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Small bowel obstruction from metastatic mesenteric/omental infiltration from a cutaneous squamous cell carcinoma: A rare presentation**Veral Vishnoi**

University of Newcastle, Australia

We present a 57-year-old male with known metastatic cutaneous Squamous Cell Carcinoma (SCC) with an unknown primary presenting with a small bowel obstruction. Malignancies of the small bowel are rarely primary, but rather dominated by metastatic melanoma followed by metastatic adenocarcinoma from the pancreas, colon or stomach. Metastatic cutaneous SCC travels to lymph nodes, brain, bone, lung, skin and very rarely to the gastrointestinal tract. Our patient had been on palliative chemotherapy when he presented with a one week history of nausea, progressing to feculent vomiting, abdominal distension and obstipation. A computed tomography scan demonstrated significant stranding around the omentum and mesenteric fat with a small cystic mesenteric mass with a resultant small bowel obstruction. Given that patients advanced disease a conservative approach was taken with gastric decompression via a nasogastric tube and intravenous fluid resuscitation. A radiological guided fine needle aspiration of the mass was performed, confirming cutaneous SCC, which is a very rare occurrence.

Biography

Veral Vishnoi has completed his Bachelor of Medicine, Bachelor of Surgery with Honors from James Cook University in Queensland, Australia. He is currently working as a Surgical Registrar at the John Hunter Hospital in Newcastle. He is also pursuing his PhD with the University of Newcastle in New South Wales, Australia. His research interest is in colorectal surgery in particular diverticular disease.

veral.vishnoi@hnehealth.nsw.gov.au
veralvishnoi1612@hotmail.com**Notes:**