

BRUISING AS A PRESENTING SYMPTOM OF LINITIS PLASTICA. A RARE PRESENTATION AND SPECIFIC DISEASE ENTITY

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Poster

Oesophagus

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A 37-year-old woman with spontaneous bruising was diagnosed with linitis plastica-type gastric adenocarcinoma presenting with acute disseminated intravascular coagulation, successfully managed with early initiation of 5-fluorouracil and oxaliplatin chemotherapy.

KEY POINTS

- The patient presented with thrombocytopenia, hypofibrinogenemia, and marked prolongation of PT and PTT consistent with disseminated intravascular coagulopathy.
- CT imaging revealed diffuse gastric wall thickening suspicious for linitis plastica with lymphadenopathy and omental nodules; histology confirmed poorly differentiated adenocarcinoma with signet ring cells, MMR proficient and HER-2 negative.
- Treatment with 5-fluorouracil and oxaliplatin resulted in remarkable improvement in clotting parameters, normalization of coagulation studies, and reduced blood product requirements.
- Acute DIC in the context of linitis plastica is noted in the literature as a poor prognostic indicator with most patients dying within 1-4 weeks of presentation.
- This case is relevant to oncologists and hematologists managing gastric cancer patients with acute coagulopathy complications.

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