

General Surgery Paper Case #1

A 51 year-old single female, post menopausal, no comorbidities, came in with a 3 month history of rapidly enlarging mass on the right breast accompanied by weight loss. Patient has no previous surgery and (+) sibling with breast CA.

On physical examination, there is a hard, slightly moveable mass on the right breast measuring 10x11cm. The right nipple is inverted with noted areas of skin edema. There is also a solitary palpable moveable node noted in the right axilla. Left breast and axilla was unremarkable,



1. What is your primary diagnosis? What are the patient's risk factors? What are your differential diagnoses?
2. How will you work up the patient? If (+) for cancer, what other work up will you include in this patient?
3. What is the stage of the disease (refer to the labs done below)? What options will you offer to the patient in terms of medical and surgical management (if any)? What will be the sequence of your treatment plan?

4. What are the advantages and disadvantages of neoadjuvant therapy vs outright surgery at this stage of disease?
5. What will be your follow-up plan for this patient?
 - a. How would you monitor this patient after surgery?
 - b. What would you offer as screening for this patient's younger sister? For her neighbors who do not have relatives with breast cancer?
6. Fine needle aspiration biopsy (FNAB) vs Core needle biopsy (advantages vs disadvantages)
7. At what age is the best time to request for mammography, in terms of screening? Why?
8. What is the significance of the age/reproductive state of the person in relationship to risk for developing Breast Cancer and management of Breast Cancer?
9. What are other adjunct treatment modalities may be used for breast cancer? What additional diagnostic information would be needed for these to be considered?
10. What are some of the histopathologic types of breast cancer? How do they affect prognosis and treatment?

Core Needle biopsy of the right breast: Invasive mammary carcinoma

IHC: ER 3, PR 4, Her2neu 3+

Mammogram done on the contralateral breast (left) showed: No suspicious calcifications, nipple retraction, skin thickening and architectural distortion. BIRADS 1

CBC: 11hgb, 0.40hct, 9.8wbc, 0.50 neutrophils, platelets normal

ALT 44 u/L (Normal: 7 to 56)

AST 33 u/L (Normal: 10 to 40)

Alk P04 120 iu/L (Normal: 44 to 147)

Chest CT scan with IV contrast: (-)pulmonary metastasis

Abdominal CT scan with IV contrast: The liver, pancreas and spleen are of normal size and tissue homogeneity. No focal masses noted within. Intrahepatic ducts and vessels are unremarkable.

Bone Scan: no identifiable metastatic focus.

2D echo: Normal left and right atrial and ventricular dimensions. EF: 65%