

Date: 2020/12/19; 29/09/1399

Patient's Name: S.D

Responsible Physician: Dr. Jalaifar

Patient presentation:

- 35years

- Presented with Right breast (axillary tail) mass.

BCS (4/99) done: IDC; 2cm; Grade 3; Lymph vascular Invasion seen; Perineural Invasion seen; Margin Free;

ALND level 1-2 result: 2out of 23 lymph nodes involved; in level 3, 8 free lymph nodes

ER+90%; PR+20%; HER2 3+; Ki67 25%

-Post operation PET: posterior right liver lobe compatible with metastasis + few small sclerotic changes of left iliac bone adjacent to SI joint non FDG avid less likely to be metastatic (simultaneous bone scan was normal) but close attention highly recommended +paraaortic lymphadenopathy 11 mm (4/99)

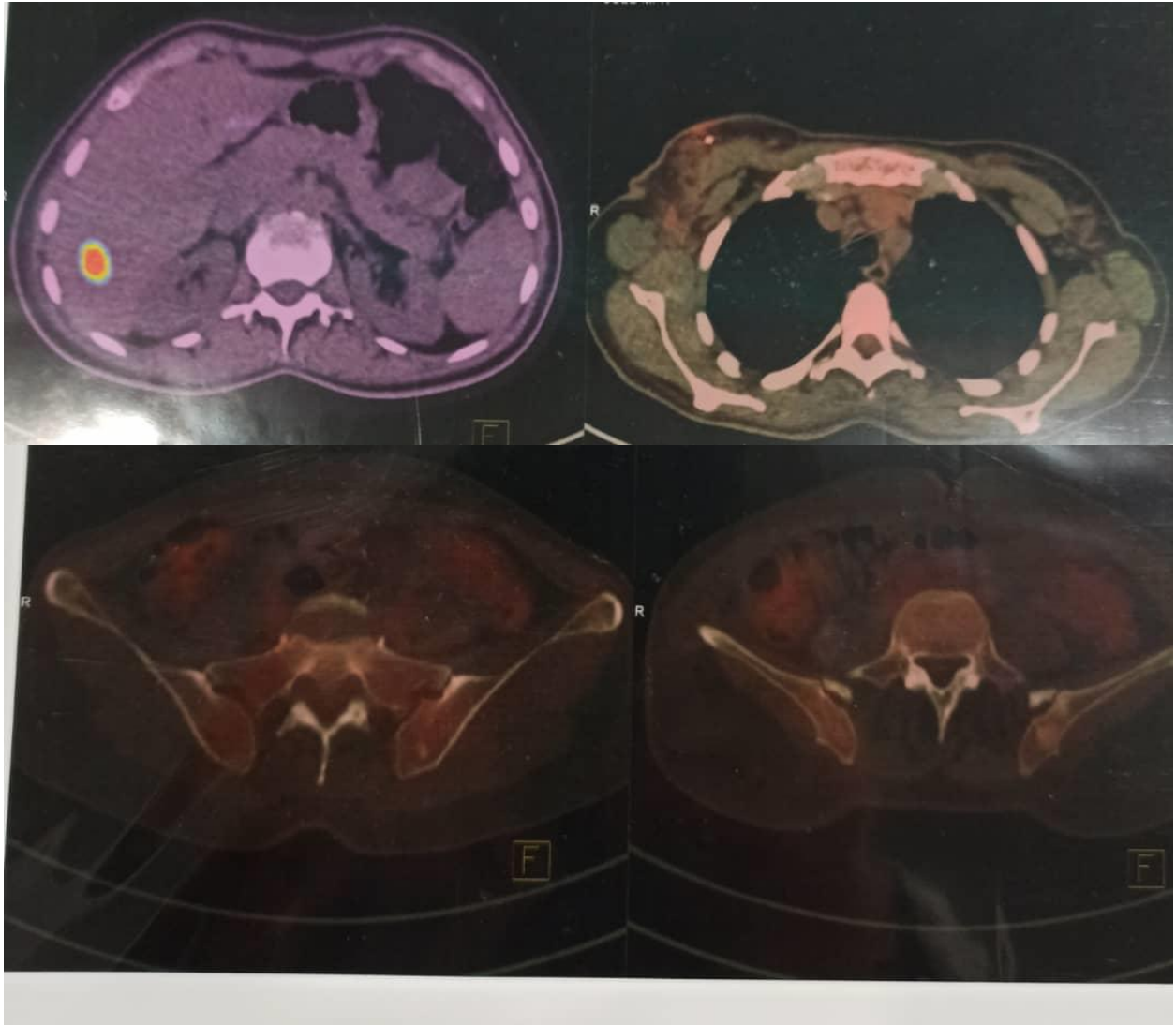
-CNB proved hepatic (segment 4) metastasis

-6 courses of chemotherapy done and she is receiving its continuation.

-Now Last PET (9/99) Complete metabolic response to therapy.

-Question: Shall we go forward to hepatic metastatectomy ? Is it indicated?

Considered plan: Perform breast adjuvant radiotherapy, in follow up secondary metastatic work up should be done. If they are negative and liver single metastasis can be visualized in MRI go forward to do metastatectomy.



Breast Disease Research Center