HEMOPERITONEUM AS A DEBUT OF LIVER SARCOMA

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Primary hepatic angiosarcoma is a rare and aggressive malignancy that may present as hemoperitoneum and carries a poor prognosis with median survival under 6 months without treatment and only 3% two-year survival with chemotherapy.

KEY POINTS

- A case of a 79-year-old male welder and painter presented with hemoperitoneum from a multicentric liver tumor with active bleeding, diagnosed as primary hepatic angiosarcoma via FNA showing CD31 expression, treated with embolization and chemotherapy, and died at 10 months.
- Primary hepatic angiosarcoma represents 2% of primary liver tumors with approximately 200 cases worldwide annually, predominantly affecting males (3:1 ratio) at age 60, with 75% of cases having unknown etiology though vinyl chloride, arsenic, and thoracotrast exposure are associated.
- Diagnosis relies on anatomopathology and immunohistochemistry with vascular markers ERG (100%), CD34 (87%), and CD31 (79%), while imaging is non-specific showing hypodense CT lesions and T2-hyperintense MRI sequences.
- Around 60% of patients present with metastases at diagnosis, liver resection is the only potentially curative treatment as the tumor is radioresistant, and transplantation is not recommended due to high recurrence rates.
- This case highlights the importance of considering primary hepatic angiosarcoma in differential diagnosis of hemoperitoneum alongside trauma and vascular rupture.

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