

Date: 28.09.2024; 1403/07/07

Patient's Name: F.M

Responsible Physician: Dr.Esphandbod

Patient presentation: A 61-year-old woman with a history of colorectal cancer underwent BCS surgery in 1394, followed by chemotherapy, radiation therapy, and hormone therapy (Tamoxifen 2 years, Aromasine 2 years). She was examined for coughing since 8 months ago, and mild pleural effusion and vertebral metastasis were seen in PET scan. A biopsy of the vertebra (L2) revealed metastasis from the breast (IDC, ER: positive, PR: positive, HER-2: negative, Ki67: 30%).

Question:

Are lung lesions typical of carcinomatous lymphangitis?

Recommended plan:

- The lesions are not typical and AI and CK 6/4 treatment are recommended.

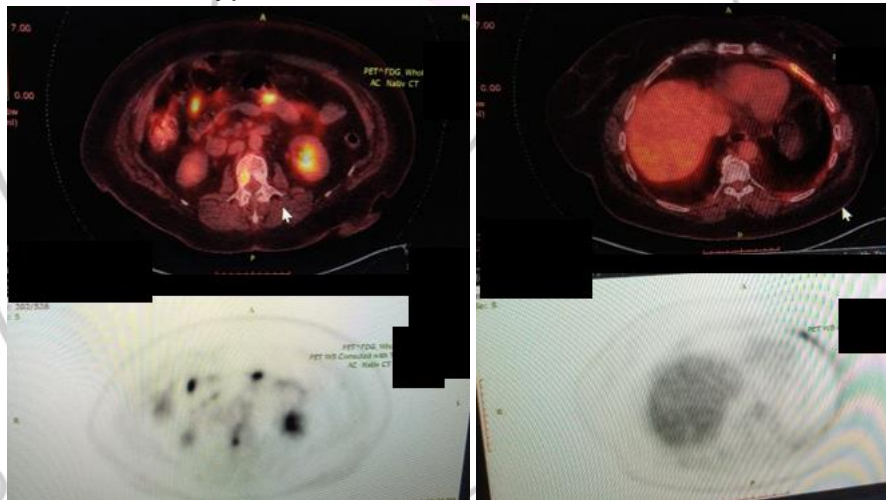


Figure 1 & 2: Pet CT scan shows hypermetabolic lesions in bones.

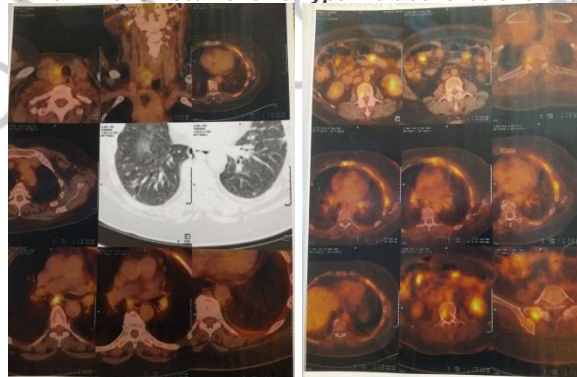


Figure 3 & 4: Multiple bone metastases in bone in PET CT scan.



Figure 5: The lung lesions not typical for carcinomatous lymphangitis.

