

Large liver mass in a patient with latent colon cancer

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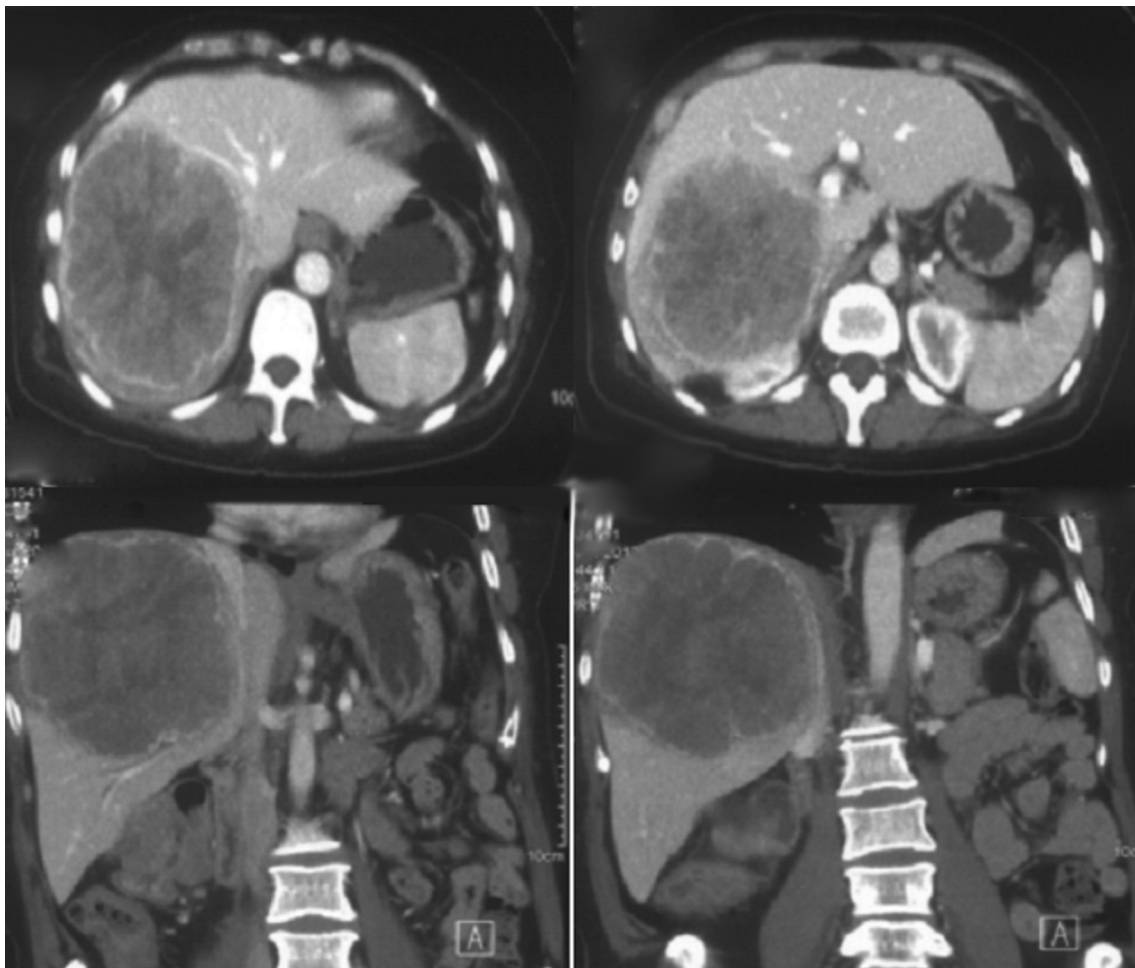
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A 55-year-old female with a 1-month history of reduced appetite and weight loss was admitted two weeks after detection of a liver lesion. She did not complain of abdominal pain, bloating, nausea, diarrhea, or fever, and denied any history of jaundice or hepatitis. Physical examination did not find jaundice or right upper quadrant abdominal tenderness. Laboratory test results showed a normal blood cell count, normal bilirubin level, and normal clotting function. A positive fecal occult blood test was noted. Other findings included: GGT, 160 U/L; ALP, 159 U/L; CEA, 208.2 ng/mL; CA242, 109 U/mL; CA19-9, 83.5 U/mL; and negative AFP, CA125, and CA724. Pre-operative computed tomography (CT) showed a large mass in the right lobe of

the liver, with irregular enhancement on contrast-enhanced ultrasonography. Surgical exploration revealed a hard, dense tumor sized 12 cm in diameter in segments VII and VIII of the liver, surrounding the right hepatic vein, with invasion of segments V and VI. A 2-cm diameter colonic mass was found at the hepatic flexure, involving the full thickness of the colonic wall. No other masses were palpable in the spleen, stomach, small intestine, omentum, or mesentery. As the tumor invaded the right hepatic vein, the right lobe of the liver was resected, and right hemicolectomy was performed at the mean time. The patient recovered uneventfully after surgery. The pathological diagnosis was adenocarcinoma of the colon with liver metastases. She had eight courses of chemotherapy following the surgery, and tumor-free survival for nine months till now.

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