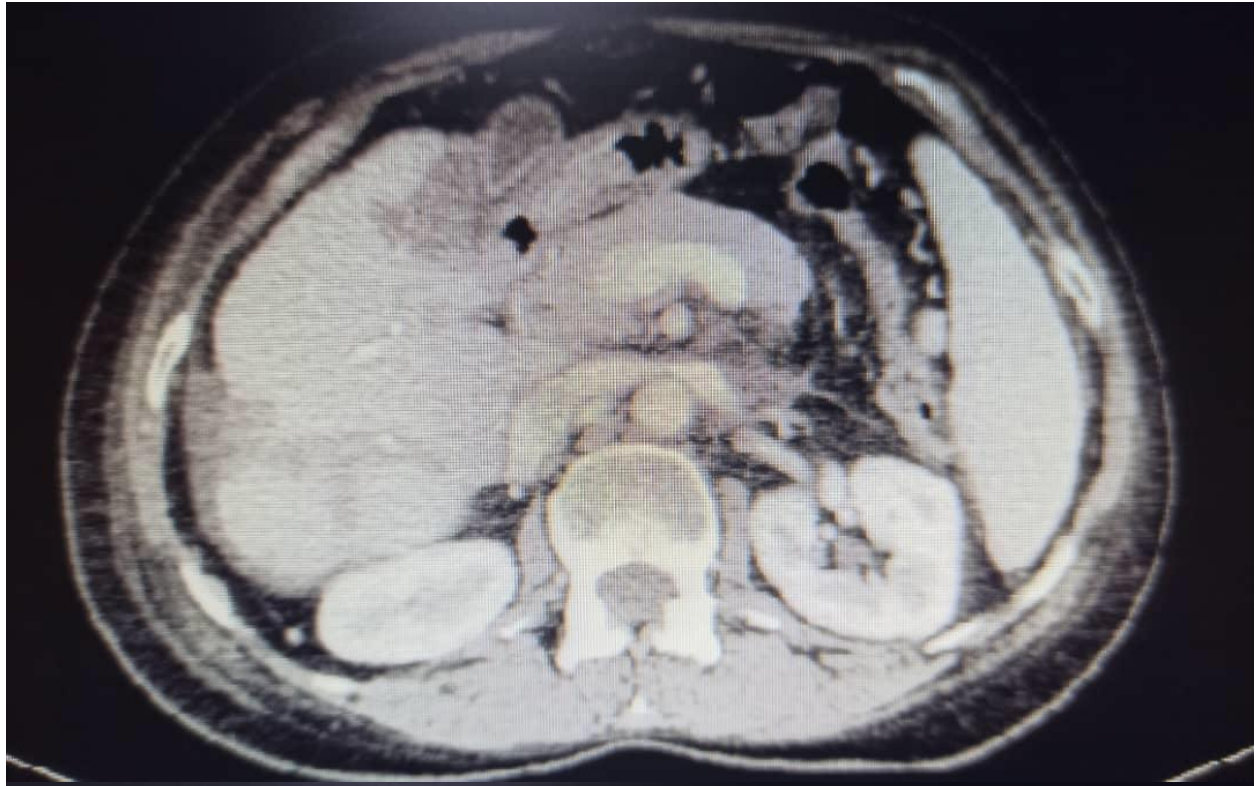
**Responsible Physician:** Dr.Omranipour- Dr. Esfandbod

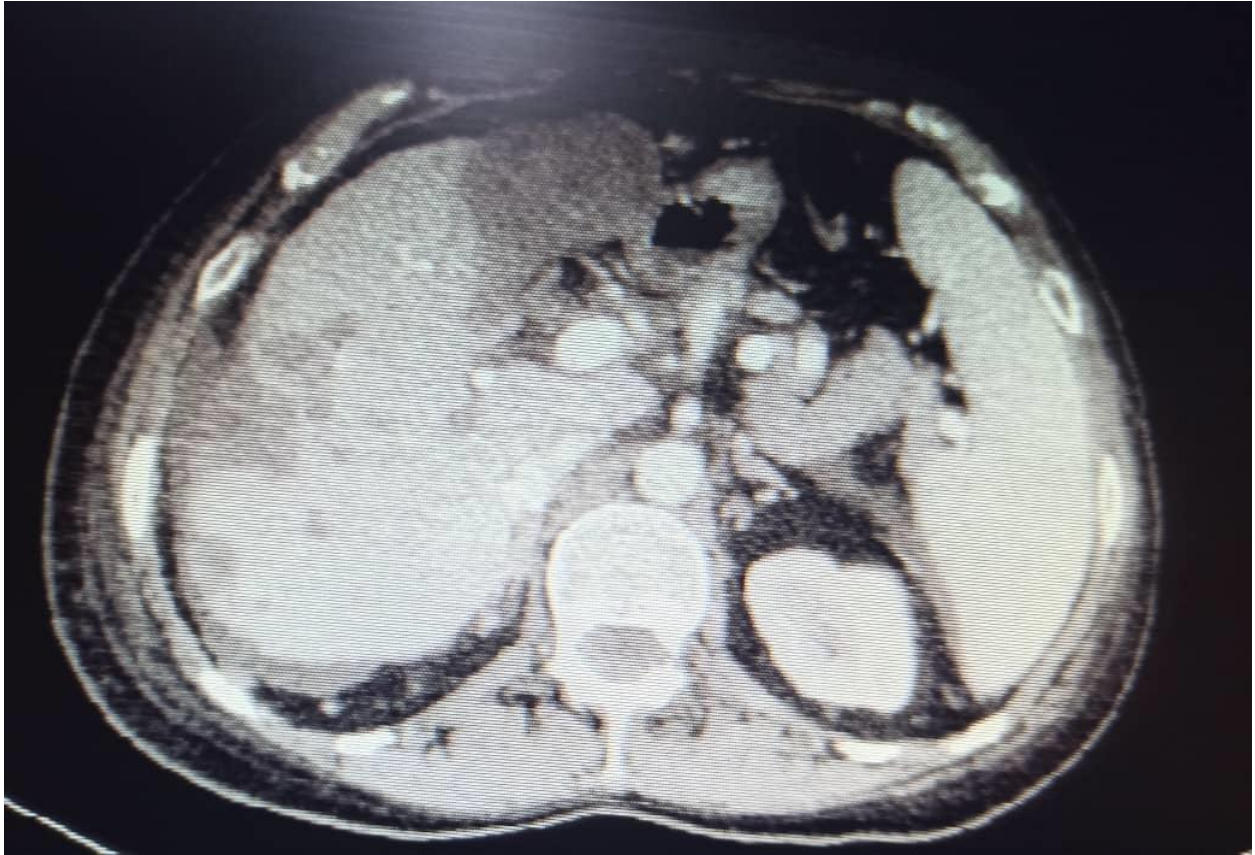
**Patient presentation:**

- 59years – Past history of axillary surgery 12 years ago (pathology is not accessible)
- Presented with right axillary ulcer next to previous surgery scar.
- Core needle biopsy result of ulcer: IDC –Grade 2- ER +87%;PR + 88% ;Her 2 2+;CISH ;Ki 67 24%
- After complete neoadjuvant therapy still there is no ulcer but because of a very painful stony hard remnant of it the patient cannot elevate her hand .
- In her primary metastatic workup: scattered multiple sclerotic bone metastasis with proper response to therapy in bone scan and multiple liver metastasis and occlusion of left portal vein branch and left liver lobe infarction containing hypodense metastatic nodules; peritoneal seeding and minimal ascites are found.
- MR venography of right axilla:edema of right axilla without vein occlusion.

**Question:** Should we do surgery just preventing axillary ulcer recurrence in coming days?

**considered plan:** No surgical intervention.





Breast Disease Research Center