

PRESENTATION OF MALIGNANT PLEURAL MESOTHELIOMA WITH SYMPTOMATIC GASTROINTESTINAL METASTASES – A CASE REPORT

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BACKGROUND: Malignant mesothelioma is a rare tumor arising from the pleura or peritoneum. Distant hematogenous metastasis is seen in more than half of cases, preferentially to the brain, lung, bone and soft tissues. Metastasis of pleural mesothelioma to the gastrointestinal tract is an extremely rare occurrence. To date, this is the first case of symptomatic gastrointestinal tract metastases secondary to a malignant pleural mesothelioma.

CASE REPORT: A 73 year-old male patient experienced sudden onset of left chest wall pain. He was sent to the emergency department and chest x-ray showed lobulated soft tissue lesions in left pleural space. Chest computer tomography (CT) showed diffusely soft tissue attenuation of mural nodules in left pleural space. Biopsy of the said pleural nodules yielded lymphohistiocytoid mesothelioma (a variant of sarcomatoid mesothelioma). Gastroendoscopy was also done due to persistent tarry stool, and showed a protruding tumor mass with central ulceration over second portion of duodenum and multiple polypoid nodules over greater curvature side of gastric body. Histopathology result was also consistent with metastatic malignant mesothelioma. Advanced treatment was not performed due to poor performance status and family opinion. About one month later, the patient presented with acute onset of dyspnea and died of pneumonia with septic shock.

DISCUSSION: Small intestine metastases from malignant mesothelioma are rare, being more frequent in patients with melanoma, uterine, ovarian, kidney or gastrointestinal cancer, or osteosarcoma. Intestinal obstruction or bleeding is rare, or may occur only as a late presentation, of mesothelioma. Most of these are from peritoneal mesothelioma and all result in small intestine obstruction, only two reports are from pleural mesothelioma. In the presence of small bowel occlusion and intestinal bleeding of uncertain origin, clinical history taking is very important and diagnostic procedures must be performed to exclude a secondary pathology.

Keywords: Mesothelioma, Metastasis, Small intestine