

AB155. SOH22ABS187. Invasive lobular breast cancer metastases to rectum

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Background: Breast cancer is the most common malignancy in females. It accounts for approximately 32% of cancers in women. The life time risk associated with the condition is estimated to be 1:10. Breast cancer can metastasise primarily to the lungs, bone, liver, brain and lymph nodes. Metastatic breast cancer in the gastrointestinal tract is thought to be extremely rare. It occurs in approximately <1% of cases. Patients with metastatic breast cancer can present with isolated or multitude of symptoms including abdominal pain, nausea, vomiting, diarrhoea, constipation, ascites, etc.

Methods: We report a case of a 57-year-old female with a remote diagnosis of a left sided [PT3pn3 (8/12) M0] infiltrating ductal carcinoma and PT1 N0 M0 infiltrating ductal carcinoma of the right breast. She underwent right sided wide local excision and left sided mastectomy with axillary lymph node clearance. She then received an adjuvant chemo-radiotherapy and immunotherapy. Fifteen years after the initial diagnosis, the patient presented with a 1-week history of a variety of generalised vague symptoms including severe buttock and lower back pain, generalised lower limb lymphedema, generalised lower abdominal discomfort associated with increased fecal urge and loose bowel movements. Examination revealed significant induration along the anterior rectal wall.

Results: Computerised topography of the abdomen and pelvis demonstrated increased soft tissue induration the gluteal and pelvic area. Colonoscopy brawny inflammation

and thickening of the anterior rectal wall. Biopsies were taken. Histology was in keeping with metastatic carcinoma. The patient is currently receiving immunotherapy and hormonal therapy.

Conclusions: This case highlights breast cancer metastases to the gastrointestinal tract as an important differential for patients with alteration in bowel habits in the presence of a recent or a remote history of breast cancer.

Keywords: Breast cancer; rectum; lobular; metastases; case report

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Footnote

Conflicts of Interest: The authors have no conflicts of interest to declare.

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.

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