

SYNCHRONOUS GASTRIC TUMOURS: TWO DIFFERENT CASES...



CENTRO
HOSPITALAR
DE LISBOA
CENTRAL, EPE

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INTRODUCTION:

-The synchronous occurrence of more than one tumour in the stomach has been attributed to the concept of 'field carcinogenesis'.

-Estimates of the incidence of multiple primary tumours in patients with gastric cancer (GC) range from 1.7 to 8.0%

-In the literature, descriptions of synchronous tumors in the same organ, except in cases of synchronous tumors of the colon, are very rare

CASE REPORTS: CASE 1

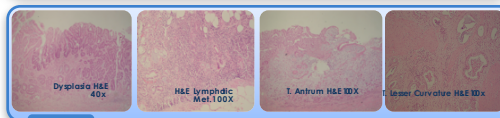
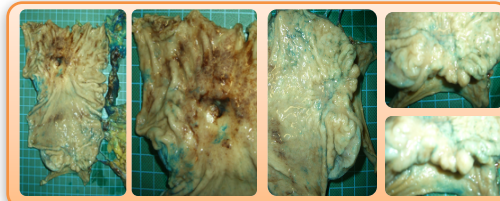
88 year old male and 78 years old female
Anemia: Referred for gastrointestinal investigation

UPPER ENDOSCOPY: irregular vegetative lesion in pylorus that extends circumferentially

BIOPSY: Tubular adenocarcinoma, intestinal (Lauren), well differentiated c-ERB2, Ki67 90%

TAP CT-SCAN: No metastatic disease

PALLIATIVE TOTAL GASTRECTOMY



GASTRIC ADENOCARCINOMAS (SYNCHRONOUS)
1. Pyloric antrum: Signet ring cell adenocarcinoma, diffuse type, poorly differentiated (G3) pT4B
2. Lesser curvature: well-differentiated tubular adenocarcinoma, intestinal type, pT4aN3a (8/12)

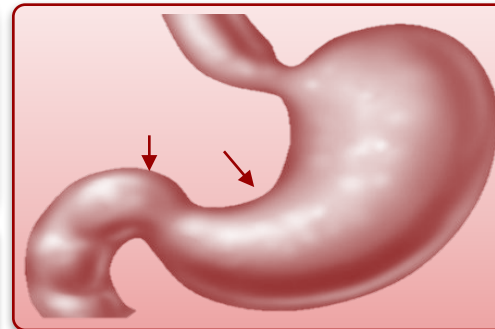
CASE 2

UPPER ENDOSCOPY: vegetative circumferential lesion

BIOPSY: Tubular Adenocarcinoma, intestinal (Lauren), well differentiated

TAP CT-SCAN: No metastatic disease

TOTAL GASTRECTOMY (D2)



GASTRIC ADENOCARCINOMAS (SYNCHRONOUS)
intestinal type (Lauren)
1. Lesser curvature: well-differentiated pT3N0 (0/15) G1 LV1Pn0
2. Pylorus: sessile lesion, intestinal type, pT1aN0

CONCLUSIONS:

-Most studies of multiple malignancies have found colorectal cancer as the second tumor in GC patients

-Other sites of second tumors in GC include: breast, lung, prostate, uterus, small intestine, liver, esophagus, and kidney

-The report of two separate synchronous adenocarcinomas in the stomach, with different histological types, is extremely rare in literature.

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