

[PICTURES IN CLINICAL MEDICINE]

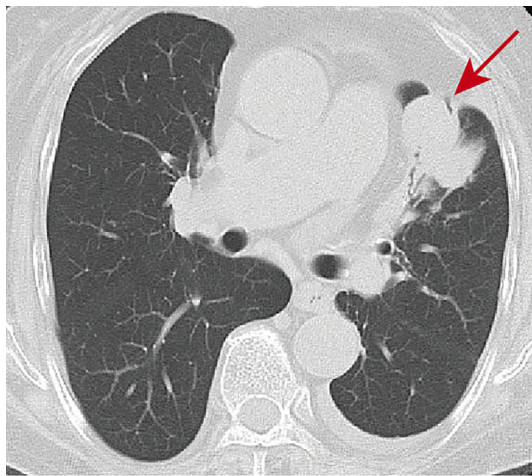
Lung Metastasis Occurring 12 Years after Colonic Cancer Surgery

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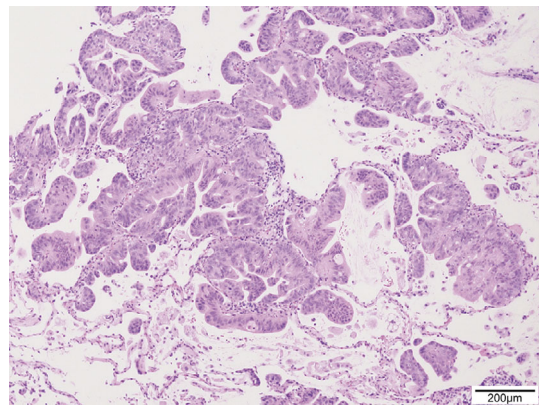
Key words: colonic cancer, late recurrence

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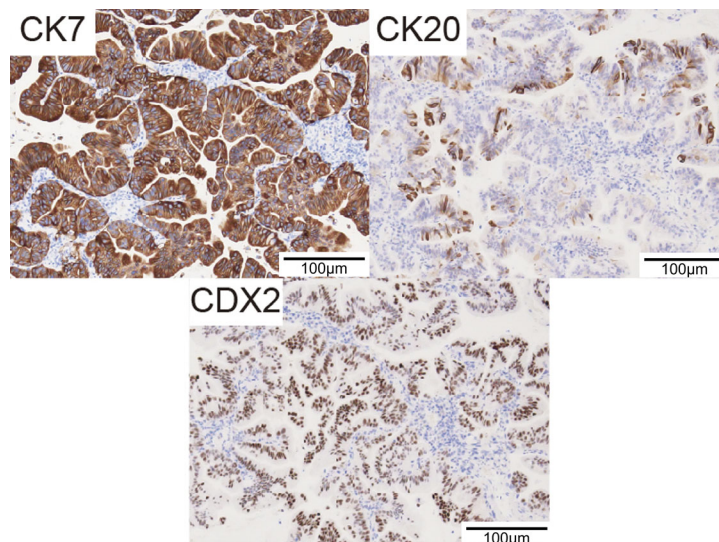
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Picture 1.

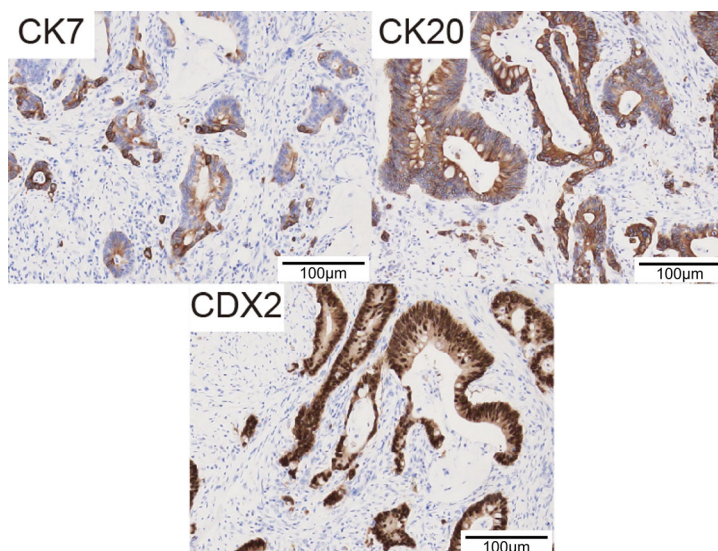


Picture 2.



Picture 3.

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Picture 4.

A 71-year-old woman underwent ascending colonic cancer surgery (Stage II, R0 resection) followed by postoperative chemotherapy. No recurrence was observed for five years after the operation. At 83 years old, she complained of dyspnea. Computed tomography showed a 44-mm tumorous lesion in the left lung with pleural effusion (Picture 1). Systemic examinations, including colonoscopy, did not reveal any neoplastic lesions other than the lung lesion. A transbronchial lung biopsy revealed adenocarcinoma (Picture 2). Immunohistochemistry for the specimens showed CK7(+)/CK20(+)/CDX2(+) (Picture 3). These findings were atypical for primary lung adenocarcinoma. Immunohistochemistry for resected colonic specimens showed CK7(+)/CK20(+)/CDX2(+) (Picture 4), which was not typical for primary colonic cancer. We diagnosed the lung tumor as metastasis of colonic cancer. In many cases, colonic cancer recurs within five years after surgery (1, 2). We herein report a case of recur-

rence of colonic cancer in the lung 12 years after R0 surgery.

The authors state that they have no Conflict of Interest (COI).

References

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