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Neurocysticercosis discovered incidentally during an asynchronous single brain metastasis of breast adenocarcinoma

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Background: Neurocysticercosis is anthrozoosis of the central nervous system. We report a case of an asynchronous single brain metastasis of breast adenocarcinoma.

Clinical Observation: In 2011, we received Mrs M P L, 37 years old, who had a left breast adenocarcinoma, classified as T4bN1M0, positive for hormonal receptors and HER2+++ for whom she received neoadjuvant chemotherapy and then a ptey. Histopathology concluded a residual adenocarcinoma classified TBNA of Sataloff. 50Gy radiotherapy was administered on the wall followed by tamoxifen prescribed for 5 years. The patient, considered in complete remission, was followed. Twenty months after chemotherapy, she was admitted to rebel headaches and vertigo. The examination found a patient with 80% Karnofsky index, apyretic with a separation of the levitation polygon. Cerebral MRI revealed a single 32x30 mm left temporo-occipital lesion with peri-lesional infiltration. CA15.3 was high at 159.8 IU/ml. No other metastasis has been revealed. A stereotaxic biopsy was performed and histopathology concluded a breast adenocarcinoma, CK7 positive, Her2 negative, hormonal receptors positive and discovery of a live cysticercus larva. Management consisted of corticosteroid therapy, albendazole and brain radiotherapy in toto, followed by boosting the lesion. The evolution was marked a clear clinical and radiological improvement. CA15.3 control was normal. Unfortunately, patients die one year after the brain radiotherapy.

Conclusion: The association of a neurocysticercosis with an adenocarcinoma is possible especially in tropical zone patients. Concurrent management could improve local control but survival remains short.



Recent Publications

1. A Dao, H Jabir, A Taleb, N Benchakroun, Z Bouchbika, T Nezha, H Jouhadi, S Sahraoui and A Benider (2017) Lung adenocarcinoma with thyroid metastasis: a case report. BMC Research Notes 10:130.
2. A Dao, N Benchakroun, H Jabir, A Taleb, T Nezha, H Jouhadi, S Sahraoui and A Benider (2014) Five years of local control of subscapularis aggressive fibromatosis managed by surgery and imatinib: a case report. Journal of Medical Case Reports 8:416.
3. André Tibiri, Wamtinga Richard Sawadogo, Abou Dao, Bethany G Elkington, Noufou Ouedraogo and Innocent Pierre Guissou (2015) Indigenous knowledge of medicinal plants among Dozo hunters: an ethno botanical survey in Niamberla village, Burkina Faso. Journal of Alternative and Complementary Medicine 21(5):294-303.

Biography

Abou Dao is a Radiotherapist Doctor. He is Doctor in the Faculty of Medicine at the University of Ouagadougou in Burkina Faso in 2005. He practiced in the western region of Burkina till 2010. He was trained in Radiotherapy in Casablanca in Morocco for 4 years and completed his Specialist Diploma in 2014. Currently, he is in a university hospital and interested in the management of neurological tumors, particularly brain metastases. As cysticercosis is present in Burkina Faso, he seeks to see if there is a link between brain metastases and the presence of cysticercus in the brain.

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