

Cutaneous metastasis in esophageal squamous cell carcinoma

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A B S T R A C T

Cutaneous metastasis from internal malignancies are common in breast cancer, pulmonary malignancies and melanomas. The primary site of metastases has been reported to the chest and abdomen. We are hereby reporting rare case of cutaneous metastasis in esophageal cancer.

Key words: Cutaneous metastasis, esophageal cancer, fine needle aspiration cytology

INTRODUCTION

The incidence of cutaneous metastasis is 5.3% among all internal malignancies. The most common tumor to metastasize to the skin is breast cancer. Cutaneous metastasis from esophageal cancer has rarely been reported.



Figure 1: Cutaneous nodule



Figure 2: Diffuse esophageal ulceration

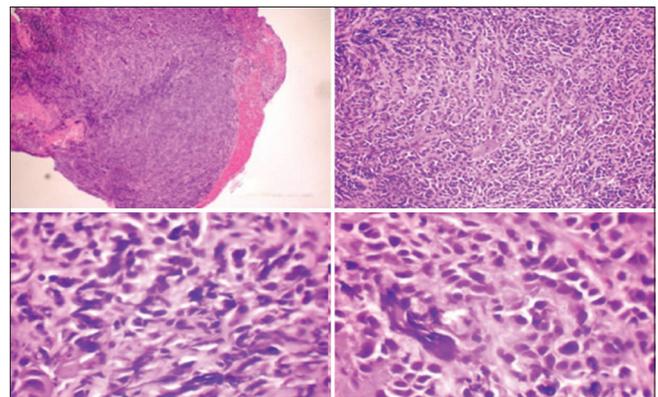


Figure 3: Histopathology s/o poorly differentiated squamous cell carcinoma

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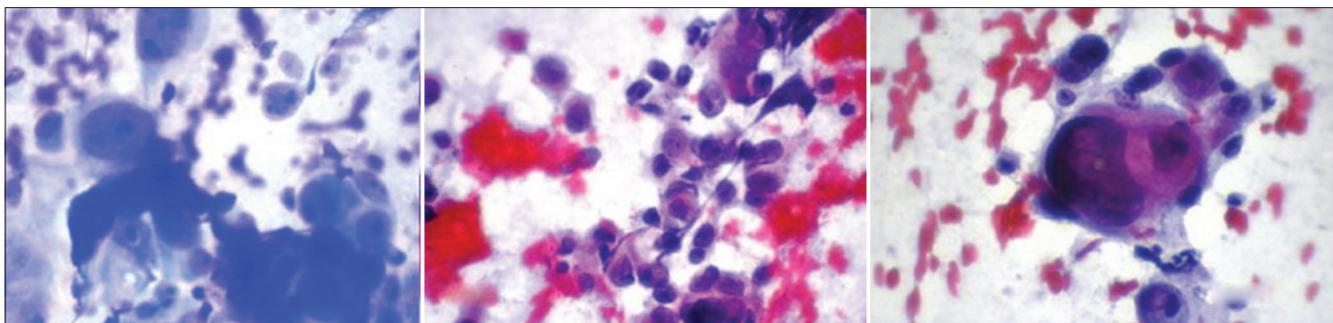


Figure 4: Fine needle aspiration cytology from cutaneous lesion

CASE REPORT

A 34-year-old male, chronic smoker, presented with weight loss of 10 kg in last 2 months and two episodes of scanty hematemesis.

A subcutaneous nodule [Figure 1] was noted in lower chest on the left side, between 11th and 12th rib, was measuring 2 × 1.5 cm, and was nontender and fixed. Liver was palpable 7 cm below the costal margin.

Esophagoduodenoscopy showed diffuse esophageal ulceration in the entire length of esophagus [Figure 2]. Biopsy from esophagus revealed poorly differentiated squamous cell carcinoma of the esophagus [Figure 3]. Fine needle aspiration cytology (FNAC) from skin lesion was suggestive of squamous cell carcinoma [Figure 4].

DISCUSSION

Cutaneous metastases from malignant tumors of internal organs account for 0.7-9% cases. They are common in breast, pulmonary malignancies, and melanomas. Cutaneous involvement occurs due to hematologic or lymphatic spread and presents as nodules or papules. Skin metastases are rare in esophageal squamous cell carcinoma. Common site of metastases has been reported to the chest and abdomen.

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