

**Date: 02.08.2025; 1404/05/11**

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

**Responsible Physician: Dr.Motamed**

**Patient presentation:**

44 Y/O woman with left breast metastatic inflammatory breast cancer (IBC) since 1402

TNBC Ki67:80%

**Initial Findings 1402:**

63mm mass in the left breast

**CT-PET:**

Multiple hypermetabolic metastatic lesions in both hepatic lobes  
skeleton Multiple lesions in axial and appendicular

Hypermetabolic pulmonary mass in the right upper lobe (RUL)

Multiple hypermetabolic metastatic lymph nodes in the mediastinal, bilateral hilar, and left supraclavicular regions.

Metabolically active intra-abdominal lymph nodes.

The patient underwent systemic treatment.

**Follow-up PET-CT in 1404:**

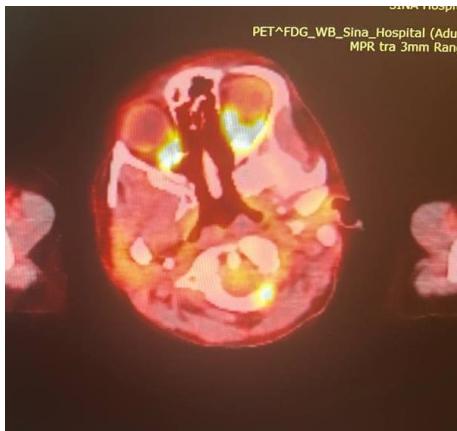
Hyper metabolic lytic lesion in the left side of C1 (with decreased metabolic activity compared to 1403)

New metabolically active sclerotic lesion in the 5th left rib.

Minimal metabolic activity in the left breast

Small non-metabolically active pulmonary nodule in the right middle lobe

No other metabolically active lesions identified throughout the body.



**Question:**

Is she a candidate for surgical intervention?

Does the metastatic lytic lesion in C1 require radiotherapy before surgery?

**Recommended plan:**

Neck XRT and neurosurgery consult (she is not a candidate for primary site surgery).