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**Title of the presentation: UNUSUAL PRESENTATION OF METASTASIS TO THE COLON FROM SQUAMOUS CELL CARCINOMA OF THE CERVIX, A CASE STUDY**

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## Introduction/ Review of Literature:

- Cervical cancer is the fourth most common cancer among women globally, and the second most common cancer in Indian women.
- Histologically, approximately 70% of cervical cancers are classified as squamous cell carcinoma (SCC), with human papillomavirus (HPV) infection being implicated in 90% of all cervical SCC cases.
- The primary routes of metastasis include local invasion and lymphatic spread, with the lungs and para-aortic lymph nodes being the most frequent sites of distant metastasis.
- Gastrointestinal metastasis from cervical SCC is extremely rare and may be asymptomatic or present with symptoms of intestinal obstruction or bowel perforation.

## Aims/ Objectives:

We aim to underscore the need for early detection and intervention to improve patient outcomes in such atypical metastatic presentations and to emphasize the diagnostic challenges associated with such metastasis, often presenting with non-specific symptoms leading to delayed diagnosis.

## Methodology:

### **Case presentation**

- A 43-year-old female presented with abdominal pain and discomfort for one week and constipation for 4 days.
- Past history was significant for a total abdominal hysterectomy performed one year prior.
- Postoperative pathology confirmed well-differentiated squamous cell carcinoma of the cervix, for which she received chemoradiotherapy.

## Results:

### Investigations-

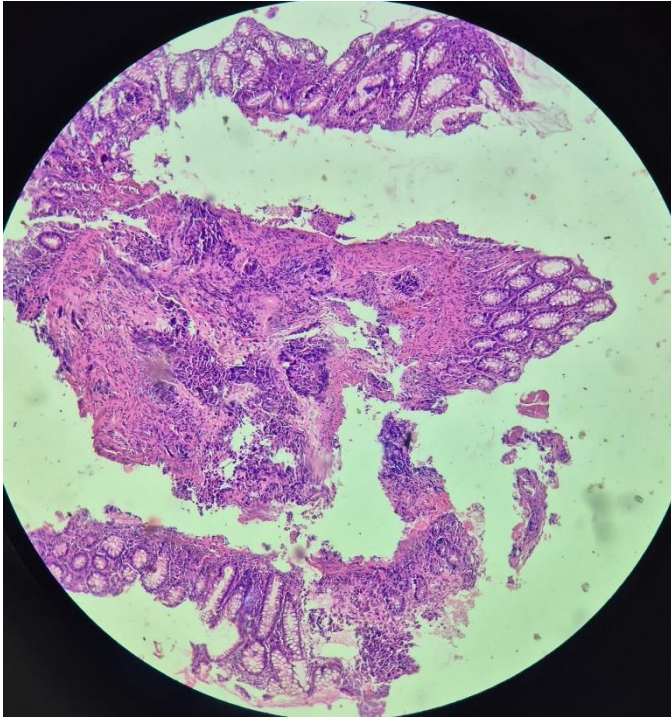
- A PET scan conducted for disease evaluation revealed eccentric mural thickening of sigmoid colon causing significant lower intestinal obstruction.
- The colonoscopy showed a large ulceroproliferative growth narrowing the sigmoid colon lumen.

### Histology Report-

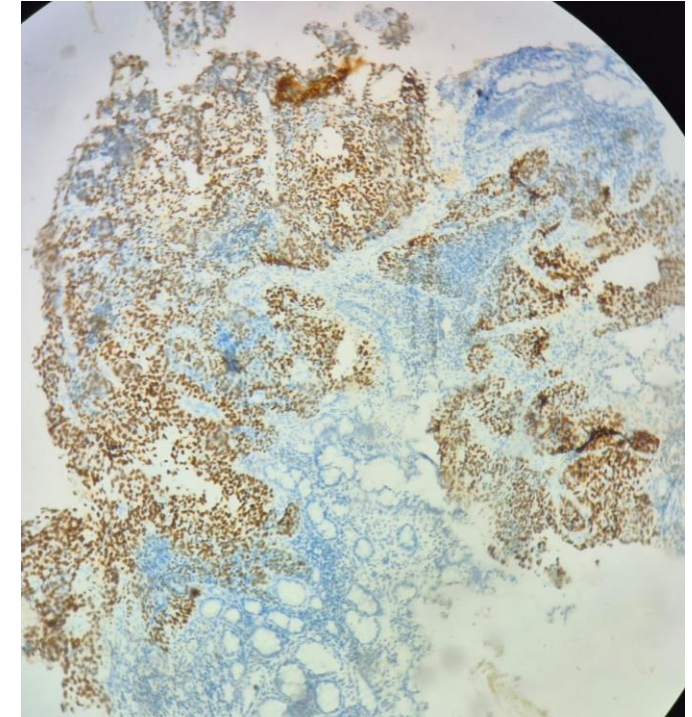
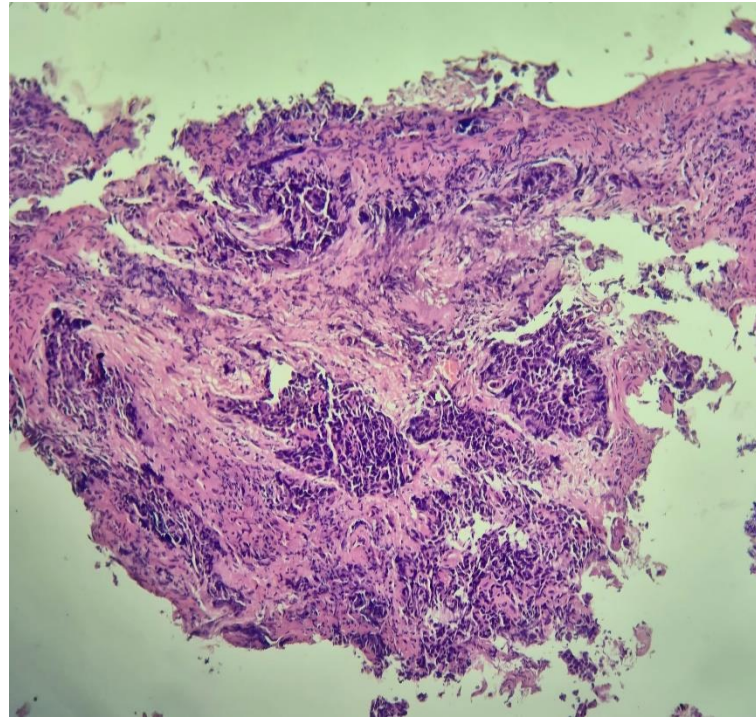
- Microscopy showed histologic features suggestive of metastatic squamous cell carcinoma cervix.
- On performing IHC, the tumor cells were positive for p40 and p63 and negative for p16, CDX2 and SATB2.



## Representative images:



Microscopic examination of the intestinal tumor demonstrating metastatic deposits of poorly differentiated carcinoma in sigmoid colon (stained with hematoxylin and eosin, 4x and 10x magnification)



In immunohistochemistry (IHC), the tumor cells demonstrated strong nuclear positivity for (A) p40 and (B) p63 on low-power magnification (4x), supporting the diagnosis of squamous cell carcinoma.

## Conclusion:

- Metastatic disease involving the sigmoid colon generally carries a poor prognosis due to its vague symptoms and typically late diagnosis.
- The treatment strategy for metastatic tumors in the colon originating from cervical SCC remains uncertain.
- Early detection and timely treatment are essential to prevent severe complications, such as intestinal perforation.

## References:

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2. Yu X, Wang Z, Zhang Z, Liu Y, Huang J. Postoperation of cervical cancer with intestine metastasis: a case report and literature review. *World journal of surgical oncology*. 2015 Dec;14:1-8.
3. Narayan R, Rana F, Jakka S, Prasad A, Mishra M. Intestinal metastasis from carcinoma cervix: An (un) common occurrence in a common cancer. A series of five cases from a single institution. *Indian Journal of Pathology and Microbiology*. 2022 Apr 1;65(2):396-400.