

**WCC 2016-116 : Case series of chronic rheumatic heart disease with carcinoma of breast:
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Background:

Anthracyclines, important part of treatment protocols in breast cancer, are responsible for cardiac toxicities, hence special consideration is necessary to minimize this severe side effect. Some forms of underlying heart disease predispose patients to increased cardiac damage, and there is evidence that the common denominator is increased left ventricular wall tension. Among frequently encountered entities that fall into this category are conditions involving gradients across the left ventricular outflow tract such as aortic stenosis, systemic hypertension, and cardiomyopathies of all types, including hypertrophic obstructive cardiomyopathy

Aim : To study the effect of Anthracycline based chemotherapy in chronic Rheumatic Heart disease patients

Materials and Methods:

This case series includes 8 known cases of Chronic Rheumatic Heart disease who were diagnosed with Carcinoma of the Breast between 2012 to 2015 at Department of Oncology, Nizam's Institute of Medical Sciences.

Results:

1. Laterality	Number	4. Her2 Neu status	Number
Right side	5	Positive	2
Left side	3	Negative	6
2. Stage of breast cancer	5	5. Adriamycin treatment	7
Early stage	3	Yes	1
Locally advanced	0	No	
Metastatic			
3. Hormone receptor status	4	6. Radiation therapy	7
Positive	4	Yes	7
Negative		No	1
		7. Recurrence	1

A total of 8 patients with diagnosis of Breast cancer with CRHD were analyzed. 6 out of 8 cases had a history of PBMV and 2 cases underwent valve replacement surgeries. All were having good LV function at the time of diagnosis of Breast cancer. None of them developed cardiotoxicity during or after completion of planned treatment.

Conclusion:

Asymptomatic Chronic Rheumatic Heart disease patients, status post PBMV and valve replacement surgeries tolerate the Anthracycline based chemotherapy without significant deterioration in their cardiac status.