

Session/Poster#

Presenter

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Spindle Cell Carcinoma: An Exceedingly Rare Liver Biopsy Proven Case

Spindle Cell Carcinoma: An Exceedingly Rare Liver Biopsy Proven Case. Spindle cell neoplasms also known as sarcomatoid carcinoma, are typically biphasic tumors, composed of conventional squamous cell carcinoma and malignant spindle cells. Due to its rarity and lack of diagnostic schema in the literature, it is often an overlooked, and missed diagnosis. Here we highlight a case of a 57-year-old female with known history of liver lesions, who presented to the ED with a 1-2 week history of abdominal pain and distension, localized to the right lower quadrant, associated with generalized itching, but no identifiable rash. Vitals on presentation were largely unremarkable. Physical examination was remarkable for scleral icterus, excoriations on the abdomen, markedly distended, non-tender abdomen with a positive fluid wave and shifting dullness. Labs were remarkable for elevated white count, electrolyte abnormalities, hepatic dysfunction with an elevated alkaline phosphatase and hyperbilirubinemia. After further imaging there was suspicion for metastatic disease, CT liver triple phase revealed multiple hepatic masses with heterogeneous enhancement, enlarged surround lymph nodes. Pathology report of the liver biopsy revealed neoplastic spindle cell proliferation involving liver parenchyma and extensive necrosis. Spindle cell tumor arising from the liver is exceedingly rare and the proportion of hepatocellular carcinoma (HCC) with spindle cells is estimated to be 1.8% of all resected HCCs. Although the WHO has officially classified spindle cell tumors as soft tissue neoplasms, there is no subclassification of spindle cell tumors among liver tumors. Next would be to complete a generalized investigation using the Surveillance, Epidemiology, and End Results (SEER) database within the last 20 years. This may help further evaluate trends, demographics, and basic clinical and pathologic features of this disease.