Medical Image Database
ISSN: 2602-0459
Vol. 3 No. 1
2020

*Received: 13.01.2020*
*Published: 31.01.2020*

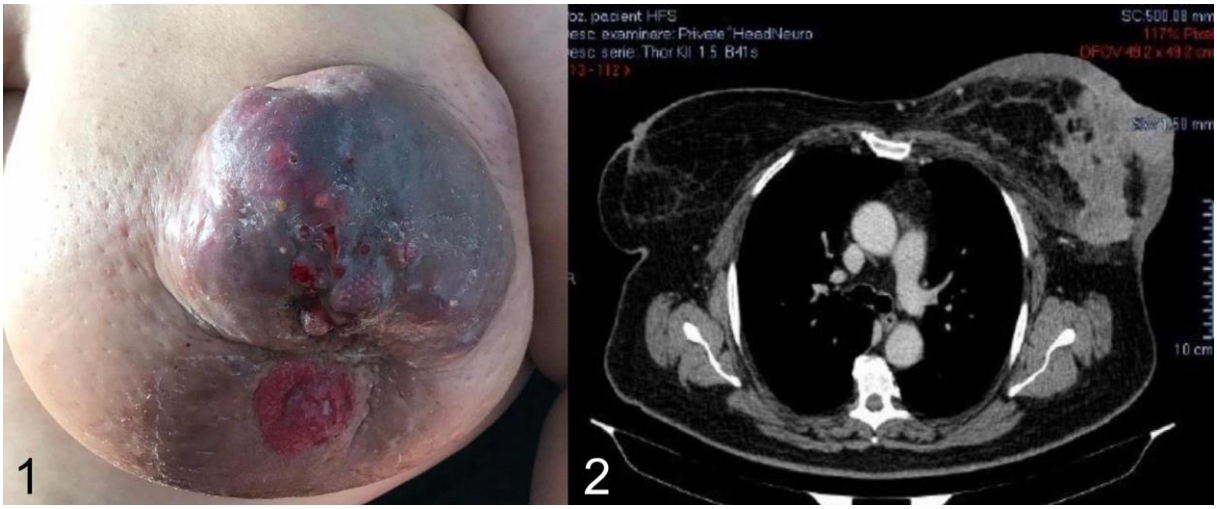
# BREAST CANCER – NO SCREENING AND RAPID EVOLUTION

Cătălin-George Nenciu[1], Mihai Cristian Dumitrascu[2,3], Florica Sandru[3,4]

[1] Bucur Maternity Hospital, Bucharest, Romania

[2] Bucharest Emergency University Hospital, Bucharest, Romania
[3] Carol Davila University of Medicine and Pharmacy, Bucharest, Romania

[4]Elias Emergency University Hospital




**Keywords**: *breast cancer, rapid progression, metastatic cancer*

According to the World Health Organization, the most frequent type of neoplasia in women is represented by breast cancer, both in developed and developing countries [1]. Each year, approximately 2.1 million women are diagnosed; 62.7000 women died from this cause in 2018 [2]. The two main management strategies are early diagnosis and screening - represented by clinical breast examination, mammography and ultrasonography (with mammography proven to be the most effective one).

In this paper, we present the case of a 57-year-old woman that addressed to the gynaecologist for a bleeding breast tumor. Six months before presentation she felt a breast nodule at palpation and with 3 months before it started to grow. The tumor was approximated to be 8 cm, situated on the upper quadrant tangent to the mammary areola, with ulcerated areas. The breast had peau d'orange areas and retracted areola. One large lymphadenopathy on the left axilla was detected during clinical examination. A biopsy was performed with the histopathologycal result of

Medical Image Database
ISSN: 2602-0459
Vol. 3 No. 1
2020

moderate differentiated breast carcinoma NST (no special type), G2, Nothingam score=7. The computer tomography revealed expansion process located in the upper and lower quadrant of the left breast, with polylobate, spicular contours with macronodular appearance, intensely iodophylic, necrotic structure. The trans axial dimensions were 127/99 mm. Skin thickening at 17mm was found. Axillar lymphadenopathy were revealed and multiple metastatic nodules localized in both lungs.

The absence of screening or prompt specialized care can only lead to poor outcome and reserved evolution.

DOI: https://doi.org/10.33695/mid.v3i1.66

***Pages**: 13-14*

***References***

*https://www.who.int/cancer/detection/breastcancer/en/*

*https://www.who.int/cancer/prevention/diagnosis-screening/breast-cancer/en/*