

Complete Remission after Chemotherapy for Colon Cancer with Multiple Metastasis

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55세 남자 환자가 1일 전부터 발생한 하복부 통증을 주소로 내원하였다. 활력징후는 안정되었으면 이학적 검사에서 통증 외에 다른 특이 사항은 없었다. 환자 특별한 과거력이나 가족력은 없었으며, 20 갑년의 흡연자였다. 검사실 소견에서 CEA 380으로 상승되어 있는 것 외에 다른 특이 사항은 없었고, 흉부 방사선 사진에서 좌측 하엽에 4.5 cm 크기의 mass가 관찰되었다. 대장 내시경 검사에서 원위부 하행 결장에서 circumferential, ulcerofungating mass가 관찰되었고 lumen은 5 mm 정도로 좁아져 있었다. 조직 검사 결과 adenocarcinoma with well differentiated로 판명되었다. CT에서는 다발성의 폐, 간 전이 및 림프절 전이를 동반하고 있었다. 대장암 병기 T4N2M1으로 항암 치료를 계획하고, FOLFOX chemotherapy를 시행하였다. 환자가 심한 손, 발 저림 증상을 호소하여 28차 항암 치료 후 FOLFIRI chemotherapy로 변경하였다. 59차 항암 치료 후 primary lesion인 대장암과 폐, 간 전이 및 림프절 전이는 모두 완치되었다. 이후 항암 치료를 종료하고 추적 관찰 중, 항암 치료 종료 6개월 후 간에서 한 개의 전이성 nodule이 관찰되었다. RFA를 시행하였고, 특별한 문제는 없었다. 현재 RFA 시행 후 3개월인 상태로 특별한 문제없이 외래 추적 관찰 중이다.

CHIEF COMPLAINT

M/55

- ◆ Lower abdominal pain

PRESENT ILLNESS

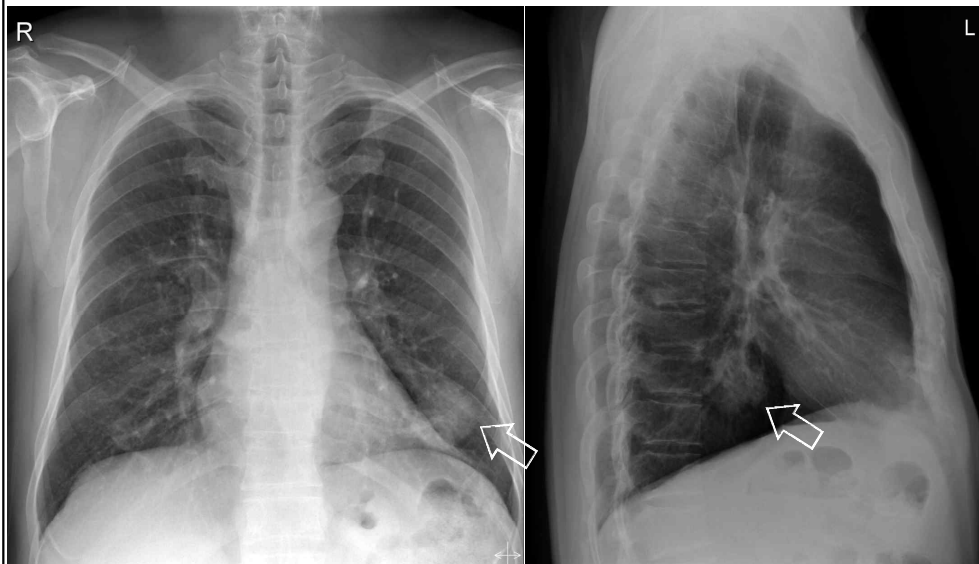
- ◆ A 55 year old man was admitted to the hospital because of a sudden onset lower abnormal pain occurring on the previous day.

<ul style="list-style-type: none"> ◆ Past History <ul style="list-style-type: none"> - DM / HTN / Hepatitis / Tbc (-/-/-/-) ◆ Social History <ul style="list-style-type: none"> - smoking: current smoker, 20 PYS - alcohol: social ◆ Family History: N-S ◆ Medication History: N-S
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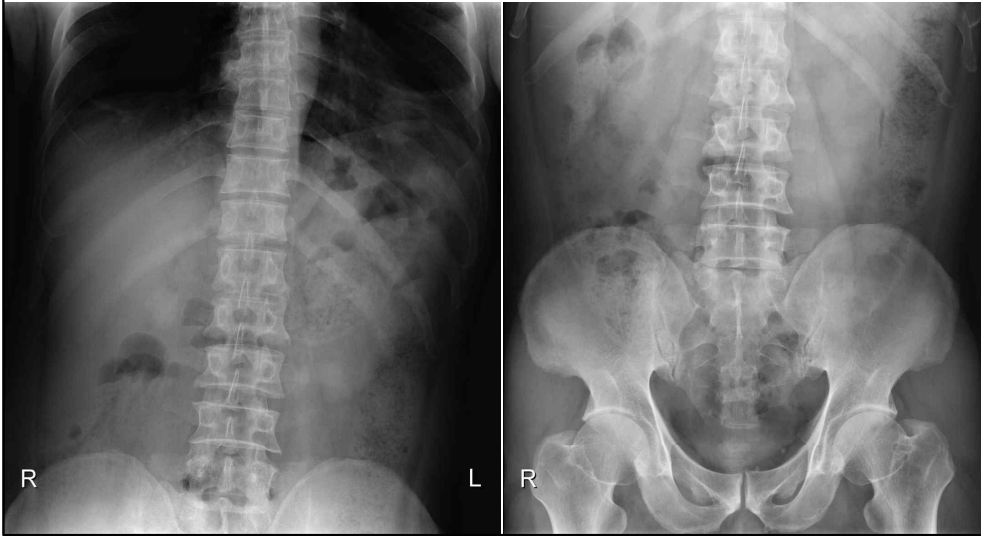
LAB FINDINGS (I)			
Complete blood count		Blood chemistry	
WBC count (10 ⁶ /L)	8,880	FBS (mg/dl)	97
Seg. Neutrophils (%)	64.1	BUN / Cr (mg/dl)	13.5/0.90
Lymphocyte (%)	20.8	Total protein/Alb (g/dl)	7.44/3.84
Monocyte (%)	12.0	AST / ALT (IU/L)	29/38
Eosinophils (%)	2.6	ALP / r-GTP (IU/L)	247/71
Basophils (%)	0.5	Total bilirubin (mg/dl)	0.51
Platelet (10 ⁶ /L)	265,000	Na/K/Cl (mEq/L)	139/4.0/104
RBC count (10 ⁹ /L)	4,530	LDH/CPK (IU/L)	517/192
Hemoglobin (g/dl)	12.9	Amylase (U/L)	88
Hematocrit (%)	38.2	hsCRP (mg/L)	16.05
MCV/MCH/MCHC	84/28.5/33.8		

LAB FINDINGS (II)

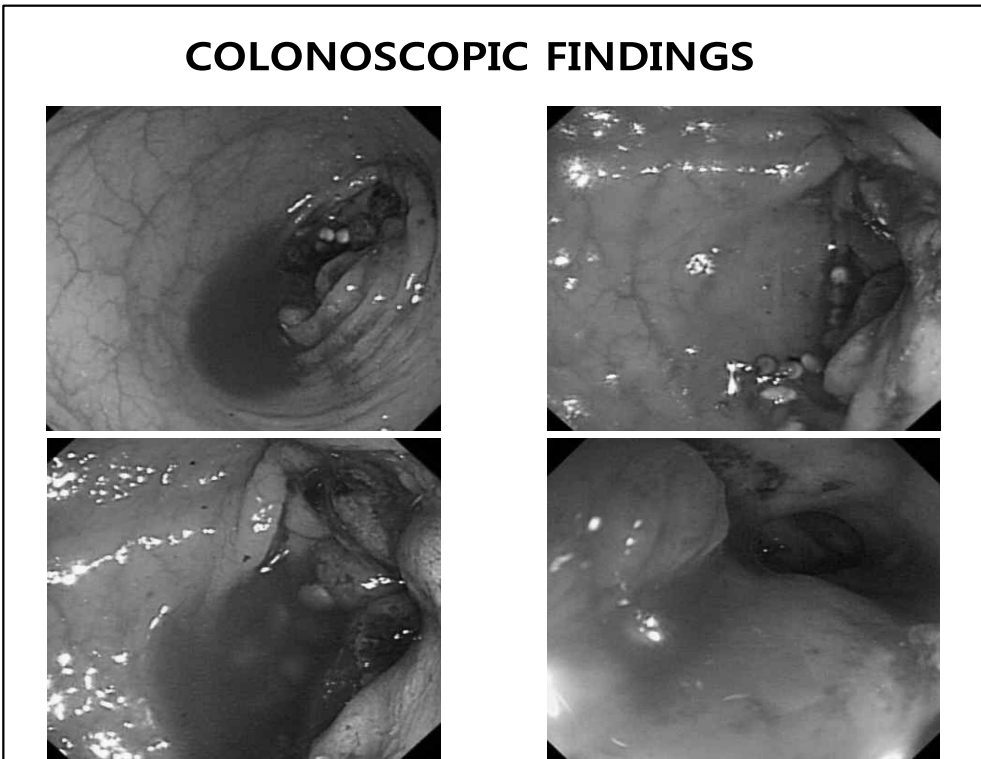
Urinalysis		Blood coagulation	
Glucose	Negative	Prothrombin time	
Color	Yellow	PT (%)	108.9
Leukocyte	-	INR	0.96
Bilirubin	Negative	PT (s)	11.2
Ketone	Negative	Activated PTT	
Specific gravity	1.025	aPTT (s)	32.5
Occult Blood	Negative		
PH	5.0	Tumor marker	
Protein	Negative	CEA (ng/ml)	380.0
Urobilinogen	Negative		
Nitrite	Negative		
WBC	0-1		
RBC	4-9		

CHEST X-ray

ABDOMEN



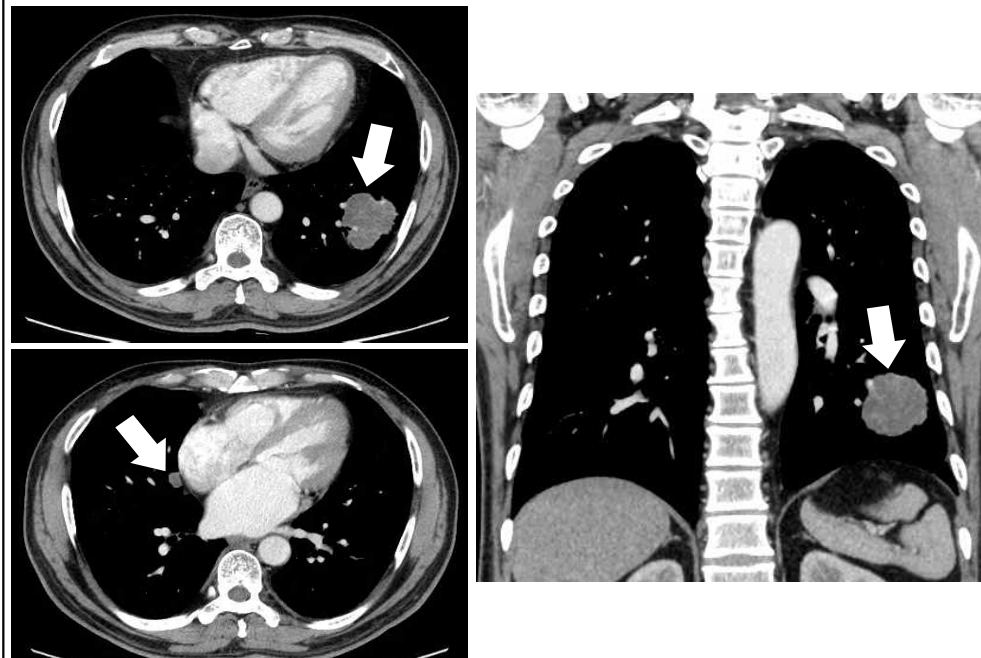
COLONOSCOPIC FINDINGS



ABDOMEN CT



CHEST CT



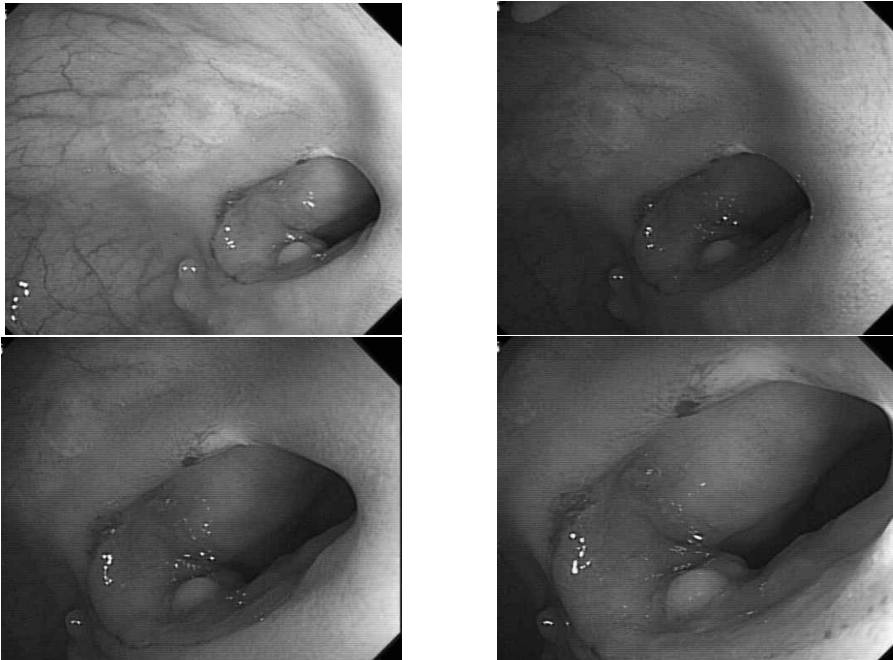
DIAGNOSIS

- ◆ Adenocarcinoma, well differentiated at descending colon with multiple lung and liver metastasis (T4N2M1, stage IV)

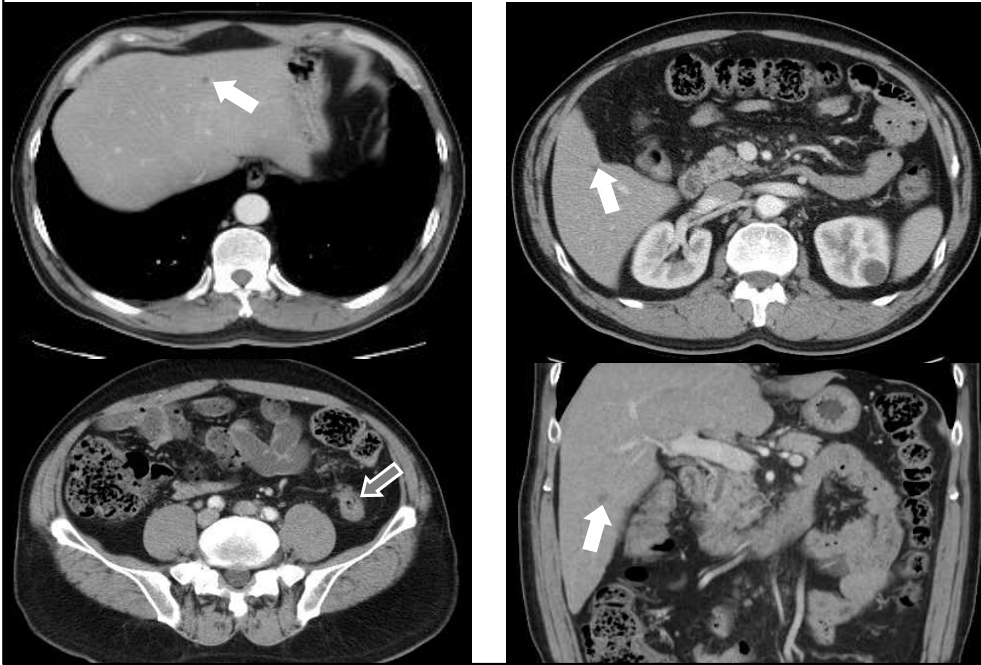
TREATMENT PLAN

- ◆ FOLFOX Chemotherapy

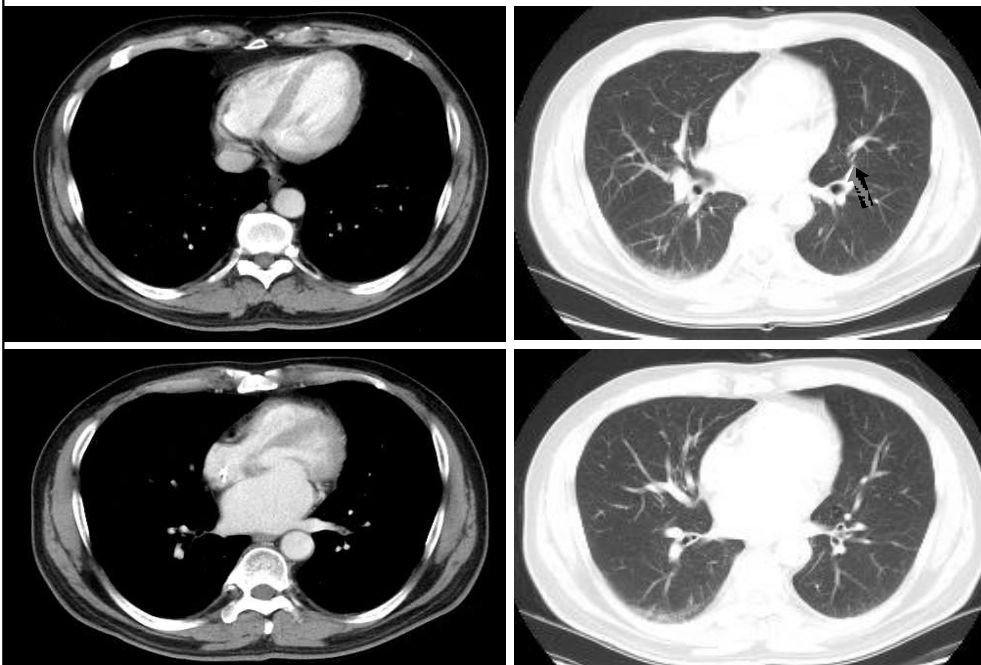
COLONOSCOPY (after 28th FOLFOX)



ABDOMEN CT (after 28th FOLFOX)



CHEST CT (after 28th FOLFOX)



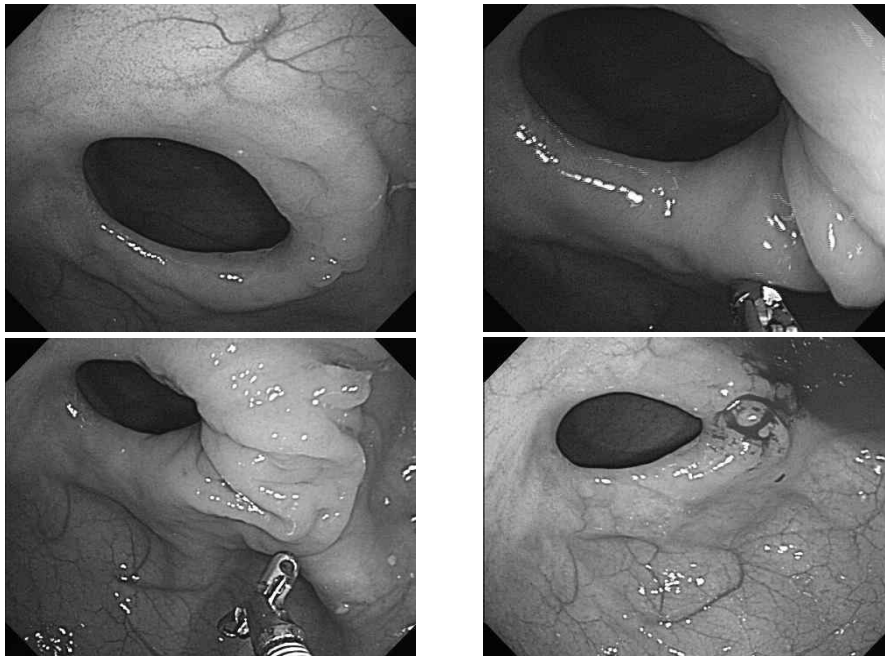
PROGRESS NOTE

- ◆ Progression of tingling sensation

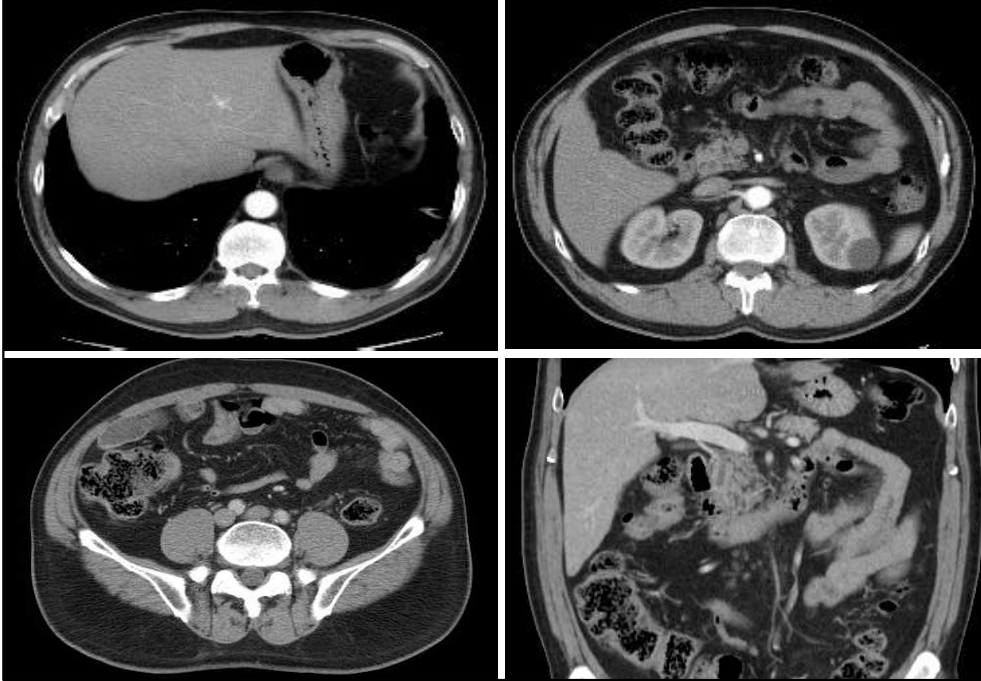
TREATMENT PLAN

- ◆ Change to FOLFIRI Chemotherapy

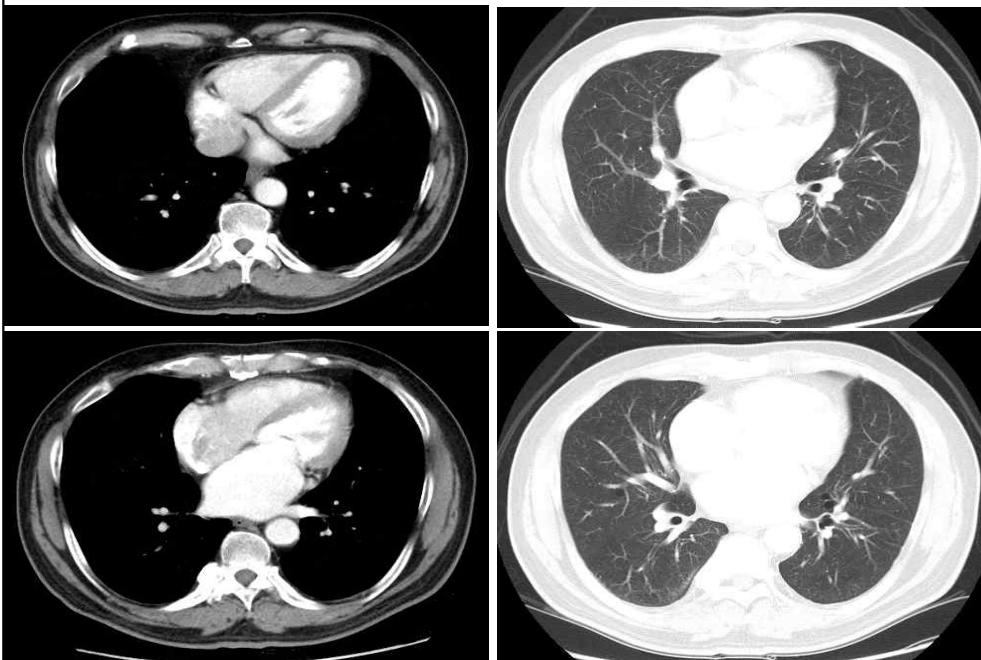
COLONOSCOPY (3 months after 59th FOLFIRI)



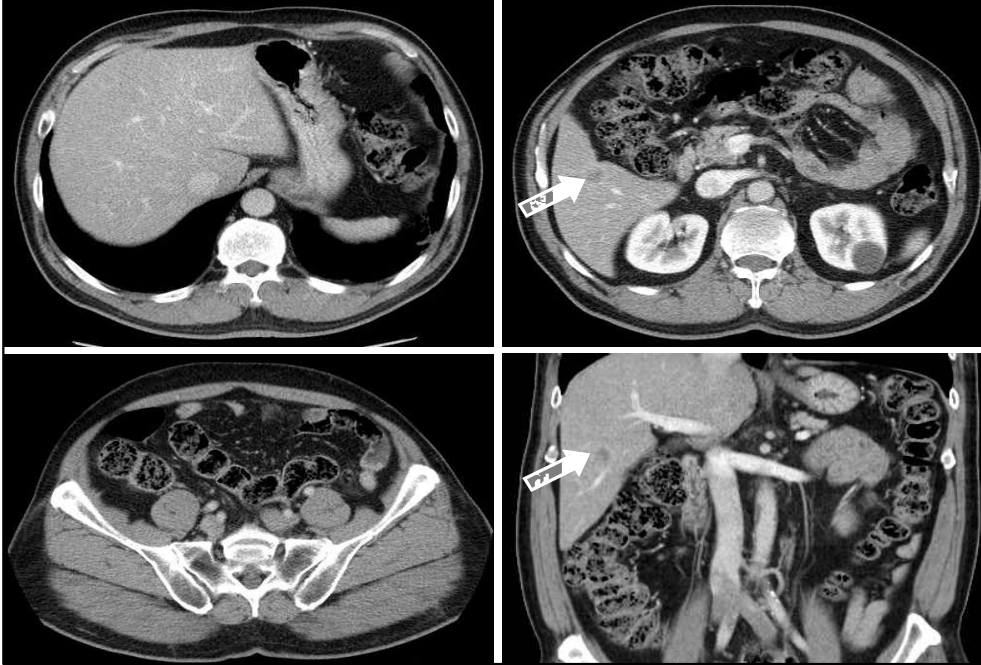
ABDOMEN CT (3 months after 59th FOLFIRI)



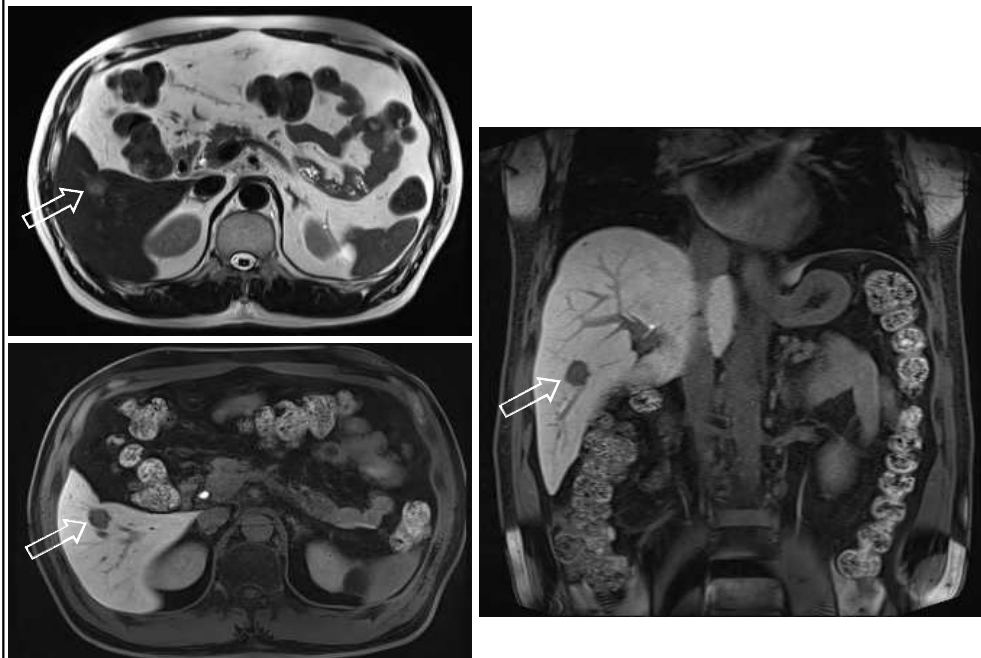
CHEST CT (3 months after 59th FOLFIRI)



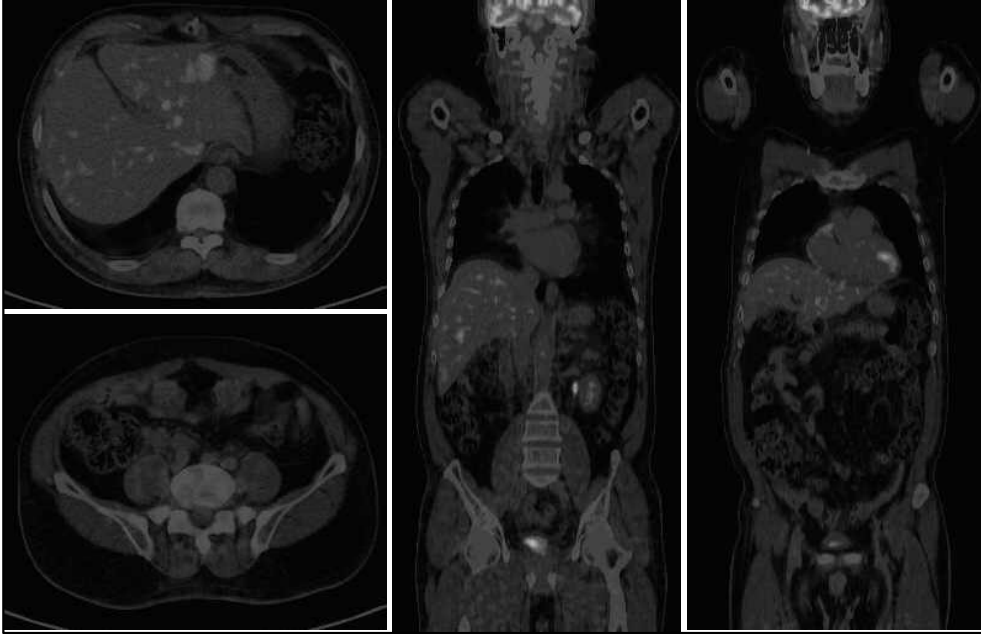
ABDOMEN CT (6 months after 59th FOLFIRI)



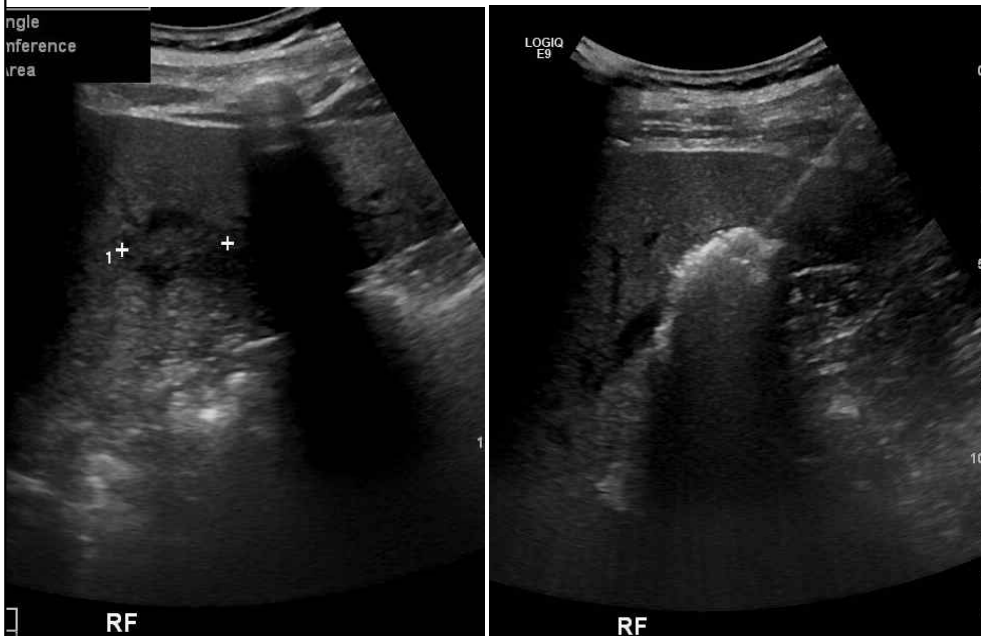
MRI LIVER (6 months after 59th FOLFIRI)



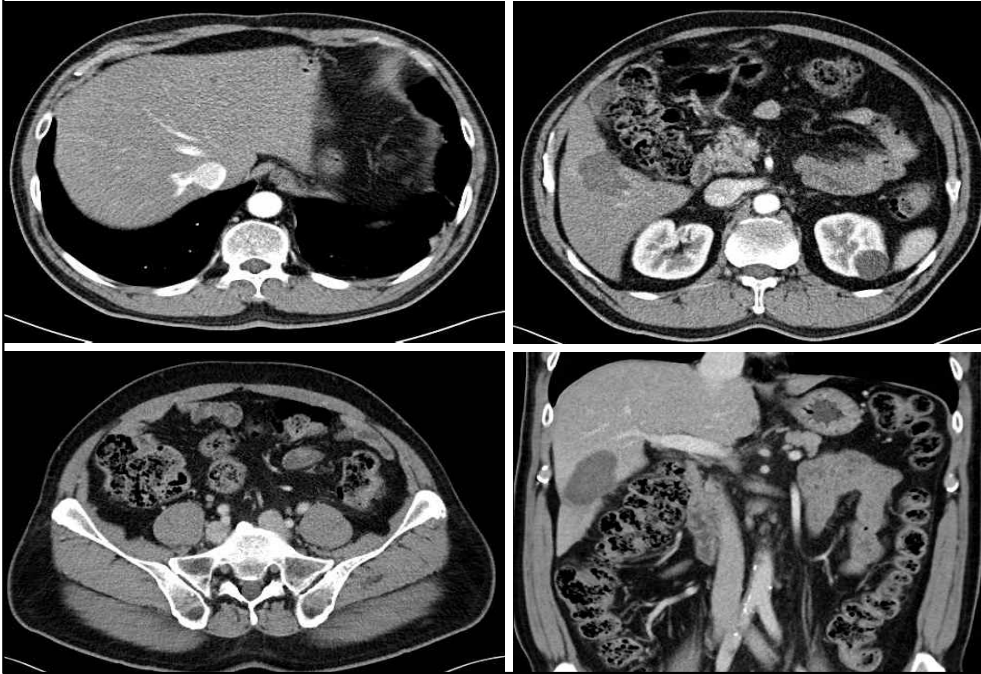
PET CT (6 months after 59th FOLFIRI)



RADIOFREQUENCY ABLATION (RFA)




ABDOMEN CT (3 months after RFA)




SUMMARY

▪ MANAGEMENT CONTENT


1 st line FOLFOX 1 st ~ 28 th Cycle	2 nd line FOLFIRI 1 st ~ 59 th cycle	RFA
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 2008.09 ~ 2009.10 (14 months)

1~11th: 100%, 12~28th: 75%

 2009.10 ~ 2012.02 (29 months)

1st: 100%, 2nd: 75%, 3~59th: 50%

 2012.08.28

Follow up for 4 years 3 months from initial Dx