

Comment on “Gastric and colon metastasis from breast cancer: case report, review of the literature, and possible underlying mechanisms”

Amin Talebi Bezmin Abadi

Department of Bacteriology, Faculty of Medical Sciences, Tarbiat Modares University, Tehran, Iran

Dear editor

I have read the interesting case report by Villa Guzmán et al recently published in Breast Cancer (Dove Med Press).¹ A female heavy smoker was diagnosed with lobular breast cancer. The authors hypothesized that *Helicobacter pylori* infection can attract chemokines attributed with local inflammation which ends in tumor cells' migration. Concerning *H. pylori* and the presented hypothesis, I have some points which are listed as follows.

Attributing the presence of *H. pylori* to the breast tumor needs attention regarding further steps and whether the new strategy would involve designing a novel treatment for this kind of patient. To my knowledge, it is not possible to draw such a conclusion as seen in this case report.

No molecular mechanism was suggested to support this hypothesis. Indeed, it will be a novel finding if *H. pylori* colonization is proven to be related to breast cancer cell migration. *H. pylori* is a causative agent of chronic infection that lasts for decades in the case of ineffective therapy.^{2,3} Any effects related with this infection should be thoroughly investigated since it is not easy to imagine such unclear association with breast cancer cells' migration.

Finally, the result of the current study by Villa Guzmán et al can be a starting point for other investigators to examine the possibility of this suggestive idea. More in vivo and ex vivo studies are absolutely required before accepting this claim.

Disclosure

The author reports no conflicts of interest in this communication.

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Correspondence: Amin Talebi Bezmin Abadi

Department of Bacteriology, Faculty of Medical Sciences, Tarbiat Modares University, P.O. Box 14115-111, Tehran, Iran
Tel +98 21 8288 4883
Fax +98 21 8288 4883
Email Amin.talebi@modares.ac.ir

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