

A patient with metastasis of breast cancer which was originally described as primary colorectal cancer: case report

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Background:

Breast cancer metastases can be found in almost all organs in the body - but are most commonly found in the lungs, liver, bones, skin and brain. Metastatic breast cancer often occurs years or decades after initial diagnosis and treatment. In this case report, we will present a 62-year-old patient with metastasis of breast cancer which was originally described as primary colorectal cancer.

Case presentation:

In 2008, the patient was treated for hormone-sensitive HER2-negative breast cancer and was admitting letrozole as adjuvant therapy during the past 10 years. In the fall of 2018, she complained about abdominal cramps, nausea, vomiting and losing 20 kilograms. Tumor markers (ca15-3 63; ca125 107.8; CEA 20.6) and colonoscopy were performed, which raised the suspicion of tumor formation in the area of the ascending colon and terminal ileum that was then biopsy-confirmed. Concomitant PET-CT confirmed thickening of the ascending wall up to 7 cm in length with surrounding multiplied lymph nodes. Hemicolectomy on the right with an ileotransverse anastomosis was performed in December of 2018. and biopsy showed that it was grade 3 adenocarcinoma with seal ring-like cells. Postoperative tumor markers continued to be elevated (CEA 32; ca125 165; ca15-3 67.2), and control PET-CT revealed size progression and increased abdominal lymph node metabolism. A revision of the biopsy findings was made and then metastasis of breast cancer was suspected. Metastasis of the now triple-negative subtype of breast cancer has been confirmed and treatment has been started according to the protocol for metastatic disease.

Conclusion:

Despite the rare presentation of breast cancer metastasis to the colon, it must be carried in mind in patients with a history of breast cancer because it may be masked by the clinical picture of the second primary tumor.

Keywords: breast cancer, metastasis, colon