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#### A Case of Signet Ring Cell Colon Carcinoma Initially Presenting As Acute Diverticulitis

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SCHOOL OF OSTEOPATHIC MEDICINE

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# Learning Objectives

Highlight guidelines and importance on colon car Educate on follow-up colonoscopy following dive Enlighten clinicians on signet ring cell cancer

## Introduction

- Signet ring cell cancer is a very rare and deadly malignancy
- Case profiles a unique circumstance where a pat diagnosis of signet ring cell carcinoma originally diverticulitis

# Signet Ring Cell Histology

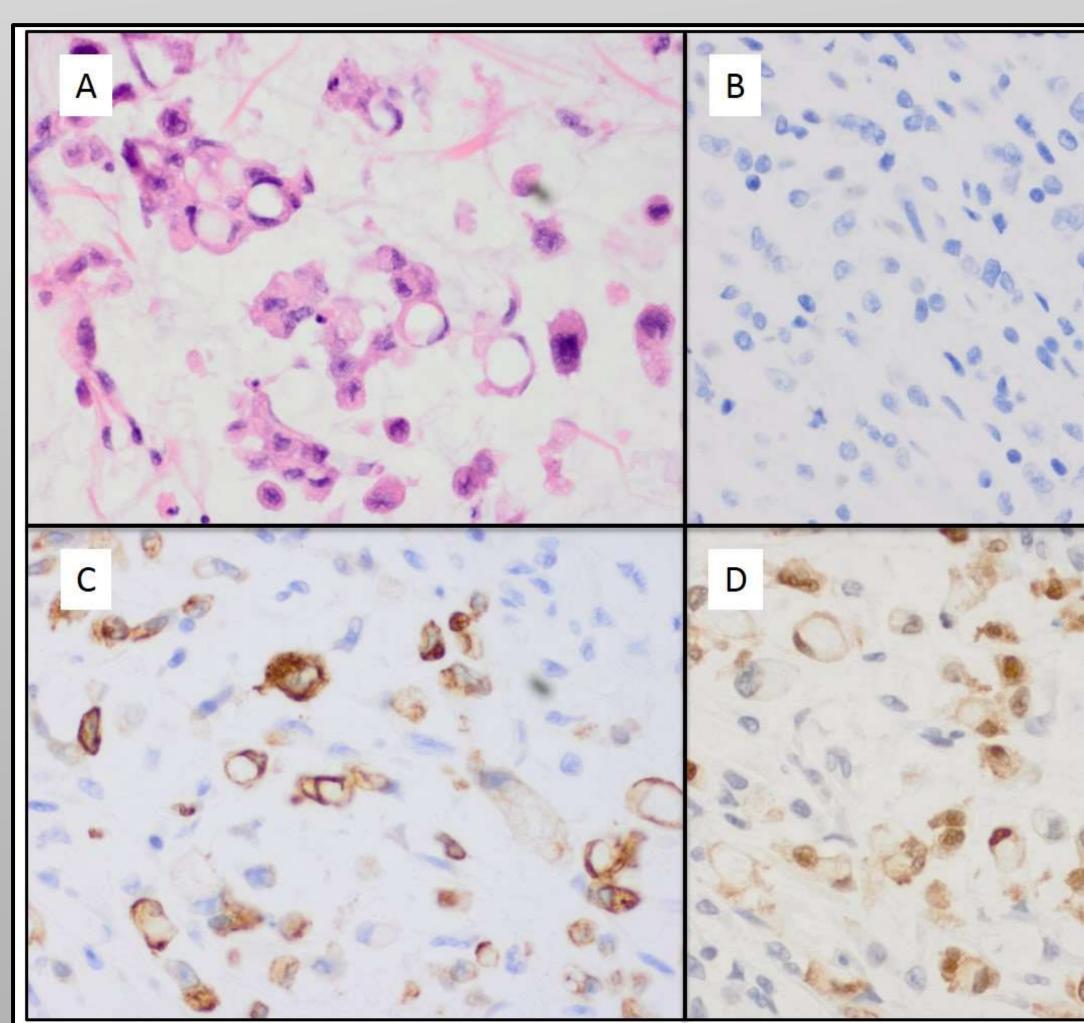


Figure 1. H&E sections (A. 40x) show numerous atypical signet cells that are negative for CK7 (B) and positive for CK20 (C) and CDX2 (D).

# A Case of Signet Ring Cell Colon Carcinoma Initially Presenting As Acute Diverticulitis

	Patien
0	HPI • 53 y.o. Caucasian fem pain
0	ROS • No fevers, diarrhea, r
$\bigcirc$	<ul> <li>PMH</li> <li>Diabetes , Hypertension</li> <li>PSH</li> </ul>
J	<ul> <li>No prior colonoscopie</li> <li>Social Hx</li> </ul>
0	<ul> <li>No recent travel or sid</li> <li>Family Hx</li> <li>No gastroenterological</li> </ul>
0	Labs • WBC- 12.6
0	<ul> <li>Imaging</li> <li>CT scan A/P- moderation</li> <li>thickening of the proximal adjacent edema and</li> <li>4.5 cm abscess inferior</li> </ul>
0	<ul> <li>Hospital course</li> <li>Placed on piperacillin</li> <li>Interventional Radiolo</li> </ul>
	<ul> <li>Post Hospital Course</li> <li>6 week follow up colo mass lesion 20-25 cm</li> <li>Sigmoidectomy with p</li> <li>Pathology - high grad signet-ring cell carcino in 11 out of the 12 su</li> </ul>

### nt Case

male with sharp LLQ abdominal

rectal bleeding, emesis, melena

ion

es or endoscopies

ick contacts

cal disorders or cancers

#### ate diverticulosis with mural kimal sigmoid colon with free pelvic fluid or to the proximal sigmoid colon

/tazobactam for diverticulitis ogy for drainage of abscess

onoscopy showing obstructing from the anal verge primary anastomosis de, poorly differentiated noma with metastatic carcinoma

urrounding lymph nodes.

Signet Ring Cell Facts

- Signet ring cell cancer present in <1% of all colon cancers
- colon was reported in 1951<sup>2</sup>
- First known incidence of signet ring cell carcinoma of the
- Signet ring cell cancer is predominately located in the stomach (99%) when found in the GI tract <sup>3</sup>
- Named for physical appearance of dominant cell type • Cells must comprise >50% of total amount of tumor cells<sup>2</sup>
- More likely to present at later stage than adenocarcinoma<sup>4</sup>
- More common in patients with IBD and history or radiation exposure<sup>2</sup>
- High frequency of BRAF mutations<sup>2</sup>
- Common presentation involves rectal bleeding, SBO, abdominal pain, hematochezia, abdominal mass, changes in bowel habits <sup>2</sup>
- Colorectal Cancer Screening Guidelines Involving Colonoscopy
  - in patient with no risk factors (ACG guidelines)
    - Begin at age 50 with repeat every 10 years
  - Begin at age 45 in African Americans
  - Guidelines for colonoscopy following diverticulitis
    - Screening should take place 6 to 8 weeks following
      - resolution of diverticulitis

Signet ring cell cancer is a very rare from of colon malignancy Case highlights the importance of patients obtaining follow-up colonoscopy following a diagnosis of diverticulitis and the continued need for routine screening colonoscopies to detect and prevent the occurrence of colon cancer.

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#### Discussion

# Conclusion

### References