Preface

To write a book about inflammatory breast cancer (IBC) is something that I have had in mind for many years…

Why now? Well, there are a very good number of reports, articles, and symposiums about this pathology; all of the publications available at present are fragmented; and there are hundreds or thousands of articles associated with locally advanced breast cancer (LABC). I have invited different experts from the Instituto Nacional de Cancerologia-Mexico to investigate and review the most recent information on IBC regarding epidemiology, histopathology, clinical diagnosis, radiology and imaging, chemotherapy, radiotherapy, molecular biology, target therapy, and follow-up.

Major advances have been achieved over the past 42 years with respect to early diagnosis and immediate treatment with primary chemotherapy followed by surgery and radiotherapy. We are the pioneers in utilizing this different method of management (1970).

In a report from the MD Anderson Cancer Centre, A.M. González-Angulo and G. Hortobagyi conducted a study to evaluate whether the survival of women with IBC treated at our institution has improved over the past 30 years. The median follow-up was 5.8 years (range, 0.3–23.8 years). The median recurrence-free survival (RFS) duration was 2.3 years, and median overall survival (OS) time was 4.2 years. The conclusion: Data show that there has not been an important change in the prognosis of patients with IBC in the last 30 years. Clinical trials focusing on the management of this aggressive disease are warranted.

The history at our Institute in Mexico is that 42 years ago, the majority of patients with IBC, following treatment with surgery and radiotherapy, were dead 1 year after diagnosis. We demonstrated then that administering primary chemotherapy followed with radiotherapy and surgery showed good results. This 6-year experience with 18 patients was presented at the American Society of Clinical Oncology (ASCO) meeting in Denver, Colorado, in 1977.

At present and in our experience, there is no doubt that this method is indicated with anthracyclines as the central drug in any chemotherapy combination. Hope is sparked by the expectations of a future in which biological (target) therapies will improve complete responses as well as prolong the survival of persons suffering from IBC.

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