

RARELY SEEN ENTITIES WITH GOOD PROGNOSIS: GASTRIC MEDULLARY CARCINOMA AND LYMPHOEPITHELIOMA-LIKE CARCINOMA

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Findings : S.A 64 year old male patient applied with abdominal pain and weight loss 6 months ago to the outside outpatient clinic.Upper gastrointestinal endoscopy was performed and resulted as ulcerovegetan mass that surrounded the lumen of stomach.Total gastrectomy was underwent as a result of no distant metastasis detected by abdominal tomographic imaging.The immunohistochemical analysis showed positivity MLH-1,MLH-2,MLH-6,PMS-2,IMWK and negativity in chromogranin and synaptophysin.immunohistochemical analysis was diagnosed .No cytological atypical cells detected in both our center's analysis and off center samples's analysis that studied for confirmation.So that it is considered as radiation induced acid.Our patient's general condition is good and there are no any symptoms.

Discussion : Gastric medullary carcinoma involved intense lymphoid component seen mostly in male patients and sixth decades.The majority of reported cases in the literature have shown that it is a benign disorder.However, death can occur with liver and peritoneal metastases.Gastric medullary cancer rate was found 3,1% of 867 gastric carcinoma patients in a retrospective study presented by Minamoto et al .22 patients including our patient of 27 patients was diagnosed with early stage disease (6).Gastric medullary carcinoma is a rarely seen tumor in our country.Lymphoid infiltration in medullary cancer usually consists of lymphocyte and plasma cells.At the present time there is a strong molecular evidence with respect to medullary carcinoma and lymphoepithelioma-like carcinomas are different tumors so that all the gastrointestinal system tumor including lymphoid infiltration should not be considered as medullary cancer.Gastric medullary carcinoma shows microsatellite instability (3) whereas lymphoepithelioma- like carcinoma is largely positive for EBV (5).90% positivity rate was found in in situ hybridization analysis for EBV RNA.Real medullary carcinomas tend to form syncytial layer and have well-defined peripheral boundary (1,2).Lymphoepithelioma-like carcinomas included numerous intratumoral lymphocytes (4).In a study performed by Jessur et al at least 80%solid pattern,organoid or trabecular growth pattern mimicking endocrine carcinomas,small amount of eosinophilic or amfophilik cytoplasm formed by small cells and polygonal uniform cells were considered as diagnostic criteria (1). Our patient was diagnosed as gastric medullary carcinoma due to the negativity of immunohistochemical staining for EBV and all histopathological analysis.In the light of imaging techniques no metastatic region detected. In conclusion,once medullary cancer diagnosed in early stage,it is one of the rarely seen tumor with good prognosis.Recently the differentia ldiagnosis from lymphoepithelioma-like carcinoma have become a current tissue.The difference between these tumor could not still be shown with respect to prognosis and treatment.Further studies warrented about this disease.

Keywords: Gastric medullary carcinomas,good prognosis,ebv,MLH-1,MLH-2