CUTANEOUS METASTASIS OF ESOPHAGEAL CARCINOMA, A CASE REPORT

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Introduction - Purpose : Introduction: Cutaneous metastases are rare. They consist of 0.5 to 9% of metastatic tumors in total.1,2 Primary tumors that metastasize to the skin are in descending order of frequency, lung, breast, and rectal cancer. Metastases from esophageal malignancy to the skin are considered to be even rarer. Cases of cutaneous metastases in their majority from squamous cell carcinoma of the esophagus have been reported.3,–5 They mostly affect patients aged over 60 years old appearing with asymptomatic nodules.5 The skin lesions may be observed in different locations of the human body. We describe a case of cutaneous metastasis in patient diagnosed with esophageal carcinoma.

Findings : Case: In June 2016, a 61-year-old female patient was admitted to our outpatient clinic with complaints of stomach burn and swallowing difficulty. In the upper gastrointestinal endoscopy of the patient, a mass in circular style surrounding the esophagus lumen was observed. The biopsy result was compatible with squamous cell carcinoma. Chemoradiotherapy was applied to the patient who was diagnosed as locally advanced esophageal carcinoma. After chemoradiotherapy, weekly carboplatin and paclitaxel treatment was initiated in the patient who had multiple metastases in the lung. On physical examination, a 2 cm nodule was found on the skin in the left scapular region. Nodular biopsy was consistent with squamous cell carcinoma metastasis. The patient was hospitalized due to neutropenic fever after chemotherapy. The patient was unable to respond to broad spectrum antibiotic therapy and died on May 2017 due to septic shock.

Discussion : Discussion: In general, skin metastases from malignant tumors of the internal organs are rarely seen, with a frequency of between 0.7% and 9% reported in various series. The cancer types most commonly associated with cutaneous metastases are breast, lung and melanoma. Esophageal carcinoma rarely present with clinical features of skin metastasis. There is limited review in recent literature, which is primarily in form of isolated case reports; hence, it is difficult to make an estimate of its actual incidence. In a large review of 420 cases of cutaneous metastases, metastases from esophagus accounted for just three cases. Although, liver and lung are most common site for metastases from esophageal cancer, the skin accounts for less than 1% of the metastatic sites for esophageal cancer. Metastatic esophageal carcinoma has very poor prognosis with median survival of 9 months. Combination chemotherapy when compared to monochemotherapy is associated with significantly higher response rates, but nevertheless results in similar survival. In conclusion, skin lesions, especially in advanced solid tumors, should be suspicious for malignancy.

Keywords: Cutaneous Metastasis, Esophageal Carcinoma, squamous cell carcinoma