

ncc

National Cancer Control Program



Case Presentation

1398

*Kefayat Ullah Safi, MD, PGD
Senior Resident Oncology
National Cancer Control Program
Ministry of Public Health*

FUNGATED BREAST MASS

- ❑ A 25 year old young Lady came to our OPD clinic on 25 July 2016 with a huge fungating and ulcerative lesion at her left breast.
- ❑ Initially it was a breast lump since last 8 months. It was painless with progressive character by time. Since last 4 months it opened with discharge and ipsilateral axillary involvement as well.
- ❑ She has visited private OPDs and clinics but result was not clear.
Finally she came to our service with a huge ulcerative and fungating lesion.



► FUNGATED BREAST MASS

□ we made prompt diagnosis and treatment plan.
(neoadjuvent chemotherapy, surgery and hormone therapy)

By recent she has completed her 3rd year of symptoms free and considered as one of our successfully treated patient.



SIGN AND SYMPTOMS



- Initially it developed gradually with progressive course even chest wall, ipsilateral axilla and skin involved. **T4**
- Sometime it had burning character rather than a real pain. **(PAINLESS)**
- By losing its parenchyma and fat tissues it become painful with pus discharge. **(FUNGATING MASS)**
- Sometime she had fever malaise with ongoing cachexia.

(**CANCER CACHEXIA**)



PHYSICAL EXAM



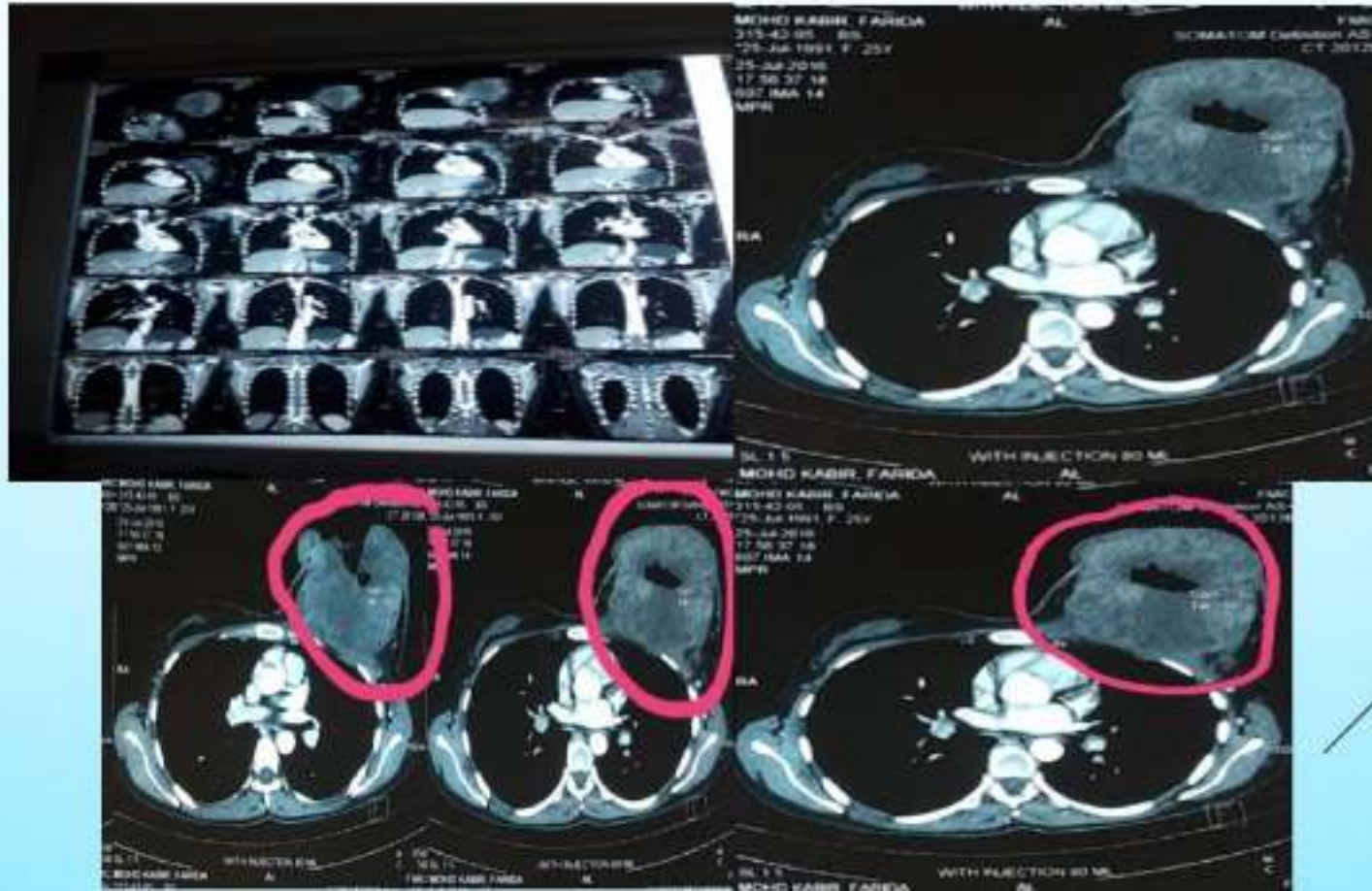
- ❑ Asymmetric breast, Mass lesion, nipple retraction and skin discoloration (pead, orange) on inspection. (Discharge is seldom)
- ❑ Palpable / mobile primary breast lump while fix on advance.
- ❑ Ipsilateral axillary lymphatic chain involved by tumor.



INVESTIGATIONS



- Routine blood tests were normal.
- CT scan chest, abdomen and pelvis represents :
(Left breast mass lesion 13 x 11 cm fixed to chest wall)





BONE SCAN NOT AVAILABLE

BIOPSY OF THE BREAST LESION

- Infiltrating duct carcinoma grade iii
- Estrogen receptor (ER), Progesterone Receptor PR ,Human Epidermal Growth factor Receptor, HER 2 neu and FISH were not available.



TREATMENT



Neoadjuvant chemotherapy

ADRIAMYCIN PLUS CYCLOPHOSPHAMIDE 4 CYCLES
TAXOL 4 CYCLES

Surgery.....Modified Radical Mastectomy
plus

Axillary LYMPH node clearance (two levels)

ncc



RADIOTHERAPY



Radiotherapy not received (NOT AVAILABLE even with financial support)

Hormone therapy (PREVENTIVE TAMOXIFINE)

and

follow up....

EVERY THREE MONTH EVERY 4 MONTH

EVERY SIX MONTH

YEARLY

