

# Gastrointestinal Stromal tumors in Patients with Von Recklinghausen with Iron Deficiency Anemia

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## Abstract

**Background:** Gastrointestinal stromal tumors are uncommon, with those arising within the duct gland even a lot of thus. Because Gastrointestinal stroma tumors involving the duct gland could gift nonspecifically as associate degree higher gastrointes- tinal bleed, it's necessary to adequately workout the patient to rule out malignancy to optimize the result for the patient. whereas surgery with complete surgery of the neoplasm is that the treatment of alternative, it's necessary to contemplate the role of neoplasm markers in targeted medical care for a nonresectable illness or nonsurgical patients.

**Case presentation:** We have a tendency to describe a 53-year previous man with a history of neurofibromas and irritable viscus syndrome WHO bestowed with abdominal pain and chronic iron deficiency anemia. He was found to own associate degree extragastrointestinal stromal neoplasm of the duct gland, that stained positive for CD117 and DOG1. The treatment arrange for this patient is targeted medical care with Imatinib, a aminoalkanoic acid enzyme matter effective within the treatment of CD117+ cancer cells, followed by doable surgical surgery.

**Conclusions:** The exocrine gland extragastrointestinal stromal neoplasm could be a rare malignancy which will gift with acute, nonspecific findings of a channel

bleed together with anemia, fatigue, and melanotic viscus movements. With adequate history and physical examination, we will fitly workout a patient with this rare illness associate degree develop an acceptable treatment arrange for the patient.

**Keywords:** exocrine gland extragastrointestinal stromal tumor; neurofibromas; anemia, melena; CD117; Imatinib

## Background

Gastrointestinal stromal tumors (GISTs) tend to occur as primary mesenchymal tumors within the digestive tube (GIT). In down order of frequency, occurrences within the abdomen, tiny intestine, massive intestine, and passage form up over eighty fifth of GISTs [1]. Extragastrointestinal stromal tumors (eGISTs) form up 5-10% of GISTs, with the sickness of the exocrine gland ac- reckoning for five of those cases [2]. Immunohistochemical stain- ing is helpful for diagnosing, as quality for CD117 confirms the diagnosing of GIST [1]. CD117 is additionally referred to as c-kit, that may be a receptor aminoalkanoic acid enzyme. enhanced expression of this macromolecule results in upregulated cell proliferation, which ends up within the tu- morigenesis of GISTs. alternative growth markers embody embody, CD34, SMA, desmin, and DOG1 [3,4]. GISTs have conjointly been notable to occur in patients with a history of monogenic disorder I (NF1). monogenic disorder I is because of a defect within the NF1 cistron that encodes neurofibromin one, a regulator of RAS proteins [5]. RAS proteins square measure key regulators in signal cascades of cellular processes [6]. Treatment for GISTs is surgical operation, with the utilization of targeted antineoplastic agents for nonresectable sickness or nonsurgical candidates.

## Case Presentation

A 53-year previous man with a history of neurofibromas diagnosed by the presence of skin lesions however

never genetically confirmed to own NF1 bestowed with diffuse periumbilical pain and a one-day history of multiple bouts of melanic loose stools. He had been hospitalized one month previous with low hemoprotein (5.6g/dL, reference vary thirteen.8-17.2g/dL) and iron deficiency anemia on laboratory findings. In addition, he was found to own a mass activity a pair of 3 x 1.5cm at the pancreaticoduodenal groove on a CT scan of the abdomen. He was discharged and within the method of being emotional as patient with examination ultrasound (EUS) and diagnostic assay of small intestine and exocrine gland abnormalities one week before come back to the hospital with abdominal pain and dark stools. The likelihood of dark stools occurring secondary to treatment of patient's iron deficiency anemia with iron supplements was thought-about on the medical diagnosis. Associated symptoms enclosed occasional giddiness and palpitations. Throughout this admission, the patient was found to own iron deficiency anemia once more with a hemoprotein of eight.3, hematocrit twenty six, protein fifty seven, iron 32, TIBC 299, and a pair of saturation of eleven. Patient's laboratory conjointly showed delicate leucocytosis to eleven.1. The patient received one unit of packed red blood cells (PRBCs). The subsequent day, the patient's anemia had not improved, with hemoprotein falling additional to seven.2. The sec-

were created to get diagnostic assay results from his recent patient EUS physical exertion. A fine-needle aspiration (FNA) diagnostic assay of the pancreatic mass was in line with a epithelial duct tumor; cytopathology report showed spindle cells with fibrillar protoplasm during a background of rare stromal parts and blood and immunohistochemistry of the diagnostic assay tested positive for CD117 and DOG1. The patient was diagnosed with exocrine gland eGIST. He underwent additional workup to rule out the extra sickness with endoscopy. The endoscopy showed pathology and atiny low polyp, that was resected. Before surgical operation of the exocrine gland eGIST, the patient can additional bear a capsule examination to rule out the likelihood of extra sickness within the higher digestive tube. The treatment arrange was to proceed with targeted medical care with Imatinib for the CD117+ exocrine gland eGIST.

## Discussion and Conclusions

This case illustrates the attention-grabbing constellation of findings during a patient with a rare exocrine gland eGIST and history of neurofibromas. The findings could mimic symptoms of associate upper epithelial duct bleed (UGI) like persistent anemia, obscure abdominal pain, fatigue, and dark stools. Physical exertion of a exocrine gland mass on imaging {in a|during a|in associate exceedingly|in a very} patient presenting with symptoms of a UGI bleed ought to embody the likelihood of an eGIST. Definitive diagnosis may be obtained with EUS and FNA diagnostic assay of the suspicious mass. The treatment of selection for epithelial duct stromal tumors is surgery with complete surgical operation of GIST with the goal of getting negative microscopic margins. Targeted antineoplastic agents is also accustomed shrink the growth for larger simple operation. Imatinib (Gleevec) is associate matter of receptor aminoalkanoic acid enzyme, that makes it effective in treating GIST tumors caused by activating mutations of the c-kit cistron.

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