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Review Article

GASTRIC CANCER - A REVIEWFateme parooei¹, Mahmood Anbari², Morteza Salarzaei^{1*}¹ Medical Student, Student Research Committee, Zabol University of Medical Sciences,
Zabol, Iran² Zabol University of Medical Sciences, Zabol, Iran**Abstract:**

Introduction: Gastric cancer in most cases is diagnosed in symptomatic patients with an advanced disease lacking a definite treatment. The common symptoms of the primary diagnosis include weight loss (0.62), stomachache (0.52), nausea (0.34), and swallowing disorder (dysphagia) (0.26).

Methods: In this review article, the databases Medline, Cochrane, Science Direct, and Google Scholar were thoroughly searched to identify the Gastric cancer. In this review, the papers published until early January 2017 those were conducted to study the Gastric cancer were selected.

Findings

Cutaneous metastases are the infrequent symptoms of solid tumors. Cutaneous metastases are mostly seen in tumors of breast, lung, colorectal, kidney, and ovaries and they are uncommon symptoms in the stomach. Gastric cancer metastasis involves adrenal glands, lungs, and bones and it hardly affects the skin.

Discussion and conclusion: Cutaneous metastasis is usually formed after the initial malignancy diagnosis. However, it can be the first symptom of malignancy at times. Cutaneous metastases frequently show the bad prognosis of the disease.

Key words: Gastric, cancer

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INTRODUCTION:

Gastric cancer in most cases is diagnosed in symptomatic patients with an advanced disease lacking a definite treatment. The common symptoms of the primary diagnosis include weight loss (0.62), stomachache (0.52), nausea (0.34), and swallowing disorder (dysphagia) (0.26). The diagnosis of the disease is possible by upper endoscopy and sampling for pathology (1). Gastric cancer can extend to other organs such as esophagus, small intestine, liver, pancreas, and colon (large intestine). It can even attack other areas such as lungs, ovaries, and bones. Among these attacks, we can mention the following examples (2). 1. malignant stomach fistula to the colon that is manifested by fecal vomiting. 2. Release in the lymphatic system that is manifested as a node around the navel or large lymph nodes above the clavicle or it can manifest itself by large ovaries or presence of mass in cul-de-sac owing to intraperitoneal spread (3). Cutaneous metastases are the infrequent symptoms of solid tumors. Cutaneous metastases are mostly seen in tumors of breast, lung, colorectal and ovaries and they are uncommon symptoms in the stomach. Cutaneous metastasis is observed in the gastric carcinoma in a variety of ways (4). A study conducted in this regard indicates that the cutaneous involvement of gastric carcinoma metastases are mostly manifested as zoster or something like Erythroplasia and the latter is called erythroplasia carcinoma (5). However, it can manifest itself as nodule or cellulite. The cutaneous metastases of gastric cancer are created after the diagnosis of primary internal malignancy. However, they are rarely the primary symptoms of gastric cancer (6).

METHODS:

In this review article, the databases Medline, Cochrane, Science Direct, and Google Scholar were thoroughly searched to identify the Gastric cancer. In this review, the papers published until early January 2017 that were conducted to study the Gastric cancer were selected.

FINDINGS:

Cutaneous metastases are the infrequent symptoms of solid tumors. Cutaneous metastases are mostly seen in tumors of breast, lung, colorectal, kidney, and ovaries and they are uncommon symptoms in the stomach (7). Gastric cancer metastasis involves adrenal glands, lungs, and bones and it hardly affects the skin. In a study conducted in this regard, the general prevalence of cutaneous metastases has reported to be 0.7-10.4 percent (8). As for the upper digestive system cancers including gastric cancer, the prevalence of cutaneous metastases is less than 1 percent. Cutaneous metastasis in the gastric carcinoma is realized in different forms (9). A study conducted in this regard indicates that the

cutaneous involvement of gastric carcinoma metastases are mostly manifested as zoster or something like Erythroplasia and the latter is called erythroplasia carcinoma. However, it can manifest itself as nodule or cellulite (10). The cutaneous metastases of gastric cancer are created after the diagnosis of primary internal malignancy. However, they are rarely the primary symptoms of gastric cancer. Cutaneous metastases represent a bad prognosis and indicate the extensive dissemination of the disease and the patients live a short life. In a study, the average life expectancy of gastric cancer patients were 1.2 months after the cutaneous metastasis. However, another study indicated that it was less than one year.

DISCUSSION:

Cutaneous metastasis is usually formed after the initial malignancy diagnosis. However, it can be the first symptom of malignancy at times. Cutaneous metastases frequently show the bad prognosis of the disease. More than 60% of cutaneous metastases are adenocarcinoma a small percentage of which is the origin of gastric carcinoma (11). A study indicated that 6 percent of cutaneous metastases in men and 1 percent of cutaneous metastases in women are reported to originate from adenocarcinoma (12). Thus, the involvement of the skin as a distant metastasis in gastric cancer (specially the adenocarcinoma type) is quite uncommon. Gastric adenocarcinomas are malignant epithelial tumors that originate from the epithelium of the gastric mucosal gland and they quickly attack gastric walls and disseminate in the muscularis- mucosae layers, submucosa layers, and muscularis propria layers (13). Gastric adenocarcinoma can locally disseminate to the neighboring organs and it can disseminate to distant organs through blood. It tends to form metastasis on the abdominal wall, liver, lung, and bone. If gastric adenocarcinoma provides cutaneous metastasis, it tends to do so on the scalp, neck, axilla, and thorax. The cutaneous involvement in the gastric cancer metastasis can be seen as Erythroplasia zoster contact, allergic dermatitis, red plaque, or a scar.

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