Mucinous carcinoma of the eyelid with colonic mass: a rare partnership

Fig. 1 An ulcerated cecal mass found on colonoscopy, estimated to be 4 cm in size and occupying most of the cecum.

Mucinous carcinoma of the eyelid is a rare cancer. In medicine, rarely will the diagnosis of one cancer lead to the diagnosis of a second unrelated cancer. However, mucinous carcinoma of the eyelid has been rarely associated with colon cancer [1]. This case demonstrates a very rare occurrence of mucinous carcinoma of the eyelid leading to the diagnosis of sporadic colon cancer.

An 82-year-old man presented to his primary-care physician and was found to have a slow-growing lesion on his right upper eyelid. Subsequently, he was evaluated by a dermatologist and underwent Mohs surgery. The pathology of the lesion returned a diagnosis of mucinous carcinoma. At that time, given that mucinous carcinoma is most often a secondary carcinoma, a primary cancer was suspected. The patient underwent esophagogastroduodenoscopy (EGD) and colonoscopy. His EGD showed only mild gastric atrophy. His colonoscopy revealed a 4 cm ulcerated cecal mass occupying most of the cecum (Fig. 1). Pathological analysis of the mass demonstrated a moderately differentiated adenocarcinoma (Fig. 2). Subsequently, the patient underwent a right hemicolectomy. Surgical specimens confirmed a moderately differentiated adenocarcinoma with perineural invasion but negative lymph nodes (0/18). After 6 months, the patient is doing well with no recurrence or evidence of distal metastases from either tumor.

Cutaneous mucinous carcinoma is most commonly a secondary lesion rather than a primary carcinoma [2, 3]. In the case of our patient, the finding of the mucinous carcinoma of the eyelid led to the discovery of a separate and distinct sporadic colonic adenocarcinoma. The occurrence of two separate primary carcinomas, one of them histologically a cutaneous mucinous carcinoma, is incredibly rare. Because this association was known, our patient was treated promptly and now shows no evidence of metastasis of either primary tumor.

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Alisha M. Hinds¹, Dina Ahmad¹, Kristi T. Lopez¹, Jason S. L. Holly², Michelle L. Matteson-Kome¹, Matthew L. Bechtold¹

¹ Department of Internal Medicine – Gastroenterology, University of Missouri School of Medicine, Columbia, Missouri, USA
² Department of Anatomical Pathology, University of Missouri School of Medicine, Columbia, Missouri, USA

Fig. 2 Colonic mucosa with an invasive adenocarcinoma comprised of malignant cells occurring in singleton and in incomplete glands with surrounding desmoplastic response. H&E stain, magnification 4 × (a), 20 × (b).
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Corresponding author
Matthew L. Bechtold, MD, FACP
Division of Gastroenterology
Five Hospital Drive, CE405
Columbia, MO 65212
United States of America
Fax: +1-573-884-4595
bechtoldm@health.missouri.edu