

Title:

An unexpected location for a metastasis from oesophageal squamous carcinoma

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An unexpected location for a metastasis from oesophageal squamous carcinoma

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Dear Editor,

We report the case of a 69-year-old man with a relevant alcohol consumption and history of prostate cancer performed a screening upper gastrointestinal endoscopy and colonoscopy. The upper gastrointestinal endoscopy revealed an ulcerated mass in the middle oesophagus occupying half the circumference. Histologic examination was compatible with a squamous cell carcinoma. Staging with endoscopic ultrasound and computed tomography of the neck, chest, and abdomen was consistent with a T3N1M0. The colonoscopy revealed four diminutive polyps resected with cold snare and an 8 mm sessile lesion with normal overlying mucosa and a central ulceration in the ascending colon (Fig. 1A). Histological examination revealed cells with dense cytoplasm, irregular nuclear contours, moderate pleomorphism and prominent nucleoli (Fig. 1B). Immunohistochemical stains were positive for CK5/6 (Fig. 1C). Cytomorphology and immunostaining were consistent with metastatic squamous cell

carcinoma. The patient was restaged as T3N1M1 and was evaluated for palliative chemotherapy.

Isolated colonic metastasis from oesophageal squamous carcinoma have never been reported. Additionally, standard staging examinations missed this lesion, hindering their sensitivity in detecting isolated distant metastasis. Although colonoscopy cannot be recommended as part of the workup of oesophageal cancer, in this case allowed the identification of a colonic metastasis, leading to proper a staging and treatment [1, 2].

References

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Figure

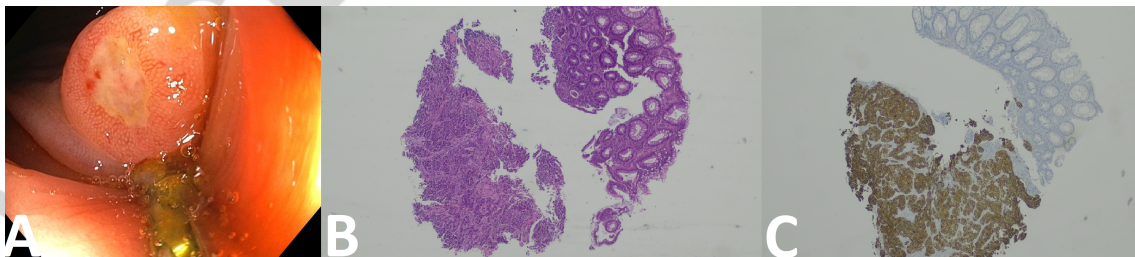


Figure legend:

Figure 1: A: Colonoscopy revealing an 8 mm sessile lesion with normal overlying mucosa and a central ulceration in the ascending colon with white light. B: Histological

examination revealed cells with dense cytoplasm, irregular nuclear contours, moderate pleomorphism and prominent nucleoli. C: Immunohistochemical stains positive for CK5/6, favouring metastatic squamous cell carcinoma.

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