A 79-year-old female with repeated vomiting presented an excrescent umbilical lesion (Fig. 1). The diagnostic workup with gastroscopy and abdominal CT scan showed an antral adenocarcinoma. Tumour markers (CEA and CA 19.9) were normal. It was treated by surgery with a palliative subtotal gastrectomy. The umbilical lesion biopsies revealed a metastasis of the gastric adenocarcinoma.

Sister Mary Joseph’s nodule refers to a metastatic lesion in the umbilical region originating from intra-abdominal or pelvic tumours. The incidence of metastatic tumours in the umbilical region that are secondary to intra-abdominal tumours is very low. The primary tumour that metastasizes most frequently in the umbilical region of a man is the gastric tumour, followed by the colon, rectum, and pancreas. In women, the most frequent is an ovary tumour. The metastatic route of digestive tumours to the abdominal skin is variable: direct invasion, vascular (blood, lymphatic) invasion or through embryological remnants. The emergence of umbilical metastasis of gastrointestinal tumours (Sister Mary Joseph’s nodules) worsens the prognosis.

RECOMMENDED REFERENCES