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*Case Report*

# Extraintestinal Gastro-Intestinal Stromal Tumor (E-GIST) - A Case Report

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## ABSTRACT

A 72 years old male presented with abdominal lump. Fine needle aspiration cytology revealed spindle cell tumor. Histopathology examination showed diagnosis of E – GIST, which is a rare tumor.

**Key Words:** Stromal tumors, Extra – intestinal GIST, Transverse mesocolon

## INTRODUCTION

Gastrointestinal stromal tumors are rare and account for 0.1% to 3% of all gastrointestinal neoplasms. [1] Extraintestinal stromal tumors by definition arise from outside GI tract but histologically resemble their counterparts.

Although stromal tumors in the gastrointestinal tract commonly metastasize to omentum and mesentery, they may also occur outside GI tract especially in omentum and mesentery. [2] A case of 72 years old man who had extraintestinal stromal tumor of transverse mesocolon is reported.

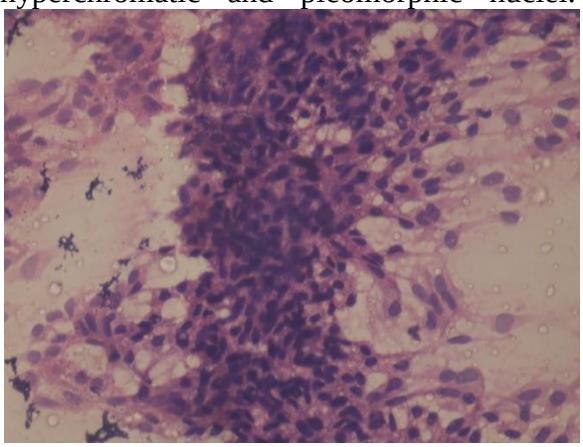
## CASE REPORT

A 72 years old male patient admitted with complaints of abdominal lump since 2 years with a history of constipation and malena. Patient complained of gradual onset of generalized abdominal pain, which was continuous, severe in intensity, not relieved by analgesics. Patient also experienced malena and constipation. On examination, a lump was palpated in epigastric region, extending upto the left hypochondrium, freely mobile, non-tender.

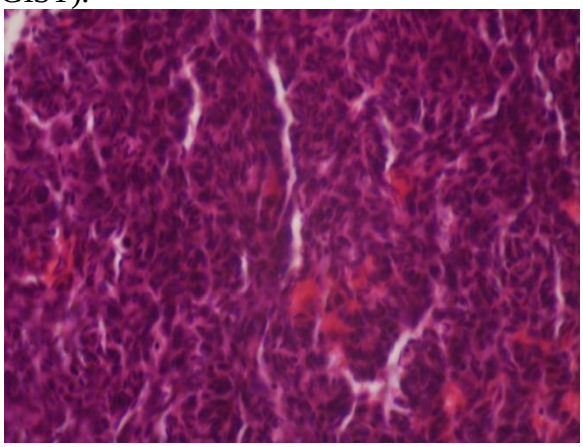
Ultrasonography showed large bowel mass, suggestive of colonic carcinoma. CT abdomen revealed nodal mass involving small bowel loops.

Fine needle aspiration of the lump was done under CT guidance, which showed cellular smears displaying three-dimensional clusters of spindle cells. The cells possess mildly

hyperchromatic and pleomorphic nuclei.



The histology confirmed it to be extra – intestinal gastro intestinal stromal tumor (E-GIST).



Immunohistochemistry showed Vimentin, CD 117, and S 100 positivity.

## DISCUSSION

Gastro - intestinal stromal tumors (GISTs) are defined as spindle cell, epitheloid or occasionally pleomorphic, mesenchymal tumors of gastrointestinal tract, which express the KIT protein, detected in immunohistochemistry. [3] GISTs are commonly found in stomach, followed by small intestine, colon, rectum and oesophagus. [4, 5] However tumors arising outside the bowel wall constitute upto 10%of cases. [6] The majority arises from the soft tissue of abdominal cavity while the remainder arose from the retroperitoneum. Sites of extraintestinal GISTs include the peritoneum, gall bladder and liver. [2, 7, 8] Extra intestinal GIST expresses CD 117 (c – kit receptor) (100%). CD 34 (50%), nonspecific enolase (44%) and smooth muscle actin (26%). [9]

Previously the only proven treatment was surgical resection. However, specific therapy targeting the kit receptor with Imatinib has resulted in improved outcome for patients with unresectable metastatic and recurrent disease. [10]

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