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Summary

WHAT DUODENAL LYMPHANGIECTASIAS HIDE.... INITIAL PRESENTATION OF LUNG CANCER

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UEG Week Copenhagen 2023 | Poster

Small Intestine & Nutrition

October 15, 2023

A 68-year-old man with abdominal pain and positive faecal occult blood was diagnosed with duodenal metastasis from lung adenocarcinoma presenting as dilated lymphatics on endoscopy.

KEY POINTS

- Upper endoscopy revealed dilated lymphatics with irregular appearance in the second duodenal portion, with biopsies confirming metastatic lung adenocarcinoma (positive cytokeratin 7 and TTF1)
- CT imaging identified thoracic adenopathies and a mass in the right lower lobe compatible with lung neoplasia
- Gastrointestinal metastases from lung cancer are considered unusual, though intestinal metastases have been described in 11% of autopsy lung cancer studies
- Less than 0.5% of metastatic cases are symptomatic, and abdominal CT has low sensitivity for detecting gastrointestinal metastases
- The authors note that intestinal lymphangiectasia could infrequently be the first sign of malignancy, as no previous cases of lung cancer metastasis presenting with duodenal lymphatic ectasia were found in the literature

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