ESMO Preceptorship Programme

Locally Advanced Pregnancy Related Breast Cancer

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Breast – Singapore – 25-26 September 2019
DISCLOSURE OF INTEREST

- No Disclosures
32Y, ECOG:0

Noticed a lump during second trimester of pregnancy

Treated as breast abscess with incision and drainage performed.

Tissue was sent for histopathology:
- Invasive Ductal Carcinoma, grade III.
- ER negative, PR negative, Her-2-neu negative
Work-up and management

- She received neoadjuvant chemotherapy
- Adriamycin + Docetaxel (4 cycles during pregnancy, 3 afterwards)
- Progression during chemotherapy

LEFT BREAST:
- Fungating mass involving whole breast
- Palpable axillary nodes
CT scan Chest and abdomen:
- Large mass in the left breast with invasion of the underlying pectoralis major muscle.
- Multiple enlarged left axillary lymph nodes
- No pulmonary or hepatic metastases.

Skeletal scintigraphy negative for metastases.
How to proceed further?

- Further systemic therapy (PARPi/platinum agents)
- Addition of immunotherapy?
- Radical surgery excising pectoralis major muscle.
Histopathology

- Invasive ductal carcinoma
- No definite response to therapy
- Size 16 x 15 x 10.5 cm
- Tumor involving dermis ulcerating through skin.
- Superior and medial skin margins separately sent tumor free.
- 1/20 LN +, 0.2 x 0.1 cm, no perinodal extension, no fibrosis/scarring
Adjuvant XRT

No adjuvant chemotherapy

Stayed disease free for ~18 months

Pulmonary metastases

Started on atezolizumab + Nab-paclitaxel

Rapidly progressed, and died of disease
Thank you