

Luminal Breast Cancer Pre-Treated with Pseudo Therapies

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Received date: March 13, 2019; Accepted date: April 17, 2019; Published date: April 23, 2019

Citation: Sosa MM (2019) Luminal Breast Cancer Pre-Treated with Pseudo Therapies. Med Case Rep Vol.5 No.2:95.

Clinical Image

In October 2017, a 55-year-old postmenopausal woman, who previously has been treated with alternatives cancer treatments, presented at the emergency department for evaluation and treatment.

The patient reported that one year ago, she had felt a big lump in her left breast, and she didn't consult in the hospital. She was treated with another cancer treatment without evidence of benefit. Progressively, both breasts had become much erythematous, itchy and appearance of cutanides and axillary and supraclavicular lymphadenopathies (Figure 1).



Figure 1 Appearance of cutanides and axillary and supraclavicular lymphadenopathies.

Finally, she was diagnosed of an intraductal carcinoma T4cN3cM1 due to lung metastasis, grade 3 Stage IV, positive estrogen and progesterone receptor positive, Ki 67: 8%, human epidermal growth factor receptor 2 (HER2) negative.

In November 2017, we decided start treatment with Letrozole 2.5 miligrams (mg) per day and Palbociclib 125 mg per day, administered orally in 4-week cycles (3 weeks of treatment followed by 1 week off). After 2 months of treatment with no adverse events, she presented an excellent clinical response (Figure 2) and continued treatment. In next evaluation Computer Tomography Scan showed decrease of lung metastasis and clinically existed a decreased of breast lesion and lymphadenopathies.

lymphadenopathies (Figure 3). At present, the patients continue with Letrozole and Palbociclib with no disease progression.



Figure 2 Clinical responses.



Figure 3 Computer tomography scan showed decrease of lung metastasis and clinically existed a decreased of breast lesion and lymphadenopathies.