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TÍTULO: Late bone metastases from esophageal squamous cell carcinoma

INTRODUÇÃO: Esophageal cancer is the sixth leading cause of cancer death. After treatment there is a high rate of local recurrence and distant failure. The 5-year overall survival for localized disease is 20% to 25%.

MATERIAL E MÉTODOS: We present a case of a 58-year-old man with history of squamous cell carcinoma (SCC) of the gastro-esophageal junction diagnosed in July of 2004 that was treated with neoadjuvant chemotherapy with cisplatin and docetaxel and then total gastrectomy. The histology revealed a SCC basoloid ypT2N1MxR0. The follow-up showed no evidence of recurrence until the last CT in May 2015.

RESULTADOS: In October 2015 he complained of back and pelvic pain. The blood test revealed high serum levels of LDH and ALP. A lumbar and pelvic CT and a bone scintigraphy identified multiple osteoblastic bone lesions suggestive of metastatic lesions. He underwent a bone biopsy that was negative for malignant cells. The full body CT had no evidence of suspicious lesions and the tumor markers were negative (CEA, CA 19.9, PSA). He then repeated the bone biopsy and this time the histology was positive for carcinoma compatible with esophageal primitive cancer. When reviewing original pathology of the 2004 gastrectomy the cells were the same.

DISCUSSÃO: Typically the bone metastases originating from esophageal SCCs are osteolytic, and osteoblastic metastases are reported in rare cases. This is a late recurrence of esophageal cancer with 11 years of disease free survival and an atypical presentation with osteoblastic metastasis.

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