

**Date:** 20.07.2024; 1403/04/30

**Patient's Name:** H.S

**Responsible Physician:** Dr.Sarkarde

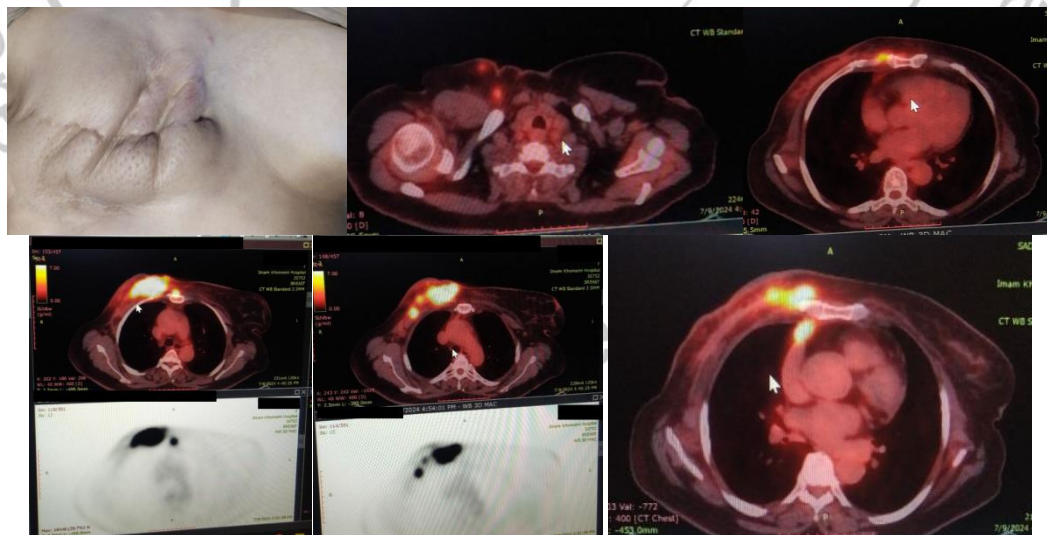
**Patient presentation:** A 57-year-old woman underwent right MRM in Ordibehesht 1402 (IDC, Tumor size: 35 mm, Grade: 2, LVI: negative, ER: 33%, PR: negative, HER-2: triple positive, Ki67: 17%, Nodes: 0/32). She underwent chemotherapy after surgery. In azar 1402, she was examined for skin lesions and with recurrence at the mastectomy site, she underwent chemotherapy again. CNB of right mastectomy bed showed IDC, ER: 5%, PR: negative, HER-2: triple positive, Ki7: 70%, PET CT scan (1402.12) showed post-surgical changes on the right side with multiple variable size masses and nodules (SUV 19.63) and hyper metabolic internal mammary lymph nodes (SUV 5.54). Re-staging was done and new PET- CT scan showed multiple hypermetabolic nodules and tumoral mass in right mastectomy bed, largest one measuring to 73\*234mm (SUV 2=24) involving right breast skin, pectoralis major and interpectoralis area. There are also hyper metabolic soft tissue densities up to 9mm in subcutaneous fat of anteromedial aspect of superior chest wall (sup to Right clavicle) hyper metabolic Right internal mammary and paracardiac lymph node up to 15mm.

**Question:**

What is the next treatment plan?

**Recommended plan:**

- Change of chemotherapy line and evaluation of response to treatment



*Figures: PET scan shows mastectomy bed recurrence with involvement of the chest wall muscle and internal mammary LN.*