Advanced bilateral breast cancer, stage T4c N3 M1

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Abstract

The present study reports a case of advanced bilateral breast cancer with distant metastasis of 4 years for which the patient did not seek any medical advice. The aim of reporting this case is to highlight the fact that such advanced cases are still seen in developing countries.

Introduction

A 40-year-old lady had bilateral breast lump of 4 years over right side and 3 years over left side, involving almost the entire breast on both sides, for which she did not consult any clinician. She then developed multiple ulceration and nodules over right breast followed by left breast with complete distortion of nipple areola complex over right side followed by development of similar nodules over anterior abdomen (Figure 1).

Case Report

Breast biopsy was suggestive of invasive ductal carcinoma, estrogen and progesterone receptors were negative and Her-2-neu was also negative, and biopsy from abdominal wall nodules was suggestive of metastatic deposits. Imaging revealed metastasis to lungs and lumbar spine. This was a case of bilateral breast carcinoma, stage T4c N3 M1, and the prognosis is poor in such a case.1,2 Chemo and radiotherapy with toilet mastectomy were the only option.1,2 Bilateral toilet mastectomy was done and the patient received 3 cycles of chemotherapy (FEC regime – 5-fluorouracil, epirubicin, and cyclophosphamide). After completion of 6 cycles of chemotherapy, the patient was reassessed and radiotherapy was given to the bony metastasis. A written consent for publishing her case was obtained from the patient.

Discussion

It is not rare to see such locally advanced inoperable breast cancers with multiple distant metastases in many developing countries such as India. Breast cancer accounts for 19-34% of all cancer cases among women in India and carries a high mortality due to presentation at late stage of the disease. The reason for this kind of scenario is lack of awareness and non-existent breast cancer screening programs.3 Somdatta et al.3 concluded that awareness about breast cancer is low amongst women even in urban community and there is a need for awareness generation programs. Awareness regarding breast self examination among young generations is useful and it is the most important viable tool for early detection.4 Gupta5 concluded that health education programs through various channels are needed to increase the awareness and knowledge about breast self examination.

Conclusions

In underdeveloped and developing countries, there is a need for awareness generation programs to educate about breast cancer to decrease mortality due to this common cancer.

References