

**Date:** 10.10.2020 ; 1399.7.12

**Patient's Name:** N.KH

**Responsible Physician:** Dr. Omranipour

**Patient presentation:**

- 61 years , FH + breast 3<sup>rd</sup> & uterine 2nd degree
- Past medical history of right breast lumpectomy 18 years ago with mild epithelial hyperplasia & TAH & BSO 13 years ago with benign pathology.
- 1 year ago; Because of abdominal pain diagnostic work up done. In Abdominal Sonography & CT scan : cholelithiasis and 7 masses in Liver were seen which MRI confirmed their existence and multiplicity without any action of the patient (in a period of 5 months).
- 3 months later right breast mass (28mm & BIRADS 3 in sonography) declared with mastitis and multiple axillary lymph nodes and resultant core needle biopsy of: IDC- G2- score 5/9- PNI -; LVI+; ER- ; PR- ; her 2 3+ ; ki67= 45-50% , again ignored by patient
- 1 month later spiral CT scan of thorax and abdomen & pelvic regions showed: Right breast mass 6 cm+ multiple Right Axillary Lymph Nodes (up to 14 mm)+ at least 7 hypodense masses in liver (largest 4cm) + multiple right pulmonary nodules
- Chemotherapy done (TAC & zometa & herceptine) and so
- Now after 9 months of that time: CT scan : NO hilar or Axillary Lymph nodes & few nonsignificant mediastinal lymph nodes + Right. Breast. Mass 23mm + liver 2 large lesions 27 mm in segments 2&4 and small focal

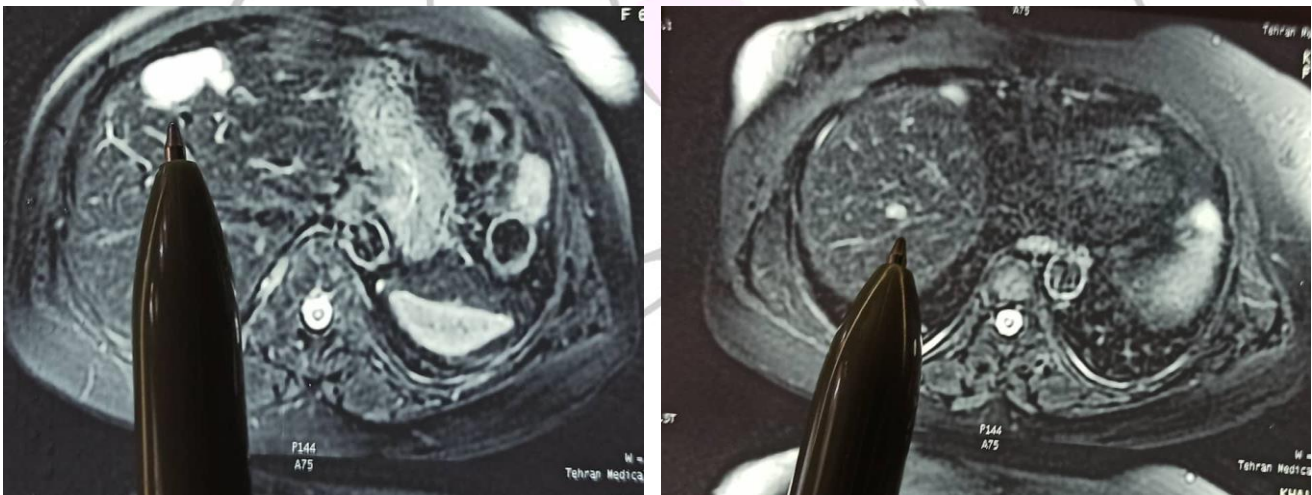
lesions in keeping with hemangioma And one Sclerotic lesion at left iliac  
17 mm

- Recent PET: no evidence of hypermetabolic primary or Metastatic lesion

**Question:** Plan?

**Recommended work up:** Nothing

**Answer:** Modified Radical mastectomy of primary site



Breast Disease Research Center