

# Primary Liposarcoma of the Stomach: A Case Report and Literature Review

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**Primary liposarcoma of the stomach is a rare disease and only 13 cases have been reported in the literature. We herein report a case of primary gastric liposarcoma presenting as epigastralgia and tarry stool in a 71-year-old woman. Endoscopic examination revealed a protruding mass with surface ulceration at the gastric antrum. The patient received subtotal gastrectomy with gastrojejunostomy. Pathological examination showed the features of a well-differentiated liposarcoma. The postoperative course was uneventful for 5 months. Previous literature is reviewed in this article.**

**Key words: gastric tumor, liposarcoma**

Liposarcoma is a common soft tissue malignancy, representing about 15-20% of all sarcomas. The tumor frequently occurs on limbs, retroperitoneum, and trunk. It is classified as pleomorphic, myxoid, round cell, and well differentiated in histology. However, the gastrointestinal tract, especially the stomach, is a rare site for liposarcoma, and to our knowledge, there are only 13 reported cases of gastric liposarcoma reported in the literature<sup>1-13</sup>. Here we present an additional case and review previous reports about this rare condition.

## Case Report

In September 2000, a 71-year-old female presented with tarry stools off and on for 2 weeks and mild epigastralgia for 2 days. Neither body weight loss nor appetite change was noted. Physical examination was unremarkable. Hematological and biochemical tests were within normal limits. Abdominal plain film did not show specific findings. However, gastric endoscopy showed a sessile protruding mass with multiple shallow ulcers scattered over surface of the mass, which was located at the posterior wall of antrum. A biopsy specimen taken

from this mass showed chronic gastritis, and Ranitidine was given for one month. The follow-up gastroscopy showed a protruding mass in the same position with surface ulceration, and upper gastrointestinal barium examination revealed a huge mass in the antrum of the stomach. The mucosal surface was relatively smooth with focal accumulation of barium, indicating the presence of surface ulceration. Therefore, subtotal gastrectomy with gastrojejunostomy was performed. Neither ascites nor lymph node enlargement was found during the operation, and the postoperative course was uneventful.

## Pathological Findings

Gross pathologic examination showed an 11×6×5 cm tumor located in the submucosal layer of the antrum's posterior wall (Fig 1). The tumor was elastic in consistency, and the cut surface was yellowish and homogeneous, without hemorrhage, necrosis, or cystic formation. Microscopically, the tumor was not encapsulated (Fig 2), but it was covered with ulcerated mucosa that had invaded the muscularis propria. The tumor was mainly composed of well-differentiated

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Received for publication: March 16, 2001

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