

Metastatic Triple-Negative Breast Cancer; Unusual Presentation

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PAJO, December 2013, 6(4): 40-44

Abstract

Triple-negative breast cancer (TNBC) which does not over-express HER-2 (human epidermal growth factor receptor 2), estrogen receptor, or progesterone receptor creates the biggest challenge in the treatment of metastatic breast disease. Patients diagnosed with TNBC have shown an inferior prognosis with the increased likelihood of distant recurrence including brain metastases within five years of diagnosis. We present an interesting case of a 37-year-old female diagnosed with invasive high-grade triple-negative breast cancer, who presented with right breast mass and multiple cervical and axillary LNs. Restaging work up document no visceral metastasis. She was treated with multiple lines of chemotherapy with complete response (CR), but unfortunately with rapid relapse after each one. The unusual is that all relapses were in cervical area only without any visceral involvement or local recurrences which resembles lymphomas or head and neck tumors.