

**Title:**  
**Right-colon mucinous adenocarcinoma mimicking a hydatid cyst**

**Authors:**  
Noelia Ibáñez, Juan Ángel Fernández,  
Álvaro Jesús Gómez, Pascual Parrilla

DOI: 10.17235/reed.2017.5041/2017

Link: [PubMed \(Epub ahead of print\)](#)

Please cite this article as:  
Ibáñez Noelia, Fernández Juan Ángel,  
Gómez Álvaro Jesús, Parrilla Pascual. Right-  
colon mucinous adenocarcinoma  
mimicking a hydatid cyst. Rev Esp Enferm  
Dig 2017. doi:  
10.17235/reed.2017.5041/2017.

Enero 2017 • Volumen 109 • Número 1 • Páginas 1-86

CODE: READON ISSN: 100-0108

Revista Española de Enfermedades Digestivas  
THE SPANISH JOURNAL OF GASTROENTEROLOGY

Acceso al texto completo en: [www.reed.es](http://www.reed.es) o [www.sped.es](http://www.sped.es)

Factor de Impacto 100 (P-I): 1.455 (2016)  
SCR: 0.34 (2016)

ORGANO OFICIAL DE:  
SOCIEDAD ESPAÑOLA DE PATOLOGÍA DIGESTIVA, SOCIEDAD ESPAÑOLA  
DE ENDOSCOPIA DIGESTIVA Y ASOCIACIÓN ESPAÑOLA DE ECOGRAFÍA DIGESTIVA

SEPO

<b>Editorial</b> Colonic diverticular bleeding. Have we identified the risk factors for massive bleeding yet? J. W. Bercian Valencia	<b>Lesión de Bouveret: diagnóstico por gastroscopia</b> R. Barrio Gueza, M. N. Barrio Peña, M. del Pozo y J. E. Domínguez Muñoz	65
<b>Trabajos Originales</b> Risk factors for severity and recurrence of colonic diverticular bleeding N. Anquán, P. Cabero, A. Arduini, M. Escobar and N. Guzmán	<b>Notas Clínicas</b> Cefaléa crónica idiopática: a case report and review of the literature focusing in the presentation of rebound syndrome M. de Alarcón-Nemón, V. L. Barrio-Cabral and S. Latorre	67
Microsporidian and inflammatory bowel disease: the other diagnosis? J. Barrio, A. Rojas, S. López-Castaño, J. Castro, M. Acuña-Barca, M. Hernández-Serra, C. García, M. de la Cruz, D. Barrio and A. López-García	Herangopercistoma patológico. Una localización infrecuente de tumor intestinal I. Alonso Abad, J. M. García-González, L. Aguirre-Díaz, A. M. Quintana-Rivero y A. Colla-Morero	69
Influence of sustained blood response on the regression of fibrosis and portal hypertension in cirrhotic (MVC) patients treated with antiviral therapy A. Barrio, J. Cabero, M. J. López-Alcalá, I. López, M. T. Ariza, A. Galván, F. Castiella, E. Fabrega and J. Crespo	Hemólisis por eritropoiesis suprarrenal: un caso C. Pérez-Carpas, A. Escobedo-Sánchez, M. A. Paredes-Capó, J. Arangul-Arribas y C. García-Delgado	70
Malnutrition risk questionnaire combined with body composition measurement in malnutrition screening in inflammatory bowel disease A. A. Cortés, A. Muñoz, Z. Pri, I. Pall and P. Muñoz	Endoscopia: removal of intubated large varicose gastric: a case report M. Ochoa-García and J. Torres-Munoz	73
A survey-based analysis of endoscopic quality indicators compliance among Spanish endoscopists I. Fernández-Cruz, F. Argüelles, P. Alonso, J. Soto and S. Soriano	Masseteric schwannoma: an unusual cause of abdominal mass A. Tapia-Palao, M. R. Ramos-Vázquez, J. C. Cordero-Ramos, J. Cordero-Lafont and L. Carillo-Pérez	76
<b>Revisión</b> Endoscopic resection of colonic polyps in patients on antiplatelet therapy: an evidence-based guideline for clinicians G. Piana, M. Sostero-Salvi, C. Sestini, F. Day and M. J. Cooke	<b>Cartas al Editor</b> Neoplasia neuroendocrina intestinal, un tumor poco habitual M. de Barrio-Sanz, J. Santos-Fernández y M. N. Barrio-Rodríguez	79
<b>Indicadores en Patología Digestiva</b> Neutrofilos de la arteria mesentérica superior: una causa infrecuente de obstrucción intestinal J. Sempere-Jaguar, P. Albaladejo-Serra y J. C. García-Pérez	Presentación intestinal de tuberculosis por micobacterias poco frecuentes asociada a complex de Baurer, patología infrecuente y poco conocida Y. Pineda-Vargas, D. M. Acosta y L. A. Alvarez	80
Neumatoxina sintética intestinal A. F. Romero-Muñoz y K. Barrio-Zalga	Parotid endocrino: evidencia for an achalasia patient with multiple esophageal diverticula Y. Su, H. Zhu and D. Liu	81
Tumores de Wilms a cinco años de diagnóstico C. Ochoa-Sandoval, C. L. Hernández-Segura, J. Pineda-Rodríguez y A. N. González-Fernández	Análisis de endoscopia intestinal: evidencia infrecuente de displasia intestinal de alto grado C. Sánchez-Jiménez, L. Guevara-Pérez y J. A. Acosta-Paredes	81
Endoscopic retrieval of trichobezoars in a schizophrenic patient J. L. Barrio-Hernández, M. E. Torres-Castro and M. Torres-Rodríguez	Perforación múltiple de divertículos de intestino delgado en paciente con síndrome de Ulceras Duodenales R. Fernández-Cruz, A. Barrio-Cabero y E. Muñoz-López	83
All four glitters is not gold: A different cause for an "alkaline vomit" A. Pineda, M. Su, J. Villalón and S. Navas	Altoplexia analítica como manifestación paraneoplásica de un adenoma actínico gástrico J. Barrio-Ochoa, F. Fernández-Sánchez y J. de la Fuente-Aguado	83
	<b>Revisores 2016</b>	85

ARAN

[www.reed.es](http://www.reed.es)

*This is a PDF file of an unedited manuscript that has been accepted for publication. As a service to our customers we are providing this early version of the manuscript. The manuscript will undergo copyediting, typesetting, and review of the resulting proof before it is published in its final form. Please note that during the production process errors may be discovered which could affect the content, and all legal disclaimers that apply to the journal pertain.*

**IPD 5041 inglés**

**Right-colon mucinous adenocarcinoma mimicking a hydatid cyst**

Noelia Ibáñez, Juan Ángel Fernández, Álvaro Jesús Gómez and Pascual Parrilla

Department of General Surgery and Digestive Diseases. Hospital Universitario Virgen de la Arrixaca. El Palmar, Murcia. Spain

**Correspondence:** Noelia Ibáñez

e-mail: [Noelia.abc@hotmail.es](mailto:Noelia.abc@hotmail.es)

**INTRODUCTION**

Hydatid disease is a fecal-oral transmission zoonosis which is endemically distributed among Mediterranean countries such as Morocco. It usually presents asymptotically and a diagnosis is made due to cyst complications. It is most frequently located in the liver and lungs and forms large masses (1). The incidence of colon cancer has increased amongst population under 50 years of age during the last few decades (2). It has been proposed that young adult cases may have histological characteristics with a more aggressive clinical behavior. These patients are frequently diagnosed in advanced stages (3) and a mucinous histology is frequently detected. Diagnosis is usually delayed due to a low clinical suspicion and the attribution of symptoms to other diseases such as irritable bowel and parasitosis, among others (4).

**CASE REPORT**

We present the case of a 33-year-old Moroccan male who presented with abdominal pain. Blood tests revealed a hemoglobin level of 6.9 g/dl and an abdominal computed tomography (CT) identified a mass of 17 x 11 x 16 cm in the hepatic flexure of the colon that was suggestive of a hydatid cyst (Fig. 1). Hydatidosis serology was negative but the carcinoembryonic antigen level was 40 U/ml. Colonoscopy and biopsies confirmed the diagnosis of a stenosing signet ring cell adenocarcinoma. The patient underwent a laparotomy and a 20 cm mass that originated from hepatic flexure of the

colon was identified that was attached to the omentum, right parietal peritoneum and hepatic edge (Fig. 2). An extended right colectomy and ileocolic anastomosis were performed. The postoperative period was uneventful. The pathological analysis identified a mucinous adenocarcinoma at the hepatic flexure of the colon with an adjacent cavitating lymph node metastasis of 16 mm.

#### REFERENCES

1. Moro P, Schantz PM. Echinococcosis: A review. *Int J Infect Dis* 2009;13:125-33. DOI: 10.1016/j.ijid.2008.03.037
2. Siegel RL, Jemal A, Ward EM. Increase in incidence of colorectal cancer among young men and women in the United States. *Cancer Epidemiol Biomarkers Prev* 2009;18(6):1695-8. DOI: 10.1158/1055-9965.EPI-09-0186
3. Park PY, Goldin T, Chang J, et al. Signet-ring cell carcinoma of the colon: A case report and review of the literature. *Case Rep Oncol* 2015;8(3):466-71. DOI: 10.1159/000441772
4. Khan M, Korphaisarn K, Saif A, et al. Early-onset signet-ring cell adenocarcinoma of the colon: A case report and review of the literature. *Case Rep Oncol Med* 2017;2017:2832180. DOI: 10.1155/2017/2832180

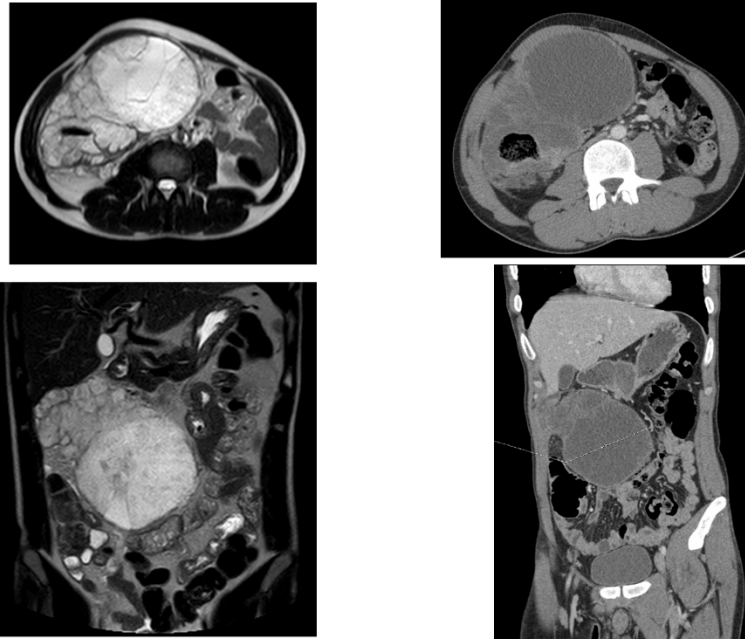


Fig. 1. CT and MRI scan imaging showing a heterogeneous multi-septate cystic mass dependent on the hepatic colon flexure.

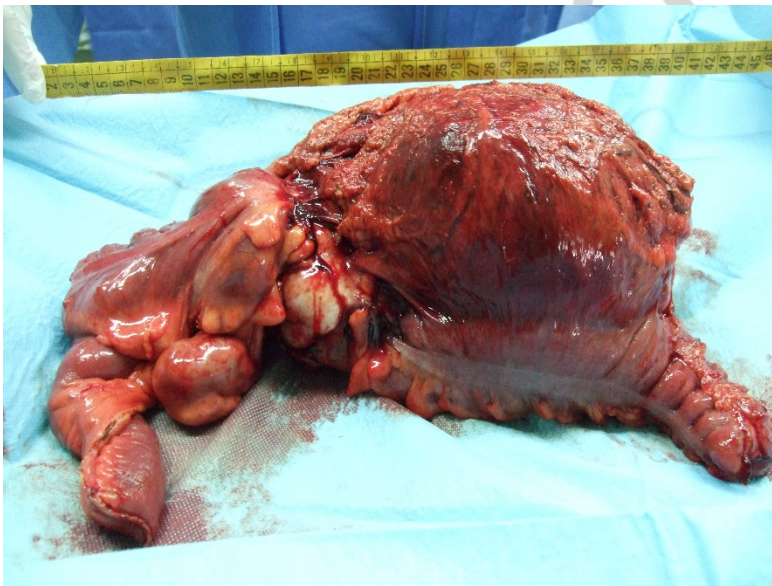


Fig. 2. Surgical specimen: a large cystic mass dependent on the hepatic flexure of the colon.