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Extremely high levels of CA 19-9 levels detected in newly diagnosed patient with pancreatic adenocarcinoma

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Pancreatic cancer has one of the highest mortality rates of any cancer with a poor prognosis and a five-year survival rate of 6%. CA 19-9 is the most well studied pancreatic cancer marker and is an important tool for diagnosis, prognosis and monitoring disease activity. We report a case study of a patient diagnosed with metastatic pancreatic cancer with exceedingly high levels of CA 19-9 not previously seen, to the best of our knowledge. A 72-year-old Hispanic male with a past medical history of colonic tubular adenoma and H. pylori, was referred to the gastroenterology clinic for rapid weight loss over two months, loss of appetite and abdominal pain. The laboratory work-up was significant for elevated liver enzymes, ALP 601, CA 19-9 281431, CEA 6.2. A CT scan showed numerous hypodense hepatic lesions, a hypodense pancreatic mass, and scattered sclerotic lesion of the right pelvis. A liver biopsy revealed adenocarcinoma consistent with pancreatobiliary primary, positive for cytokeratin 7. Given the metastatic picture, chemotherapy was suggested, however the patient elected to transfer to a different institution. CA 19-9 is produced by human pancreatic and biliary ductular cells. There is growing evidence demonstrating that high levels of CA 19-9 are associated with the severity of pancreatic malignancy. The high levels detected in our patient indicated advanced disease and poor prognosis. However, no reported cases of CA 19-9 levels greater than 200,000 have been reported in patients with pancreatic cancer and the precise mechanism of enormous elevation of CA 19-9 remains unclear.

Biography

F Khemani has completed his MD from Medical University of the Americas and currently employed as Research Fellow at Rush University Medical Center in the Hepatology Department.

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