

Single-organ cutaneous metastasis of rectal signet ring cell carcinoma

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Description of clinical issue

A 30-year-old man was admitted to the general surgery clinic with a 16-month history of two lumps located on his back (*Figure 1A*). Physical examination revealed solid components and scattered rashes without ulceration or palpable lymph nodes. He reported a history of rectal mucinous adenocarcinoma (pT4N2M0) and had undergone

Hartmann's procedure 8 months prior when the left lump progressed during postoperative FOLFIRI (folinic acid + fluorouracil + irinotecan) with cetuximab adjuvant therapy. Laboratory investigation showed abnormal elevation of serum carcinoembryonic antigen (27.2 ng/mL). Computed tomography revealed two low-density masses on his back but no abnormality in the lungs, liver, or bone. Pelvis magnetic resonance imaging revealed no

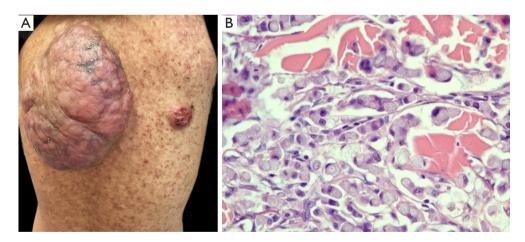


Figure 1 The macro- and microscopic pathologies of cutaneous metastasis of rectal cancer. (A) Two soft tissue lumps with acne-like rashes scattered on the back. (B) Postoperative pathology of resection specimen showing various irregularly arranged heteromorphic cells full of mucous (hematoxylin and eosin staining, ×40).

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local recurrence foci, while positron emission tomography revealed no hypermetabolic lesions. The biopsy of the left lump revealed malignant mucus-rich adenocarcinoma cells (*Figure 1B*), which indicated a diagnosis of rectal signet ring cell carcinoma metastasis. The finding of initial single-organ cutaneous metastasis supported a comprehensive physical examination for colorectal malignancy. The patient received wide local excision and skin reconstruction.

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Footnote

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Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. This study was conducted in accordance with the Declaration of Helsinki (as revised in 2013). Consent for use of images in this study was obtained from the patient.

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