

CASE SCENARIO 6

CASE 1:

A 68 Yrs old man is referred by his GP with 6 week H/O Lethargy & Dyspnea on walking.
He lost 2 Kg of his weight over last 2 months.
No rectal bleeding or change of bowel habit.
His father died from Colonic Tumour.
Oesophago-Gastro-Duodenoscopy (OGD) was normal.
H.b 7.4.
R/E & Sigmoidoscopy up to 18 cm were normal.

Questions:

1) What is the most likely diagnosis?

CA Colon - Right Sided

2) What further investigations are required?

- Blood Studies:** Complete blood profile to confirm anemia / Urine dipstick
- LFT - RFT - Urea & electrolytes \Rightarrow Assessing organ function in anticipation of diagnostic & Therapeutic procedures
- Serum Carcinoembryonic antigen (CEA) Level
- A baseline CEA should be obtained as it carries prognostic value and can be used to monitor disease relapse.

Imaging:

Colonoscopy: is the preferred diagnostic invx + with biopsy

Staging Investigations:

Thoraco Abdominopelvic CT Scanning is gold standard for assessment of the presence of Metz.

3) What is the appropriate treatment?

Potentially Curative Treatment:

Suitable for technically resectable tumours with no evidence of Metz or potentially curable Metz.

- Surgical resection (with lymphadenectomy) is the only curative treatment:

- Right / Transverse. Right / extended right hemicolectomy
- Left. Left hemicolectomy.

- Adjuvant Chemotherapy (5-Fluoracil based) for tumours with positive LNs or evidence of vascular invasion.

- Hepatic or Lung resection for pts with suitable metz & clear resected / Resectable primary tumour.

Palliative Treatment:

For unresectable metz or unresectable tumours

- ↳ Chemotherapy may effectively extend life expectancy with a good quality of life.

Case 2:

69 y/o man complaining of loose motion over the last 7 weeks (3-4 times/day) not mixed with blood. He has lost 3kg of his weight. His mother had ulcerative colitis.

O/E: pt looks healthy / vitally stable

- Abdominal Ex Normal.
- PIR Ex is unremarkable.

Questions:

1) What is the D/D?

- Ulcerative Colitis
- Crohn's Disease
- CA Colon *
- Ischemic Colitis
- Colon polyp
- I.

2) What are the investigations required?

Blood:

CBC (Hgb) / Urea & electrolyte / CEA / CRP

Imaging: - Barium enema

- Sigmoidoscopy / Colonoscopy