

LAPAROSCOPIC ATYPICAL GASTRECTOMY FOR THE TREATMENT OF AN ISOLATED METASTASIS FROM MELANOMA – CASE REPORT

Catarina Baía¹, Paula Pinto¹, Ana Margarida Correia¹, Rita Canotilho¹, Mariana Peyroteo¹, Cátia Ribeiro¹, Matilde Ribeiro², Joaquim Abreu de Sousa¹.

¹ Instituto Português de Oncologia Francisco Gentil do Porto – Surgical Oncology Department

² Instituto Português de Oncologia Francisco Gentil do Porto – Plastic and Reconstructive Surgery Department

BACKGROUND

Melanoma metastasize preferentially to the skin, subcutaneous tissue, brain, lungs and liver. Gastric metastasis from cutaneous melanoma are very rare and there are few cases published so far. There are no set criteria for surgical intervention.

CASE REPORT

Female patient, 57 years old

2016

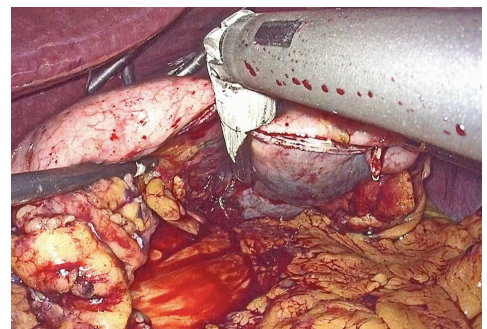
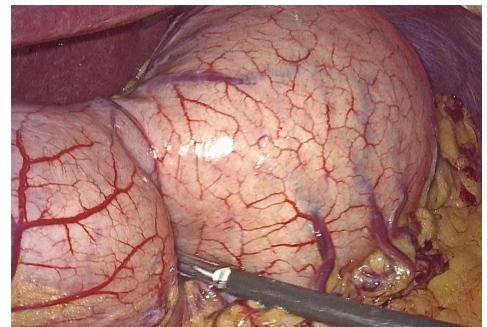
- Diagnosed with cutaneous melanoma on the 3rd finger of the left hand → Treated with finger amputation and SLNB
- Histological exam: Breslow of 5mm, 1 mitosis/mm²; the isolated lymph nodes were negative
- The patient was proposed for surveillance

11/2019

- The patient did a screening upper endoscopy, and it detected a gastric lesion
- The biopsy of this lesion was compatible with metastasis from malignant melanoma. PET-CT was positive for metastatic lesion in the proximal gastric body with no evidence of disease elsewhere.
- Multidisciplinary meeting → Surgery

07/2020

- Laparoscopic atypical gastrectomy with the support of upper endoscopy in the operating room
- The intervention and post-operative course were uneventful
- Histologic exam: a metastasis of malignant melanoma excised with negative margins.



FINAL CONSIDERATIONS

Patients with visceral melanoma metastasis usually have a very poor prognosis with a median overall survival of less than a year. Despite this, if the patient has a good performance status and a R0 resection is possible, surgical treatment could be considered.