

Date: 30.12.2023; 1402/10/09

Patient's Name: M.H

Responsible Physician: Dr.Omranipour

Patient presentation: A 43 year-old woman with positive family history of Breast cancer in her mother and grandmother. She has left Breast mass with rapid progress. She underwent NAC with 4 cycles of AC then checked for TC, which was not an acceptable response, so she underwent AC and Avastin again. Because of no response to NAC, MRM and ALND were performed. She underwent Xeloda and Pembrolizumab and Radiotherapy that she had local recurrence under Radiotherapy. Now her recurrence is operable but aggressive.

Biopsy: IDC, ER: 15%, PR: 5%, HER-2: negative, Ki67: 70%.

Pathology: Tumor size: 100mm, ER: negative, PR: negative, HER-2: negative, Ki67: 40%, ALND: 10/16 lymph nodes are involved.

Question:

What is the next plan?

Recommended plan:

- 1- Cisplatin and Immunotherapy or Gemcitabine and Cisplatin
- 2- After 3 cycles she should be reevaluated in MDT.



Figure 1: Recurrence of Breast cancer.