**OS 217 ONCOLOGY MODULE – Colorectal Cancer**

**CASE**

**General Data**

AS, 62/M, married, Roman Catholic, from Las Piñas City

**Chief Complaint**

Constipation

**History of Present Illness**

6-month history of difficulty defecating

2-month history of decrease in stool caliber, with associated occasional blood-streaked stools and mucoid discharge

Persistence of symptoms prompted consult at PGH Surgery OPD, advised admission

**Review of Systems**

* (+) weight loss ~20% over 6 months
* (+) low-grade fevers, undocumented
* (-) dyspnea
* (+) crampy abdominal pain
* (-) abdominal distension
* (-) vomiting
* (-) dysuria
* (-) hematuria
* (-) bipedal edema

**Past Medical History**

(+) hypertension for 5 years, maintained on Amlodipine with good BP control

(+) pulmonary tuberculosis diagnosed 14 years ago, treated for 6 months

(-) diabetes, asthma, liver or kidney disease

**Family Medical History**

(+) hypertension – father and siblings

(+) diabetes mellitus – paternal grandmother

(-) asthma, liver or kidney disease, cancers

**Personal and Social History**

(+) 26 pack-year smoking history, stopped when he was diagnosed with PTB

(+) occasional alcoholic beverage intake ~2-3x/month

(-) history of illicit drug use

High school graduate, previously worked as a taxi driver

**Physical Exam Upon Admission**

Coherent, oriented to three spheres, follows commands, not in cardiorespiratory distress

BP 130/80, HR 82, RR 18, T 37.1, Height 157 cm, Weight 46 kg

Anicteric sclerae, slightly pale palpebral conjunctivae, (-) cervical lymphadenopathy

Equal chest expansion, clear breath sounds

Adynamic precordium, normal rate, regular rhythm, distinct heart sounds, (-) murmurs

Soft abdomen, nondistended, (-) tenderness, (-) masses palpated

Full equal pulses, (-) edema

DRE: good squeeze, intact vault, (-) masses/tenderness, (+) blood-streaked stool per examining finger

**Diagnostic Exams Done**

Abdominopelvic CT with triple contrast:

(+) short segment thickening in the sigmoid colon with adjacent tiny air densities extraluminally, (+) fat stranding, (+) perirectal lymph nodes

Hepatobiliary ultrasound:

Normal ultrasound of the liver and biliary tree

Chest Xray:

No infiltrates, mass or nodules.

Colonoscopy:

Scope inserted up to 12 cms from the anal verge only, (+) friable, fungating mass, 90% obstructing

Proctosigmoidoscopy:

(+) friable, fungating mass 10 cm from the anal verge

Biopsy:

Adenocarcinoma, well-differentiated

CEA: 53.57