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Case Report

Aggressive Gastrointestinal Stromal Tumor Associated with Pituitary Acromegaly

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Abstract.

In this case report, we report a 52-year-old man presented with repeated hematochezia separated by a 7-month interval. Computed tomography (CT) showed a 4.7-cm mildly enhanced tumor at the distal ileum suggestive of gastrointestinal stromal tumor (GIST). Diagnosis of GIST was confirmed from typical histological and immunohistochemical staining after laparotomy segmental resection of the tumor at the distal ileum. Endocrinology clinic referral for a previous incidentally found pituitary tumor pointed to pituitary acromegaly owing to acromegalic appearance which was appreciated biochemically by elevated random growth hormone (GH), glucose tolerance test (GTT), elevated insulin-like growth factor-1 (IGF-1) and histopathologically after transsphenoidal adenomectomy. Suprisingly, just two months after the laparotomy surgery, a 2.2-cm hypoechoic liver nodule with increased uptake by positron emission tomography (PET) was detected which was not evident in the latest image studies. This is an unusual case with intense aggressive and malignant behavior of the GIST that could be stimulated by high IGF-1 concentrations associated with acromegaly through the activation of MAPK and PI3K bypassing KIT tyrosine kinase which underlies GIST.

Keywords **:** acromegaly, gastrointestinal stromal tumor, insulin-like growth factor

病例報告

肢端肥大症合併高度惡性表現的胃腸道基質瘤

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中文摘要

此篇病例報告中，我們報告一位在接受內視鏡檢查治療後 7 個月再次復發解血便的 52 歲男性病患。腹部電腦斷層攝影檢查發現於迴腸末端疑似胃腸道基質瘤的 4.7 公分腫瘤。經開腹手術切除後病理切片及免疫染色證實為胃腸道基質瘤。後因之前健檢意外發現的腦下垂體腫瘤而轉介至內分泌科門診，在此之前因無症狀病患未曾接受進一步檢查，病人的外觀呈現疑似肢端肥大症的臉部特徵且血清中生長激素，第一型