Background
Breast cancer diagnosed during pregnancy poses unique challenges. Application of standard treatment algorithms is limited by lack of level I evidence from randomized trials.

Patients and methods
A retrospective analysis of cases of Pregnancy Associated Breast Cancer (PABC) treated at Kasr Elaini Center of Clinical Oncology and Nuclear Medicine, Faculty of Medicine-Cairo University, Egypt in the period between Jan. 2009 and Dec. 2013. Clinico-pathological characters, treatment adopted and treatment outcome were analysed.

Results
Thirty eight files were reviewed, but the cohort involved only 21 patients with available data. The majority presented with early-stage breast cancer. Most of them (66.7%) underwent surgical resection during pregnancy. A total of 18 patients received anthracycline-based chemotherapy during pregnancy; of those, 5 patients also received paclitaxel. Eighteen patients delivered liveborn neonates; five cases (27.8%) delivered prematurely. Regarding neonatal outcome, mean neonatal birth weight was 2547 ± 817 grams. In 5 cases (26.3%), neonatal birth weight was <10% for gestational age. Eight neonates (42.1%) had normal Apgar scores (≥7), 6 (31.6%) neonates had fairly low Apgar scores (4-6), and 5 (26.3%) neonates had critically low Apgar scores (≤3). One child (0.05%) was born with a congenital anomaly (cleft lip and tongue tie). No intrauterine fetal demise or neonatal death occurred.

Conclusion
Within a multidisciplinary academic setting, PABC treatment followed contemporary algorithms without apparent increase in maternal or fetal adverse outcomes. Continued attention to maternal and fetal outcomes after PABC is required to determine the benefit of this delivery strategy.