Case Report

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Cutaneous Spread of Gastric Adenocarcinoma: A Case Report

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ABSTRACT

Cutaneous metastases from gastric adenocarcinoma are a rare manifestation of advanced disease. We present the case of a [patient's age]-year-old [male/female] with gastric adenocarcinoma and cutaneous metastases. Imaging, particularly contrast-enhanced CT, revealed the primary gastric tumor with associated cutaneous nodules. The scan showed irregular thickening of the gastric wall and metastatic skin lesions, which were crucial in confirming the diagnosis. This case emphasizes the role of CT imaging in detecting unusual metastatic sites in gastric adenocarcinoma, helping to guide clinical management.

Keywords

Gastric adenocarcinoma, Cutaneous metastases, Contrast-enhanced CT, Imaging.

Introduction

Cutaneous metastases from gastric adenocarcinoma are exceedingly rare and generally indicate advanced disease [1]. These metastases often present as firm, painless nodules that can mimic benign skin conditions [2]. Contrast-enhanced CT imaging plays a pivotal role in detecting the primary gastric tumor as well as assessing the extent of metastatic spread, including cutaneous involvement [3]. Early identification of these lesions is crucial for accurate staging and may significantly impact clinical management and therapeutic decision-making [4].

Case Report

A 60-year-old female with a known diagnosis of gastric adenocarcinoma, currently under chemotherapy, presented for routine evaluation. The patient had been experiencing mild abdominal discomfort and unintentional weight loss over the past few months, despite ongoing treatment.

Contrast-enhanced CT imaging revealed an irregular thickening of the gastric wall involving both the lesser and greater curvatures. This thickening showed circumferential enhancement after contrast injection, raising concerns for an aggressive tumor pattern. In addition to the primary gastric findings, multiple regional lymphadenopathies were identified, suggestive of nodal involvement.

The CT scan also demonstrated several hypodense hepatic lesions with contrast enhancement, consistent with metastatic spread to the liver. Notably, diffuse subcutaneous lesions were observed throughout the trunk and extremities. These lesions appeared as well-circumscribed, nodular formations that were hypodense but enhanced following contrast administration, with some lesions exhibiting central necrosis—findings that were highly suggestive of diffuse cutaneous metastases.

The integration of these imaging findings with the patient's clinical history underlines the advanced stage of her disease, with both hepatic and cutaneous metastatic involvement. The multidisciplinary team is currently evaluating further treatment options, balancing systemic chemotherapy with palliative care strategies to optimize quality of life.

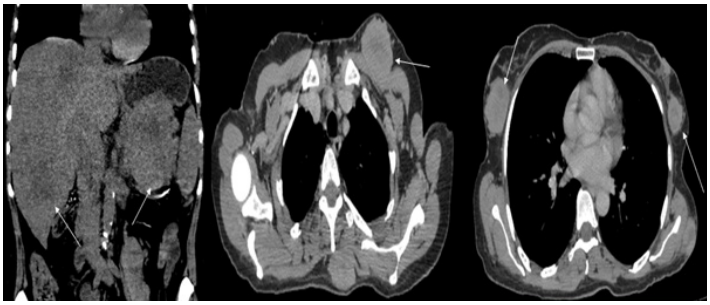

Figure 1: Axial and sagittal contrast-enhanced CT images demonstrate an irregularly thickened gastric wall with associated hypodense hepatic lesions. Multiple well-circumscribed subcutaneous nodules with peripheral enhancement are observed. Some nodules exhibit central necrosis, confirming cutaneous metastases from advanced gastric adenocarcinoma.

Discussion

Cutaneous metastases from gastric adenocarcinoma are exceptionally rare and typically indicate an advanced stage of disease with a poor prognosis [5]. In our patient, contrast-enhanced CT revealed diffuse subcutaneous nodular lesions that were well-circumscribed, hypodense, and demonstrated peripheral enhancement—with some lesions exhibiting central necrosis—findings consistent with the imaging characteristics of cutaneous metastases [6]. Although cutaneous spread is more frequently seen in malignancies such as breast, lung, and melanoma, its occurrence in gastric adenocarcinoma highlights the aggressive nature of the primary tumor and its capacity for systemic dissemination [7]. CT imaging plays a pivotal role by not only confirming the primary gastric lesion but also by delineating atypical metastatic sites, thereby aiding in precise staging and management decisions [8]. The presence of these metastases further necessitates a multidisciplinary treatment approach, combining systemic therapy with palliative measures aimed at symptom control and quality of life improvement [9]. Future research is needed to better understand the molecular mechanisms underlying cutaneous dissemination and to explore targeted therapeutic strategies for this rare manifestation [10].

Conclusion

Cutaneous metastases from gastric adenocarcinoma are rare and typically occur in advanced stages, often indicating a poor prognosis. Their presence highlights the aggressive nature of the disease and underscores the importance of comprehensive imaging techniques, such as contrast-enhanced CT, in detecting both primary tumors and metastatic spread.

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