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Gastrointestinal Stromal Tumor (GIST) in Long Standing Crohn's disease on Anti-TNF Therapy

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Introduction

- Patients suffering from inflammatory bowel disease (IBD) are at increased risk for developing cancer.
- Adenocarcinomas are the most commonly observed tumors of the gastrointestinal tract, whereas data on gastrointestinal stromal tumor (GIST) in IBD patients is limited.
- This case report presents the first reported case of gastric GIST in a patient with Crohn's disease.

Case Report

- A 40-year old Caucasian man with a history of small bowel Crohn's disease on infliximab develops acute abdominal pain, hematochezia, diffuse joint pain.
- Abdominal CT scan shows a 2.5 cm exophytic mass in stomach with possible liver metastases.
- Endoscopic ultrasound guided biopsy of the mass reveals cells positive for proteins CD117 and DOG1, confirming GIST.
- Patient underwent surgical resection without complication and is back to his usual state of health.

Imaging and Pathology

Fig. 1, 2 Gastric mass on coronal and axial CT imaging

Fig. 3, 4 Endoscopic ultrasound of gastric mass and microscopic examination of GIST

Discussion

- GIST is a neoplasm that arises from the interstitial cells of Cajal in GI smooth muscle.
- Presence of CD117 and DOG1 proteins in neoplasm are highly sensitive and specific for GIST.
- Negative prognostic indicators include high mitotic index and location.
- Mortality per location: omentum/mesentery > colon/rectum > small bowel > stomach > esophagus.
- Current treatment involves a combination surgery and/or Imatinib or other tyrosine kinase inhibitors.

Conclusions

This first reported case of gastric GIST diagnosed in a patient with Crohn's disease emphasizes that while there exists a well-known association between IBD and colon cancer, other malignancies including GIST should be kept in mind when evaluating patients with IBD found to have new masses on imaging.

References

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