

Breast cancer metastases

4% with [breast cancer](#) develop a [paraneoplastic syndrome](#).

see [Extradural spinal cord tumor](#).

[Intramedullary spinal metastases](#).

CSF [CEA](#): levels >1ng/ml are reported with a leptomeningeal spread of lung Ca (89%), breast cancer (60–67%), malignant melanoma (25–33%), and bladder Ca. May be normal even in CEA-secreting [cerebral metastases](#) if they don't communicate with the subarachnoid space. Only [carcinomatous meningitis](#) from lung or breast cancer consistently elevates CSF CEA in the majority of patients.

Breast cancer intracranial metastases

see [Breast cancer intracranial metastases](#).

Metastatic [breast cancer](#) in the bone rarely has a cystic appearance, and while it is common in the orbit, its metastasis to the orbito-temporal skull is rare. Consequently, it is difficult to diagnose it. Tao et al. reported a rare case of metastatic breast cancer with simple cyst appearance in the orbito-temporal region of the skull.

A 63-year-old woman presented with mild double vision only on right gaze that lasted for two months. Ten and half years ago, the patient underwent surgery for tumor resection of a stage III breast adenocarcinoma, followed by radiotherapy and administration of anticancer therapy. Thereafter, she continued hormonal therapy with anti-estrogen drugs, which was discontinued a half year ago because there was no recurrence during treatment. On admission, magnetic resonance imaging (MRI) showed a single and simple cystic lesion in the orbito-temporal region of the skull. The cyst was filled with fluid of different intensity, indicative of a hemorrhagic component. Additional gadolinium-contrasted MRI showed no enhancing effects in the lesion. The cyst was totally removed by surgery, and the histological examination confirmed the diagnosis of breast adenocarcinoma. Intensity-modulated radiotherapy was then administered, and the patient started follow-up hormonal therapy with anti-estrogen agents. No recurrence in the orbito-temporal region of the skull occurred during six months after the surgery.

Metastatic breast cancer should be considered in the differential diagnosis even if it appears as a simple cyst in the orbito-temporal bone after long-term remission ¹⁾.

¹⁾

Tao Y, Yagi K, Nishimura H, Hara K, Matsubara S, Uno M. Orbito-Temporal Bone Cyst of Metastatic Breast Cancer: Case Report and Literature Review. World Neurosurg. 2019 Jul 15. pii: S1878-8750(19)31982-5. doi: 10.1016/j.wneu.2019.07.076. [Epub ahead of print] PubMed PMID: 31319189.

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