Removal of the Primary Tumor in Metastatic Breast Cancer?
Disclosures

- No disclosures
Female, 67 years old

Diagnosis: Left Breast Cancer since January, 2018

Stage IV: T4cN3M1

- T4c: tumor 6 cm, extension to chest wall, skin edema
- N3: metastatic axillary lymph nodes and supraclavicular lymph nodes bilateral
- M1: Moderate left pleural effusion

ESMO PRECEPTORSHIP PROGRAMME
Histology: Grade 2 Invasive Ductal Carcinoma

IHC: ER (+++) 80%, PR (++) 40%, Her-2/neu (-), Ki67 (+) 15%

CT abdominal: insignificant

MRI brain: insignificant

Bone scan: insignificant
- Medical history: insignificant

- Treatment: Paclitaxel 175 mg/m² plus Carboplatin

AUC = 6 up to 6 cycles every 3 weeks

- However, after 3 cycles, she had fatigue and moderate anemia with hemoglobin 95 g/l

- She had a partial response.
- She received first line endocrine therapy.
- She used a combination of both anastrozole 1 mg daily + fulvestrant 500 mg on day 1 and 14 followed by 500 mg every 4 week.
- She tolerated endocrine therapy well.
ESMO PRECEPTORSHIP PROGRAMME

- Initial
- After 3 cycles chemotherapy
- After 3 months endocrine therapy
After 3 months endocrine therapy: partial response

Tumor: 2 cm, some left axillary lymph nodes < 1 cm. No supraclavicular lymph nodes bilateral. No left pleural effusion.

=> Discussion: Removal of the Primary Tumor?