


CR29 Uncovering the Connection Between Stress and Cancer: A Case Report

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KEYWORDS: Immunotherapy; lymphatic metastasis; melanoma

INTRODUCTION/OBJECTIVES: Many research studies show the connection between a previous stressful event and an increase in health problems. These usually include heart disease, diabetes, and hypertension. However, whether this could affect the immune system and be a trigger for developing carcinoma remains open for discussion.

CASE PRESENTATION: A 68-year-old male was admitted to the hospital in July 2018 due to a persistent fever without any additional symptoms. Two years ago, he was exposed to the traumatic event of his daughter dying in a car accident. A biopsy of the enlarged axillar lymph node was performed. The pathohistological finding discovered melanoma metastases. A dermatologic exam revealed one nodular tumorous growth on the right upper arm, that according to the patient had started to grow about two years ago. Excision was performed and a pathohistological work-out pointed to the metastatic lesion as well. The Positron Emission Tomography (PET CT) scan revealed lesions in lymphatic nodes of the neck, lungs, liver, and lumbar spine. Since the patient complained of pain in the lumbar spine, palliative bone radiotherapy was performed. After a multidisciplinary melanoma team meeting, immunotherapy with pembrolizumab was initiated. After 2 years of immunotherapy, complete resolution of signs and symptoms of the disease occurred and therefore the treatment was stopped, and the patient is alive now for 5 years.

CONCLUSION: In conclusion, the case report highlights the potential link between previous traumatic events and the development of health problems, including cancer. Further research is needed to fully understand the relationship between traumatic events and cancer development.


CR30 Delayed Onset Of Acute Abdomen Revealing Foreign Body Ingestion

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KEYWORDS: Acute abdomen; Fistula; Foreign body

INTRODUCTION/OBJECTIVES: Foreign body ingestion is a common issue in the daily practice of dentistry and can lead to life-threatening complications such as intestinal obstruction, perforation, fistulas, peritonitis and sepsis. In the majority of cases, the foreign object will pass through the gastrointestinal tract without any complications, 10% of cases will require endoscopic treatment and in 1% of cases surgical removal is necessary.

CASE PRESENTATION: A 57-year-old female patient presented to the emergency department with right-sided abdominal pain radiating to her back, accompanied by nausea and a fever of 38°C. The patient's medical history included appendectomy and cesarean section. During the physical examination, palpation of the right hemiabdomen was painful with a positive Murphy sign and showed no signs of peritoneal irritation. Laboratory findings revealed leukocytosis and high levels of C-reactive protein. Cholecystitis was initially suspected but ruled out by a subsequent CT scan of the abdomen which revealed a duodenocolic fistula caused by a foreign body perforating through the intestinal wall. Further investigation revealed that the patient had undergone dental impressions taking 6 weeks ago, during which ingestion may have occurred. The emergent surgical procedure was planned and included duodenocolic fistula resection, right hemicolectomy and ileotransversal anastomosis. The patient was discharged from the hospital after 5 days in good clinical condition.

CONCLUSION: This case presents a rare example of dental material impression ingestion with initial symptoms appearing 6 weeks after ingestion. This highlights the importance of high caution, follow-up after foreign body ingestion and early recognition in the emergency department to prevent fatal outcomes.