

# Case Report on Awareness of Breast Cancer

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**Abstract – Objective -** To describe a case of adult patient with history of Breast Cancer.

**Clinical Presentation and Intervention -** A 35 year old woman was admitted with complain of lump in left breast over course of 6 month generally increase in size. The patient had history of lump in left breast 6 year ago the lump was painless and no complication was found. The excision of lump was performed. The size of scare found around left areola was 8×5cm. After physical examination the physician described lab test to identify the all aspect of the disease which was complete blood count (CBC), Liver function test (LFT's), Prothrombin time(PT), Activated Partial Thromboplastin Time(APTT), Urea, Creatinine and platelet count

**Conclusion-** Physician was clinically diagnosed the condition as breast cancer on the laboratory investigations. Behavioral, dietary modifications and conservative surgical treatment were necessary for the treatment of disease.

## 1 Introduction

Breast cancer is the most common malignant condition of breast. Malignant means cells grow abnormally, harmfully and uncontrollably. Breast cancer is a cancer that forms in the tissue of the breast –usually in the ducts (tubes that carry milk to the nipple) or lobules (glands that make milk). It occurs in both men and women although male breast cancer is rare. (Garcia, et, al, 2007)

Breast cancer is 2<sup>nd</sup> leading cause of death in the world. The majority of countries with high breast cancer rates are located in Europe. Belgium has the highest incidence with 111.9 people out of 100,000. Breast cancer is the most common cancer in women both in the developed and less developed countries. It is estimated that worldwide over 508,000 women died in 2011 due to breast cancer. Incidence rates vary worldwide from 19.3 per 100,000 women Eastern Africa to 89.7 per 100,000 women in Western Europe. Pakistan has the alone highest rates of breast cancer than any other Asian country as approximately 90000 new cases are diagnosed every year out of which 40000 die. At some stage of life 1 in 9 women in Pakistan has become the patient of breast cancer. (Minhas and Umar, 2015)

There are two main types of breast cancer, non-invasive and invasive. **Non-invasive** breast cancer is also called the ductal carcinoma. In this type the cancer cells grow in the duct but have not spread into the healthy breast tissues. **Invasive breast** cancer is also called infiltrating ductal carcinoma because in this type the cancer spread outside the ducts and lobules. It is the most common type of breast cancer, about 80% cases diagnosed with this type of cancer. (Senkus-Konefka, et, al, 2018)

## 2 Case Presentation

A 35 year old woman was admitted with complain of lump in left breast over course of 6 month generally increase in size. The patient had history of lump in left breast 6 year ago the lump was painless and no complication was found.

The excision of lump was performed. Patient had no history of pain, discharge from nipple, breathlessness, cough, diarrhea, hematuria and bowel complains. The size of scare found around left areola was 8×5cm. After physical examination the physician described lab test to identify the all aspect of the disease which was complete blood count (CBC), Liver function test (LFT's), Prothrombin time(PT), Activated Partial Thromboplastin Time(APTT), Urea, Creatinine, platelet count, Hepatitis B, C and Mammography.

**Table 1:** Complete Blood Count test (CBC)

Test Description	Patient values	Reference values
White Blood Cell(WBC)	8.3	4.0-11.0
Hemoglobin (HB)	13.3 mg/dl	12-15
Platelet count	267	150-400
Red blood cell	4.57	4.2-5.5
Prothrombin Time(PT)	10.6	9.0-13.0
Activated Partial Thromboplastin Time(APTT)	25	22.9-33.5

**Table 2:** Liver Function Test (LFT)

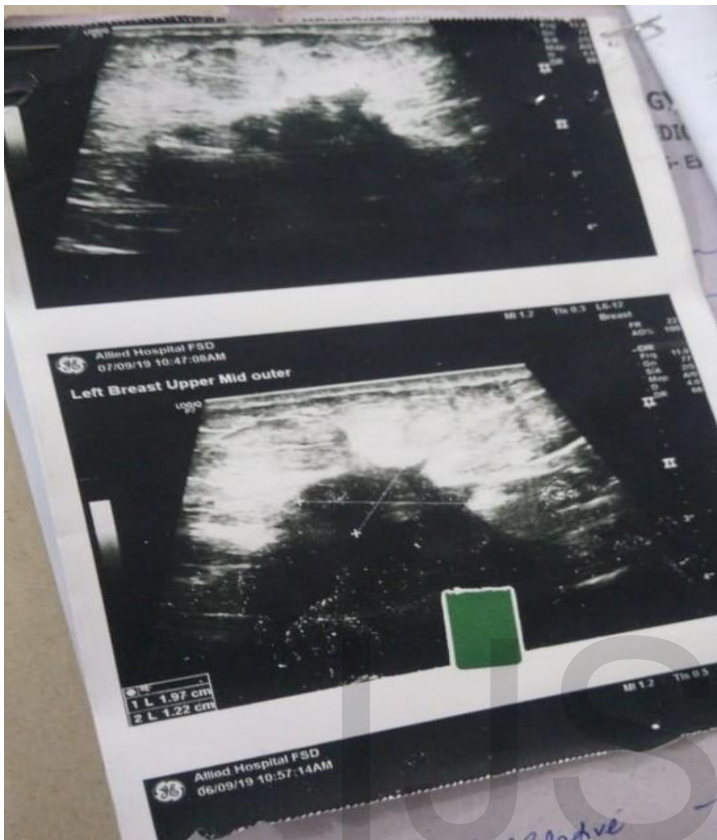
Test Description	Patient Value	Reference Value
Alkaline Phosphate(ALK)	139.0 U/L	Adult:80306 Child: upto 645
Bilirubin Total	0.25 mg/dl	0.1-1.1
Bilirubin Direct	0.13 mg/dl	0.0-0.5
Bilirubin Indirect	0.12 mg/dl	0.1-1.1
SGPT (ALT)	46.0 U/L	9-45

**Table 3:** Renal Function Test

Test Description	Patient Value	Reference Value
Blood Urea	32.00 mg/dl	12.0-50.0

Creatinine	0.72 mg/dl	0.50-0.90
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After seen these results physician recommended her memo grapy. The tests results confirmed that patient have breast cancer.



The Mammography report showed that there is an appreciated irregular shaped lesion in upper left quadrant of left breast.

### 3 Discussion

Breast cancer is the most common cancer in women and the leading cause of cancer-related deaths in women worldwide. Invasive lobular breast cancer (ILC) accounts for 10–15% of all invasive breast carcinomas and it has distinct etiological, clinical and biological characteristics compared with the more common invasive ductal carcinoma (IDC). (Sawyer, et, al, 2014)

In 2017, an estimated 252,710 new cases of invasive breast cancer will be diagnosed among women and 2,470 cases will be diagnosed in men. In addition, 63,410 cases of in situ breast carcinoma will be diagnosed among women. Approximately 40,610 women and 460 men are expected to die from breast cancer in 2017. (American Cancer Society. (2017-2018).

Breast carcinoma is the most common cancer in Pakistani females. Incidence of breast cancer in

Pakistan is about 2.5 times that in India and Iran. Pakistan has the highest breast cancer incidence rate in Asia except that in Jews in Israel. In Pakistan every year at least 90,000 women suffer from breast cancer. The frequency of breast cancer in Karachi was 69.1 per 100,000 from 1998-2002 (Bhurgri et al., 2004).

### 4 Conclusion

In this case, physician was clinically diagnosed the condition as breast cancer based on laboratory investigation, the history of patient and physical examination of breast. Conservative surgical treatment, Behavioral and dietary modifications were necessary for the treatment of breast cancer.

### 5 Reference

- 1- American Cancer Society. (2017). Breast cancer facts & figures 2017–2018.
- 2- Bhurgri, Y. (2004). Karachi cancer registry data--implications for the national cancer control program of Pakistan. *Asian Pac J Cancer Prev*, 5(1), 77-82.
- 3- Garcia, M., Jemal, A., Ward, E. M., Center, M. M., Hao, Y., Siegel, R. L., & Thun, M. J. (2008). Global Cancer Facts & Figures 2007. Atlanta, Ga.: American Cancer Society. De Sanjose S et al., Human papillomavirus genotype attri bution in invasive cervical cancer: a retrospective cross sectional worldwide study. *Lancet Oncol*, 11, 1048-56.
- 4- Minhas, R., & Umar, S. (2015). Breast Cancer among Pakistani Women. *Iranian journal of public health*, 44(4), 586-587.
- 5- Series, E. P. G. Šta je rak dojke?
- 6- Sawyer, E., Roylance, R., Petridis, C., Brook, M. N., Nowinski, S., Papouli, E., & Gorman, P. (2014). Genetic predisposition to in situ and invasive lobular carcinoma of the breast. *PLoS genetics*, 10(4), e1004285.