

Primary bowel de-differentiated liposarcoma with concurrent kidney nodule: A case report

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Abstract

Colorectal cancer is one of the most common cancers in the western world and cause of mortality. In the UK, it is the 3rd most commonly diagnosed cancer with incidence rates highest amongst those between the ages of 85-89 and a tendency to involve the rectum. Primary colonic liposarcoma is quite rare with less than 10 cases reported so far. We are presenting a case of de-differentiated liposarcoma of the colon with a concurrent lesion in the right kidney. Our patient, a 64 year old male was referred from his GP to the colorectal clinic on a 2 week wait pathway for symptoms of rectal bleeding. His Past medical history includes hypertension, atrial fibrillation multiple cardioversions and ablation, Obstructive Sleep Apnea on home CPAP and a BMI of 36. Routine blood tests were unremarkable. With the COVID protocols, the patient's symptoms were investigated with CT rather than a flexible sigmoidoscopy which has shown a large polypoid tumour lesion in the distal ascending colon with several enlarged adjacent lymph nodes and suspicion of liver infiltration. The preoperative staging was T3/4, possible N1 due to the suspected liver involvement and M 0. Further MRI scan of the liver showed that the liver lesions were in keeping with simple hepatic cysts. The patient underwent a right hemicolectomy which was an R 0 resection. The patient had an initial histopathological diagnosis of Inflammatory Myofibroblastic Tumour however on further MDT discussions and further staining, the diagnosis was changed to de-differentiated liposarcoma. A right kidney nodule was also further identified.

Conclusion: There is no standardised protocol for treatment of primary colonic liposarcoma as only a few cases have been reported. Previous studies have treated this with complete wide excision. A surgical resection was the treatment of choice. Although primary bowel liposarcoma is rare in itself, it would be wise to consider this as one of the differentials while working up a colorectal malignancy as it may have an impact on the outcome and mode of surgery.

Keywords: Liposarcoma, Colorectal cancer, MRI scan, hemicolectomy.



Biography:

Mohammed Basamh completed his medical school degree at the University of Warmia and Mazury in Olsztyn, Poland with a final score of 4.5/5. He has received much recognition in his achievements including but not limited to a certificate of distinction in physiology. He has also gone on to study a post graduate certificate in Translational Cardiovascular Medicine and the University of Bristol, England. He is currently working as a Junior Doctor with the University Hospitals of Leicester working in the department of General Surgery at the Leicester General Hospital. He has so far published 1 publication in the British Journal of Surgery.

Speaker Publications:

1. "Management of appendicitis during the COVID pandemic: Lessons from the first month of the outbreak"; British Journal of Surgery / 2020 / Vol. 107(11): e450-e451 DOI: 10.1002/bjs.11910.

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